

PHA Plans

Streamlined Annual Version

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

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

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

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

Streamlined Annual PHA Plan

for Fiscal Year: 2008

PHA Name:

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan Agency Identification

PHA Name: Altoona Housing Authority **PHA Number:** WI033

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:				

PHA Plan Contact Information:

Name: Cynthia Culliton Phone: (715) 834-1842
TDD: Executive Director Email (if available): aha2404@yahoo.com

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

If yes, select all that apply:

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

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

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

Streamlined Annual PHA Plan
Fiscal Year 20
[24 CFR Part 903.12(c)]

Table of Contents
[24 CFR 903.7(r)]

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

A. PHA PLAN COMPONENTS

- 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
- X 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
- 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- X 6. Supporting Documents Available for Review
- X 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- X 8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

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

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

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

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

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

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

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

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

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B. NO

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

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

B. Site-Based Waiting Lists – Coming Year

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

1. How many site-based waiting lists will the PHA operate in the coming year? 0
2. Yes No: Are any or all of the PHA’s site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

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

A. Capital Fund Program

1. X Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Yes X No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

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

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. Yes X No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status	
a. Development Name:	
b. Development Number:	
c. Status of Grant:	
<input type="checkbox"/>	Revitalization Plan under development
<input type="checkbox"/>	Revitalization Plan submitted, pending approval
<input type="checkbox"/>	Revitalization Plan approved
<input type="checkbox"/>	Activities pursuant to an approved Revitalization Plan underway

3. Yes X No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:

4. Yes X No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

5. Yes X No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program

(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. Yes X No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)

2. Program Description:

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the Section 8 homeownership option?

If the answer to the question above was yes, what is the maximum number of participants this fiscal year?

b. PHA-established eligibility criteria

Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria:

c. What actions will the PHA undertake to implement the program this year (list)?

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
 - low utilization rate for vouchers due to lack of suitable rental units
 - access to neighborhoods outside of high poverty areas
 - other (describe below):
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: State Of Wisconsin

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA’s public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
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/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. X Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development. X Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
NO	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Altoona Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P03350105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	3000.00	0	0	
4	1410 Administration	300.00	300.00	300.00	300.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	3000.00	5250.00	5250.00	4993.00
8	1440 Site Acquisition				
9	1450 Site Improvement	21826.00	37585.63	37585.63	37585.63
10	1460 Dwelling Structures	18000.00	2990.37	2990.37	2990.37
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	46126.300	46126.00	46126.00	45869.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Altoona Housing Authority			Grant Type and Number		Federal FY of Grant: 2005
			Capital Fund Program Grant No: WI39P03350105		
			Replacement Housing Factor Grant No:		
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI39P03350105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
W1033	Replace computer	1408		3000.00	0	0	0	
W1033	Advertise for bids, etc	1410		300.00	300.00	300.00	300.00	Complete
W1033	A/E Sidewalks	1430		3000.00	5250.00	5250.00	4993.00	
W1033	Emerg. Break underground pipe, elderly	1450		0	3431.07	3431.07	3431.07	Complete
W1033	Replace sidewalk & patio elderly	1450		21826.00	34154.56	34154.56	34154.56	Complete
W1033	Complete roofing project elderly	1460		18000.00	2990.37	2990.37	2990.37	Complete
TOTALS				46126.00	46126.00	46126.00	45869.00	

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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI039P03350106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	0	2429.00	1524.82	1524.82
4	1410 Administration	500.00	0	0	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	40301.00	39577.00	22670.44	22670.44
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	40801.00	42006.00	24195.26	24195.26
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI039P03350106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: 3)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI139P03350106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHAWide	Adv. For bids	1410		500.00	0	0	0	
PHAWide	Replace asph. Driveways family	1450		26700.00	11305.56	0	0	
PHAWide	Reseal elderly parking lot	1450		5000.00	0	0	0	
PHAWide	Sidewalks, patios elderly	1450		0	22670.44	22670.44	22670.44	Complete
PHAWide	Replace computer, printer	1408		0	2429.00	1524.82	1524.82	
PHAWide	Replace signage	1450		3000.00	2000.00	0	0	
PHAWide	Replace fencing	1450		5601.00	3601.00	0	0	
Totals				40801.00	42006.00	24195.26	24195.26	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI39P03350107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies x Revised Annual Statement (revision no: 1) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	21798.00			
10	1460 Dwelling Structures	13200.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	8000.00			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	42998.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI39P03350107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies x Revised Annual Statement (revision no: 1) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Altoona Housing Authority			Grant Type and Number Capital Fund Program Grant No: WI39P03350107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name Altoona Housing Authority				<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 3	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2006 PHA FY:	Work Statement for Year 3 FFY Grant: 2007 PHA FY:	Work Statement for Year 4 FFY Grant: 2008 PHA FY:	Work Statement for Year 5 FFY Grant: 2009 PHA FY:
<i>PHA Wide</i>	Annual Statement	40801.00	42998.00 Actual	42998.00 Estimate	42998.00 Estimate
CFP Funds Listed for 5-year planning		42006.00 Reflect amendment	42998.00	42998.00 Estimate	42998.00 Estimate
Replacement Housing Factor Funds					

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary						
PHA Name: Altoona Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI139P03350108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations					
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	42998.00				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1501 Collaterization or Debt Service					

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

PHA Name: Altoona Housing Authority	Grant Type and Number Capital Fund Program Grant No: WI139P03350108 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	42998.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name:	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:
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Original Annual Statement
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 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

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3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)				

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

PHA Name:	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:
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		Original	Revised	Obligated	Expended
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23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name:	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
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Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
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17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)				

Annual Statement/Performance and Evaluation Report
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PHA Name:	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:	Federal FY of Grant:
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Original Annual Statement
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Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
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22	Amount of line 21 Related to LBP Activities				
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24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Altoona Housing Authority

2404 Spooner Ave, Altoona, WI 54720

Phone: 715-834 1842 Email: aha2404@yahoo.com

Violence Against Woman Act (VAWA)

Dear Public Housing Participants:

The Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162), (VAWA), was signed into law January 05, 2006, and is now in force. The primary objective of VAWA is to reduce violence against women who are victims of abuse. This includes families participating in the HUD Public Housing and Section 8 Housing Choice Voucher programs. This law prohibits the eviction of victims of domestic violence if the violence is the sole reason for the eviction although the title of the law appears to make it applicable only to protect women; it actually protects children and male victims as well.

What this means to you as a tenant is that if you are in danger of losing your housing due to acts of domestic violence including disturbing the neighbors or damages to the unit, and if you sign a certification that you are a victim of domestic violence, the landlord can only proceed with the eviction against the abuser, not the remainder of the family. The victim must complete a certification form which is available in our office, and return it within 14 business days, stating that they are a victim and stating the name of the abuser. The victim will also be required to provide official documentation by:

1. A Federal, State, tribal, territorial, or local police or court record; and
2. Documents signed by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from whom the victim has sought assistance in addressing domestic violence. The professional must attest under penalty of perjury to their belief that the incidents in question are bona fide.

If the victim does not provide the certification and/or verification, the landlord may proceed with the eviction against the whole family.

PLEASE BE AWARE THAT THIS DOES NOT LIMIT AN EVICTION DUE TO ANY LEASE VIOLATION NOT BASED ON AN ACT OF VIOLENCE AGAINST A FAMILY MEMBER, OR AN EVICTION BECAUSE THE OCCUPANT CAN BE DEMONSTRATED TO POSE AN ACTUAL OR IMMINENT THREAT TO OTHER TENANTS OR THE PROPERTY'S EMPLOYEES.

If you have any questions, or would like guidance in situations covered under VAWA, you may contact your caseworker, for information.

Cindy Culliton
Executive Director for
Altoona Housing Authority
715-834-1842

Board of Directors: Ralph Ely, Chairman Agnes Karpe, Vice Chair
Ray Henning, Tony Sykora and Greg Manney

THE HOUSING AUTHORITY OF THE CITY OF ALTOONA

Violence Against Woman Act (VAWA)

Be it resolved by the Housing Authority of the City of Altoona Board of Commissioners that the Housing Authority will place in policy and recognize the VAWA and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162).

Whereas the VAWA Act will be available to residents for review along with a letter explaining the act and form HUD-50066. In the event a resident is in need of filing paperwork for the VAWA Act there will also be included a list of organizations that will be of assistance to any person who is need of information or services in accordance to being a victim of abuse.

Date Adopted: _____05/13/08_____ Resolution #__202_____

____Ralph Ely_____
Chairman

____Cindy Culliton_____
Executive Director

City of Altoona

Housing Authority

(715) 834-1842

Violence Against Women Act Public Law 109-162 Section 603 of the law amended Section 5A of the U. S. Housing Act (42 U.S.C. 1437c-1) (VAWA)

The Housing Authority of the City of Altoona will follow the enactment of this law to protect victims of criminal domestic violence, dating violence, sexual assault, or stalking and elder abuse – as well as members of the victim’s immediate family, from losing their HUD assisted housing as a consequence of the abuse of which they were the victim. The Altoona Housing Authority supports and assists victims of domestic violence, dating violence; sexual assault or stalking and elder abuse through various notification programs available within Eau Claire County. (1) Direct referral information is provided to the victim and agency to expedite services for the victim to:

- Bolton Refuge House
24 Hour Crisis Line

Eau Claire, WI 54701

Tel (715) 834-9578

- Eau Claire Area Hmong Mutual Assistance
423 Wisconsin St

Eau Claire, WI 54703

(715) 832-8420

- Altoona Police Department
Emergency 911

Dispatcher, Altoona, WI 54720

Tel (715) 839-4972;

- Eau Claire County Sheriff’s Department
Emergency 911.

Dispatcher, Altoona, WI 54720

(715) 839-4972;

- Wisconsin Coalition Against Domestic Violence, 1400 East Washington Avenue, Suite 103, Madison, WI 53703;
Tel: (608) 255-0539; Fax: (608) 255-3560; Domestic Violence Hotline – 1-800-799-7233

Domestic Violence

You CAN do something about domestic violence

Domestic violence is a pattern of many behaviors directed at achieving and maintaining power and control over an intimate partner, such as physical violence, emotional abuse, isolation of the victim, economic abuse, intimidation, and coercion and threats. If someone is abusing you or someone in your household, you do not have to accept it—even if your spouse is the abuser. The police and courts can help you stop the abuse.

Where can you get help in an emergency?

In a crisis situation, call 911 or the police.

Many hospitals and social service agencies help victims of domestic violence. Look in the Yellow Pages under “domestic violence help,” “domestic violence shelters,” “human services organizations,” or “crisis intervention” or search these terms and your locality on an Internet search engine. In addition, every state has a coalition against domestic violence. These coalitions can be valuable resources for victims of domestic violence seeking services and referrals. You can also call the National Domestic Violence Hotline at 1-800-799-SAFE or 1-800-787-3224 TTD for immediate help. It is important that you develop a safety plan to protect yourself and your children in the case of an emergency. Agencies, advocates, and shelters that assist victims of domestic violence can help you develop your safety plan. It is also important to update your safety plan as needed to address changing circumstances or new concerns.

Domestic violence is against the law

It is a crime in all states, though each state’s laws are a little different.

Abuse can include:

- Physical attacks, including forced sexual relations
- Verbal abuse or harassment, including disrespectful
or demeaning comments

- Threats against you or another family member
- Creating disturbances at your place of work
- Harassing telephone calls
- Spying on you
- Child abuse

Domestic violence can be handled in three different types of courts:

- Criminal court, where the state will prosecute the abuser (possible crimes include abuse of intimate partner, violation of a protection order, elder abuse, murder, rape, assault, kidnapping, false imprisonment, property destruction, vandalism, trespassing, stalking, unlawful possession or concealment of a weapon, intimidating a witness, and many others)
- Civil court, where you might address violation of a protection order or sue for money damages (possible civil lawsuits include sexual harassment, personal injury)
- Divorce, or family, court (family violence directly affects divorce proceedings and can be a factor in limiting or prohibiting the abuser's rights to child custody or visitation privileges) Domestic violence might also involve child abuse and neglect and might impact on other areas of law, such as public benefits, immigration status, etc.

A Court Order of Protection

Your fastest form of legal help is to get a Court Order of Protection. A Court Order of Protection is an official legal notice, enforceable in court that requires the abuser to stop the violence and abuse.

Relief available under a Court Order of Protection can be tailored to your specific needs and can address your concerns. It can order the abuser to stay away from you and can prevent him from contacting you by phone, mail, e-mail, fax, or through third parties. It can force the abuser to move out of your home and give you exclusive use of the car. The court may award temporary custody of children to you, along with child support, spousal support, and the continuation of insurance coverage. The police can arrest and jail the abuser for violating the order.

To get a Court Order of Protection: Call the local State's or district attorney or tell the police you want to get one. They will tell you who to contact. You will have to go to court.

In court, the judge needs to be convinced that you have been threatened with violence or that you have suffered abuse. Witnesses, including police officers, can help your case. Depending on your state law and how the court applies it, physical evidence is also helpful, but not essential. Physical evidence could include signs of physical abuse such as bruises, photos of physical damage to property (the table he smashed, the hole he punched in the wall), or objects used in an assault (the ashtray he threw, the knife he brandished).

For Court Orders of Protection to work

The order should focus on your specific safety needs. If you have children and are concerned for their safety, you must specifically request custody and visitation restrictions or "no contact" orders.

You must call the police every time the order is violated.

You should make lots of copies and carry a copy everywhere, especially if it has custody or visitation provisions.

A protection order is one tool that can help you gain your independence and stop your abuser from hurting you and your children. You should contact a domestic

violence advocate and a qualified attorney in your area to discuss ways of ensuring the safety of you and your children, which can include getting a protection order.

Where can I get more information?

A national information and referral center is the National Coalition Against Domestic Violence, <http://www.ncadv.org/> or 303-839-1852. The National Coalition maintains a listing of state coalitions against domestic violence that can be accessed from their Web site. You can also call the National Domestic Violence Hotline at 1-800-799-SAFE or 1-800-787-3224 TTD for immediate help. There may also be a local hotline number in your area, which you can get by calling 1-800-799-SAFE.

Many communities offer shelters for battered women and their children. Details on these shelters are available from the police, crisis intervention services, hospitals, churches, family or conciliation courts, departments of health and human services, or women's organizations such as the local or state chapter of the National Organization for Women (NOW).

Where can I find a lawyer?

Many state, county, and city bar associations operate lawyer referral and information services. These programs can provide you with information on the legal system and refer you to a private attorney with expertise in family law. Check in the phone book under the name of the bar association or in the Yellow Pages under "lawyer referral services," or access www.abanet.org/legalservices/public.html.

Depending on your income, you may qualify for free or reduced-cost legal services. Check with your local bar association, look in the Yellow Pages under "legal aid," "legal assistance," or "legal services," or access the Internet site above.

This pamphlet focuses on broad legal principles and the information provided should not be acted on without professional advice. Contact a lawyer for the specific law in your state. This pamphlet does not necessarily represent the official policies of the American Bar Association.

American Bar Association

Division for Public Education

541 North Fairbanks Court

Chicago, IL 60611-3314

