

PHA Plans

Streamlined 5-Year/Annual Version

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

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

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain 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 5-Year Plan for Fiscal Years 2005 - 2009

Streamlined Annual Plan for Fiscal Year 2009

FLORENCE HOUSING AUTHORITY

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

Streamlined Annual PHA Plan
PHA Fiscal Year 2009
[24 CFR Part 903.12(b)]

Table of Contents

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

Attachment "A" AL054A01

Civil Rights Certifications (included with PHA Certifications of Compliance) and Significant Amendment

Attachment "B" AL054B01

Violence Against Women Act

Attachment "C" AL054C01

Resident Advisory Board and Comments

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Capital Fund Program Original Annual Statement FY2009

Attachment "E" AL054E01

Stimulus Original Annual Statement FY2009

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P&E Statements for CFP FY 2008

Attachment "G" AL054G01

P&E Statements for CFP FY 2007

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Attachment "I" AL054I01

CFP Five Year Action Plan

AL054V01

PHA 5 Year and Annual Plan

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Florence Housing Authority</u> PHA Code: <u>AL09P054</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/01/2009</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>647</u> Number of HCV units: <u>677</u>					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
PHA 1:						
PHA 2:						
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: Provide safe, well-maintained, decent and affordable housing and social services to low-income families, senior citizens and disabled persons in a fair, respectful, progressive and professional manner.					

5.2

Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- PHA Goal: Expand the supply of assisted housing
Objectives:
 - Apply for additional rental vouchers:
 - Reduce public housing vacancies: **Reduce vacancies by 2% annually.**
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments **The PHA will attempt to increase the supply of housing by the year 2010, if there is a proven need.**

- Other: (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
 - Improve public housing management: **(PHAS 93 and MASS 30 score)**
 - Improve voucher management: **(SEMAP score 97)**
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units: **With the use of Capital Fund Program funds, the PHA will continue ongoing efforts to improve the livability, security, energy efficiency and preserve the physical integrity of the structures. By implementing these improvements, the PHA has established the goal of having the units compatible with the private market rentals in the area by the end of the year 2010.**

- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices
Objectives:
 - Provide voucher mobility counseling:
 - Conduct outreach efforts to potential voucher landlords
 - Increase voucher payment standards
 - Implement voucher homeownership program:
 - Implement public housing or other homeownership programs:
 - Implement public housing site-based waiting lists:
 - Convert public housing to vouchers:
 - Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment
Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: **With the use of flat rents and the adopted Deconcentration Policy, the PHA has a goal of increasing the income level of its residents. The PHA will strive to increase the median income by 2% annually.**
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements: **Employ four police officers and screen all Public Housing applicants.**
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities) **Maintain Magnolia Gardens I & II and Carver Heights elderly unit as elderly only facilities.**
 - Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
 - Increase the number and percentage of employed persons in assisted families: **Increase the number of employed residents or family members by 2% annually.**
 - Provide or attract supportive services to improve assistance recipients' employability: **Maintain a minimum of 25 families in the Family Self Sufficiency Program.**
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 - Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: **The PHA will continue to undertake affirmative equal access for all applicants which is reinforced in Section IV, Paragraph 4, of the Admissions and Continued Occupancy Plan.**
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: **The PHA has 44 apartments, which have been modified for the handicapped in accordance with Statutory 504 Requirements. Additionally, the PHA is currently and will continue to make handicapped modifications based on individual need, which exceed 504 requirements.**
 - Other: (list below)

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: NONE</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Florence Housing Authority 110 South Cypress Street, Suite 1 Florence, AL 35630</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>
9.1	<p>Strategy for Addressing Housing 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. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>

Additional Information. Describe the following, as well as any additional information HUD has requested.

(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.

1. The PHA established the goal to reduce vacancies by 2% annually. On March 31, 2007, the PHA had 40 vacancies. On March 1, 2008, the PHA had 17 vacancies (Source: HUD Occupancy Report, formally HUD Form 1234)
2. The PHA has established the goal to increase the supply of housing if there is a proven need. Currently, the housing need is being satisfied with the existing inventory. However, this situation will be monitored closely by the PHA in accordance with future trends for additional housing needs.
3. The PHA established the goal to improve the PHAs score. Last year, the PHAs score was 92.
4. The PHA established the goal to keep its SEMAP score at a high level. Last year, the SEMAP score was 100.
5. The PHA established the goal of having units compatible with private market rentals by the year 2009. With the use of Capital Fund and Capital Bond Fund, the PHA is on schedule meeting this goal.
6. The PHA established a goal to increase the average income of residents 2% annually. The average income of residents was \$7,420. On March 31, 2007, the average income of residents was \$7,095. This is down 4.38%. While the PHA did not meet this goal efforts will be made in the coming year to meet this goal.
7. The PHA established the goal to continue PHDEP efforts, hire police officers, and screen applicants. The PHA is meeting the requirements of this goal.
8. The PHA established the goal to maintain Magnolia Gardens I and II and Carver Heights Elderly Building as elderly housing. The PHA is meeting the requirements of this goal.
9. The PHA established the goal to increase the number of employed residents by 2% annually. While the PHA did not meet this goal, efforts will be made in the coming year to meet this goal.
10. The PHA established the goal to maintain 25 families in the FSS Program, and provide funding to Boys and Girls Clubs of Northwest Alabama. This goal is being met.
11. The PHA established the goal to continue the policy to assure affirmative equal access for all applicants. The PHA is meeting this goal.
12. The PHA established the goal to make handicapped modifications to units exceeding 504 requirements based on individual need. The PHA is meeting this goal.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

10.0

11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
- (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
- (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
- (g) Challenged Elements
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

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ATTACHMENT “A”

Civil Rights Certifications

[24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations. It is the policy of the Housing Authority to comply with all Federal, State, and local nondiscrimination laws and with rules and regulations governing Fair Housing and Equal Opportunity in housing and employment. The Housing Authority will comply with all laws relating to Civil Rights, including: Title VI and VIII of the Civil Rights Act, Executive Order 11063, Section 504, Age Discrimination Act and American With Disabilities Act.

To further our commitment to fully comply with applicable Civil Rights laws, the Housing Authority will provide Federal/State/Local information to public housing residents regarding “discrimination” and any recourse available to them during resident orientation session, resident meetings and reexaminations.

Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notification for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet regulatory compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or Modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in statutory requirement for administration of Public Housing requiring public comment and/or public hearing.

B. Significant Amendment or Modification to the Annual Plan

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;

- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

Attachment B

Violence Against Women Act Compliance Description

HUD published Notices PIH 2006-23 and PIH 2006-42 for the implementation of the Violence Against Women and Justice Department Reauthorization Act of 2005. The Authority distributes brochures to all applicants and at all re-examinations that fully explains the person's rights and reporting procedures for incidents of domestic violence that occur within the Authority's housing programs. The brochure also clearly states that the Authority will not evict or terminate the Housing Choice Voucher assistance of victims of criminal domestic violence, dating violence, sexual assault, or stalking, as well as members of the victims' family listed on the dwelling lease and/or Housing Choice Voucher. Each person is required to acknowledge in writing that they received the information and understand the Act. Landlords are informed of the Act and its requirements at all Landlord Briefings. The staff has attended workshops on the Act and makes referrals to other agencies for needed services. The Department of Human Resources is called immediately if there is a possibility that children are involved.

The Authority only takes action to have the person committing the violence removed from the dwelling lease and/or Housing Choice Voucher for the protection of the family. Based on the requirements contained in HUD Notice 2006-23, the Authority has implemented the requirement of written certification from the victim that the alleged incident of abuse is bona fide and agrees to have the alleged abuser removed from the dwelling lease and/or the Housing Choice Voucher. The Authority will also allow the victim and remaining family members to relocate for safety reasons to another public housing development managed by the Authority and/or issue the Housing Choice Voucher family a Voucher, which will allow for relocation.

The Authority works in partnership with SafePlace, Inc. which is the only advocacy agency and confidential shelter for victims and survivors of domestic violence in the Florence, Alabama area. The Authority refers individuals to SafePlace and also receives referrals for housing from SafePlace. The Public Housing Property Managers have been trained by SafePlace on prevention and proper reaction to domestic violence allegations. In addition all four Property Management offices which were created under the Authority's conversion to Asset Management are now temporary domestic violence shelters until the victim involved can be transported to the SafePlace shelter. Each office has a sign which indicates the Authority's involvement in this program. One of the management offices is also the landlord for the Housing Choice Voucher Program so that Property Management office handles the Housing Choice Voucher program referrals for temporary shelter. If a private landlord is evicted a tenant under the Housing Choice Voucher program for domestic violence in the dwelling the program participant will be referred to Legal Services of Alabama for representation.

The Authority has the services of four (4) full time City of Florence Police officers. The officers have been trained and handle a majority of the domestic violence calls in the Authority's public housing and through this have extensive knowledge of the residents, their families and visitors. The Authority has also delegated its right to issue trespass warnings to these police officers which they use extensively in domestic violence situations. If the

abuser is found on the property of the Authority in the future they will be arrested and removed from the property and prosecuted. This allows the police officers to arrest the abusers without a complaint from the victim.

The Authority's goal is not to evict any public housing resident or terminate Housing Choice Voucher assistance to any victim of violence covered under the Violence Against Women's Act and who certifies to the alleged abuse and complies with the terms of the certification. The Authority takes its role in discovering and combating domestic violence very seriously. The Property Managers are one of the first lines of defense and now that management is on sight more information of this nature is flowing to the property management offices. Much like the Authority's policies and battle against drugs on its properties and in its programs, domestic violence is and will receive the same lack of tolerance and the "one strike and you are out" policy now takes on a whole new meaning and enforcement criteria.

2009 Agency Plan Resident Advisory Board

RESIDENT COMMISSIONER				
Name	Address	Phone	2/12	3/12
Joyce Malone	308-B Handy Homes Florence, AL 35630	764-0522	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

PUBLIC HOUSING				
Name	Address	Phone	2/12	3/12
Cathy Gandy	451-A Cherry Hill Homes Florence, AL 35630	767-5486	<input type="checkbox"/>	<input type="checkbox"/>
Rebecca Edwards	1116-C Carver Homes Florence, AL 35630		<input type="checkbox"/>	<input type="checkbox"/>
Marion Green	308-A Handy Homes Florence, AL 35630	764-4129	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Ruth Lard	208 Magnolia Gardens I Florence, AL 35630	764-0029	<input type="checkbox"/>	<input type="checkbox"/>
Ernestine Turner	1460-A Carver Heights Florence, AL 35630	760-8426	<input type="checkbox"/>	<input type="checkbox"/>
Lucy M. Olive	2106 Magnolia Gardens II Florence, AL 35630	766-9131	<input type="checkbox"/>	<input type="checkbox"/>

HOUSING CHOICE VOUCHER				
Name	Address	Phone	2/12	3/12
Francis Herston	114 Pearl St., E-3 Florence, AL 35633	766-9246	<input type="checkbox"/>	<input type="checkbox"/>
Christina Brooks	1004 Sherrod Avenue Florence, AL 35630	766-3195	<input type="checkbox"/>	<input type="checkbox"/>
Christie Chambers	226 Fulton Street Florence, AL 35630	633-7912	<input type="checkbox"/>	<input type="checkbox"/>
Lana Jackson	145 Duncan Avenue Florence, AL 35630	768-2540	<input type="checkbox"/>	<input type="checkbox"/>
Virnita Rhodes	1301 Appleby Blvd., Apt. B-6 Florence, AL 35630	740-8438	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Sharon Stewart	1109 Bellemeade Street Florence, AL 35630	765-2376	<input type="checkbox"/>	<input type="checkbox"/>

**2009 Agency Plan
Resident Advisory Board**

Part I: Summary		
PHA Name: Florence Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09P054501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 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	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	189,191			
4	1410 Administration (may not exceed 10% of line 21)	105,588			
5	1411 Audit	1,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	44,698			
8	1440 Site Acquisition				
9	1450 Site Improvement	45,000			
10	1460 Dwelling Structures	341,509			
11	1465.1 Dwelling Equipment—Nonexpendable	35,492.94			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part I: Summary					
PHA Name: Florence Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval:	
Type of Grant					
<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	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	293,401.06			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,055,880			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	253,860			
23	Amount of line 20 Related to Security - Soft Costs	155,000			
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: FLORENCE			Grant Type and Number Capital Fund Program Grant No: AL09P054501-09 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
COCC	Managment Fees	1410		105,588				
AL 54-001P	Security	1408		38,160				
Cherry Hill Homes	Community Service Program	1408		13,833				
	Audit	1411		240				
	Consultant Fees	1430		1,900				
	A/E Fees	1430		24,658				
	Site Improvements	1450		15,000				
	Renovate Handicap Access. Units	1460		45,725				
	Bathroom Upgrades	1460		132,649				
	Stoves & Refrigerators	1465.1		7,175				
AL 54-002P	Security	1408		30,000				
Carver Homes/	Community Servics Program	1408		6,525				
Handy Homes	Audit	1411		110				
	Consultant Fees	1430		1,500				
	A/E Services	1430		3,500				
	Site Improvements	1450		5,000				
	Renovate Handciap Access. Units	1460		36,875				
	Stoves & Refrigerators	1465.1		11,692.94				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: FLORENCE			Grant Type and Number Capital Fund Program Grant No: AL09P054501-09 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AL 54-002P	Security	1408		51,360				
Carver Heights	Community Services	1408		13,833				
	Audit	1411		320				
	Consultant Fees	1430		2,568				
	A/E Fees	1430		3,540				
	Site Improvements	1450		10,000				
	Renovate Handicap Access Units	1460	10	63,130				
	Stoves & Refrigerators	1465.1	20	12,750				
AL 54-004P	Security	1408		35,480				
Magnolia Gardens	Audit	1411		330				
I & II	Consultant Fees	1430		2,032				
	A/E Fees	1430		5,000				
	Site Improvements	1450		15,000				
	Renovate Handicap Access. Units	1460	5	63,130				
	Stoves & Refrigerators	1465.1	5	3,875				
	Debt Services	1501		293,401.06				
	GRAND TOTAL			1,055,880				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: FLORENCE				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
COCC	9/2011		9/2013		
AL 54-001P	9/2011		9/2013		
AL 54-002P	9/2011		9/2013		
AL 54-003P	9/2011		9/2013		
AL 54-004P	9/2011		9/2013		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary		
PHA Name: Florence Housing Authority	Grant Type and Number Capital Fund Program Grant No: AL09SP054501-09 Replacement Housing Factor Grant No: NO Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 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	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	91,512			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	66,827			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,135,010			
11	1465.1 Dwelling Equipment—Nonexpendable	43,186			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary						
PHA Name: Florence Housing Authority		Grant Type and Number Capital Fund Program Grant No: AL09S054501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval:	
Type of Grant						
<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	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,336,535				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director			Date		Signature of Public Housing Director	
					Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: FLORENCE			Grant Type and Number Capital Fund Program Grant No: AL09S054501-09 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
COCC	Managment Fees	1410		91,512				
AMP 1	A/E Fees	1430		16,700				
Cherry Hill Homes	Kitchen Cabinets 51 (3BR), 6 (4BR)	1460	57	285,000				
	Range Hoods	1460	57	3,990				
	Convert to 30" Stoves	1465.1	57	17,214				
AMP 2	A/E Fees	1430		16,700				
Carver Homes	Kitchen Cabinets 24 (3BR) 2 (4BR)	1460	26	130,000				
	Range Hoods	1460	26	1,820				
	Convert to 30" Stoves	1460	26	7,852				
	Increase HVAC Duct Size Between Floors for Efficiency	1460	60	30,000				
Handy Homes	Kitchen Cabinets 16 (3BR)	1460	16	80,000				
AMP 3	A/E Fees	1430		16,700				
Carver Heights	Kitchen Cabinets 45 (3BR) 14 (4BR) 1 (5BR)	1460	60	300,000				
	Range Hoods	1460	60	4,200				
	Convert to 30" Stoves	1465.1	60	18,120				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: FLORENCE				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
COCC	9/2011		9/2013		
AMP 1/Cherry Hill	9/2011		9/2013		
AMP 2/Carver Homes	9/2011		9/2013		
AMP 2/Handy Homes	9/2011		9/2013		
AMP4/Magnolia Gardens I	9/2011		9/2013		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary	
PHA Name: FLORENCE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P054501-08 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2008 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
 Performance and Evaluation Report for Period Ending: 12/31/08 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	188,739	188,739	188,739	23,041.07
4	1410 Administration (may not exceed 10% of line 21)	105,588	105,588	105,588	105,588
5	1411 Audit	1,000	1,000	1,000	1,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs	56,000	66,000	56,000	48,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	411,152	401,152	0	106,853.50
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary						
PHA Name: FLORENCE		Grant Type and Number Capital Fund Program Grant No: AL09P054501-08 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2008 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/09 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA	293,401	293,401	293,401	0	
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,055,880	1,055,880	644,728	284,482.57	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs	155,000	155,000	155,000	0	
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date		Signature of Public Housing Director		
				Date		

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: FLORENCE			Grant Type and Number Capital Fund Program Grant No: ALP054501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA WIDE	OPERATIONS	1406						
HA WIDE	SECURITY	1408		155,000	155,000	155,000	0	
HA WIDE	COMMUNITY SERVICES PROGRAM	1408		33,739	33,739	33,739	23,041.07	
HA WIDE	ADMINISTRATION	1410		105,588	105,588	105,588	105,588	
HA WIDE	AUDIT	1411		1,000	1,000	1,000	1,000	
HA WIDE	CONSULTANT FEES	1430		8,000	8,000	8,000	0	
HA WIDE	A/E FEES	1430		48,000	58,000	48,000	48,000	
HA WIDE	RELOCATION	1495.1						
HA WIDE	DEBT SERVICE	1501		293,401	293,401	293,401.06	0	
HA WIDE	EXTERIOR REPAIRS	1460		223,512	106,854	0	106,853.50	
AL054-000003P MAGNOLIA II	REPLACE HVAC UNITS ON ROOF	1460		187,640	187,640	0	0	
AL054-000003P MAGNOLIA II	REPLACE ROOF	1460		0	106,658	0	0	
	GRAND TOTAL			1,055,880	1,055,880	644,728.06	284,482.57	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part I: Summary	
PHA Name: FLORENCE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: ALI09P054501-07 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2007 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
 Performance and Evaluation Report for Period Ending: 03/31/09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	188,739	188,739	188,739	94,570.31
4	1410 Administration (may not exceed 10% of line 21)	95,525	95,525	95,525	95,525
5	1411 Audit	1,000	1,000	1,000	1,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs	38,000	38,000	38,000	30,000
8	1440 Site Acquisition				
9	1450 Site Improvement	22,789	18,750	18,750	18,750
10	1460 Dwelling Structures	315,435	319,474	319,474	289,522.50
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: FLORENCE	Grant Type and Number Capital Fund Program Grant No: AL09P054501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2007 FFY of Grant Approval:			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/09			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	293,769	293,769	293,769	221,707.50
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	955,257	955,257	955,257	751,075.31
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs	155,000	154,739	154,739	60,570.31
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: FLORENCE		Grant Type and Number Capital Fund Program Grant No: ALP054501-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA WIDE	OPERATIONS	1406						
HA WIDE	SECURITY	1408		155,000	154,739	154,739	60,570.31	
HA WIDE	COMMUNITY SERVICES PROGRAM	1408		33,739	34,000	34,000	34,000	
HA WIDE	ADMINISTRATION	1410		95,525	95,525	95,525	95,525	
HA WIDE	AUDIT	1411		1,000	1,000	1,000	1,000	
HA WIDE	CONSULTANT FEES	1430		8,000	8,000	8,000	0	
HA WIDE	A/E FEES	1430		30,000	30,000	30,000	30,000	
HA WIDE	RELOCATION	1495.1						
HA WIDE	DEBT SERVICE	1501		293,769	293,769	293,769	221,707.50	
AL 54-000001P	REPAIR/REFURBISH WINDOWS/ CHERRY HILL	1460	155	103,875	94,477	94,477	94,476.75	
AL 54-000002P	REPAIR/REFURBISH WINDOWS/ CARVER HOMES	1460	71	50,000	159,637	159,637	159,636.75	
AL 54-000003P	REPLACE HVAC UNITS ON ROOF MAGNOLIA II	1460		161,560	65,360	65,360	35,409	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: FLORENCE				Federal FFY of Grant: 2007	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA WIDE	09/30/09		09/30/11		
54-000001P	09/30/09		09/30/11		
54-000002P	09/30/09		09/30/11		
54-000003P	09/30/09		09/30/11		
54-000004P	09/30/09		09/30/11		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary	
PHA Name: FLORENCE HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: AL09P054501-06 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2006 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:2)
 Performance and Evaluation Report for Period Ending: 03/31/09 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	0	34,000	34,000	34,000
3	1408 Management Improvements	167,000	167,000	167,000	152,192.03
4	1410 Administration (may not exceed 10% of line 21)	94,000	60,511	60,511	60,510.59
5	1411 Audit	1,000	1,000	1,000	1,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs	25,000	25,000	25,000	21,952.60
8	1440 Site Acquisition				
9	1450 Site Improvement	0	172,718	172,718	103,921.60
10	1460 Dwelling Structures	442,717	269,982	269,982	269,982.27
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: FLORENCE	Grant Type and Number Capital Fund Program Grant No: AL09P054501-06 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2006 FFY of Grant Approval:			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/09			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	293,329	293,329	293,329	293,328.91
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,023,046	1,023,540	1,023,540	936,888
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs	155,000	154,027	154,027	139,218.83
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: FLORENCE		Grant Type and Number Capital Fund Program Grant No: ALP054501-06 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA WIDE	OPERATIONS	1406		0	34,000	34,000	34,000.00	
HA WIDE	SECURITY	1408		155,000	154,027	154,027	139,218.83	
HA WIDE	TRAINING	1408		12,000	12,973	12,973	12,973.20	
HA WIDE	ADMINISTRATION	1410		94,000	60,511	60,511	60,510.59	
HA WIDE	AUDIT	1411		1,000	1,000	1,000	1,000.00	
HA WIDE	CONSULTANT FEES	1430		8,000	7,506	7,506	4,458.60	
HA WIDE	A/E FEES	1430		17,494	17,494	17,494	17,494.00	
HA WIDE	RELOCATION	1495.1		0	0	0	0	
HA WIDE	DEBT SERVICES	1501		293,329	293,329	293,329	293,328.91	
HA WIDE	SITE IMPROVEMENTS	1450		0	172,718	172,718	103,921.60	
AL 054-001	BUILDINGS: ADDITION OF UTILITY	1460	14	442,717	92,998	92,998	92,997.89	
CHERRY HILL	ROOM, LAUNDRY ROOM, MAINT							
	SHOP. TO 4 UNITS							
AL 054-001	REMOVEAL OF WOOD PANELING &	1460	14	0	0	0	0	
CHERRY HILL	INSTALL DRYWALL							
AL 054-001	REPLACE COUNTER FLASHINGS	1460	10	0	0	0	0	
CHERRY HILL	AT ROOFS							
AL 054-002	REPLACE COUNTER FLASHINGS	1460		0	176,984	176,984	176,984.38	
CARVER HOMES	AT ROOFS							

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: FLORENCE				Federal FFY of Grant: 2006	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA WIDE	09/30/08		09/30/10		
AL 054-003 HANDY HOMES	09/30/08		09/30/10		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program—Five-Year Action Plan

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011**

Part I: Summary						
PHA Name/Number Florence Housing Authority		Locality (City/County & State) Florence/Lauderdale/Alabama			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
B.	Physical Improvements Subtotal	Annual Statement	308,598	404,111	394,117	315,488
C.	Management Improvements		201,000	201,000	201,000	201,000
D.	PHA-Wide Non-dwelling Structures and Equipment		35,000	0	0	80,623
E.	Administration		95,000	95,000	95,000	95,000
F.	Other		122,513	62,000	71,994	70,000
G.	Operations		0	0	0	0
H.	Demolition		0	0	0	0
I.	Development		0	0	0	0
J.	Capital Fund Financing – Debt Service		293,769	293,769	293,769	293,769
K.	Total CFP Funds		1,055,880	1,055,880	1,055,880	1,055,880
L.	Total Non-CFP Funds					
M.	Grand Total		1,055,880	1,055,880	1,055,880	1,055,880

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary (Continuation)						
PHA Name/Number Florence Housing Authority		Locality: Florence/Lauderdale/Alabama			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name Number	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
		Annual Statement				
	COCC		95,000	95,000	95,000	95,000
	HA Wide		548,769	548,769	548,769	548,769
	AL 54-000001P Cherry Hill Homes		412,111	0	0	0
	AL 54-000002P Carver Hms/Handy Hms		0	0	412,111	0
	AL 54-000003P Carver Heights Hms		0	412,111	0	0
	AL 54-000004P Magnolia Gardens I & II		0	0	0	412,111

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 4 FFY 2012			Work Statement for Year: 5 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	COCC	Management Fees	95,000	COCC	Management Fees	95,000
	HA WIDE	Security	155,000	HA WIDE	Security	155,000
		Training	12,000		Training	12,000
		Community Service Program	34,000		Community Service Program	34,000
		Audit	1,000		Audit	1,000
		Consultants	8,000		Consultants	8,000
		A/E Fees	45,000		A/E Fees	45,000
		Debt Service	293,769		Debt Service	293,769
	AL 54-000002P	Landscaping	14,994	AL 54-000004P	Landscaping	5,000
	CARVER HOMES	Kitchen Cabinets	228,494	MAGNOLIA	Kitchen Cabinets	50,000
	HANDY HOMES	Exterior Repairs	10,000	GARDENS I	Roofing	59,488
		Storm Doors	50,000		Floor Tile	10,000
		Range Hoods (Carver Homes)	5,000		Painting/Wallpaper	5,000
		HVAC Duct Size Increased	30,623		Closet Doors	5,000
		Replace Windows	70,000		Window Blinds	5,000
		Stoves	1,500		Emergency Generators	40,623
		Refrigerators	1,500		Replace HVAC	20,000
					Stoves	1,500
					Refrigerators	1,500
				AL 54-000004P	Landscaping	5,000
				MAGNOLIA	Kitchen Cabinets	61,000
				GARDENS	Roofing	75,000
				II	Floor Tile	10,000
					Closet Doors	5,000
					Painting/Wallpaper	5,000
					Window Blinds	5,000
					Emergency Generators	40,000

Capital Fund Program—Five-Year Action Plan

**U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011**

					Stoves	1,500
					Refrigerators	1,500
	Subtotal of Estimated Cost		\$1,055,880	Subtotal of Estimated Cost		\$1,055,880

