

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: 2009

PHA Name: The Housing Authority of the City of Abbeville, Alabama

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: Abbeville

PHA Number: AL101

PHA Fiscal Year Beginning: (01/2009)

PHA Programs Administered:

Public Housing and Section 8

Number of public housing units:
 Number of S8 units:

Section 8 Only

Number of S8 units:

Public Housing Only

Number of public housing units: 40

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: Lisa H. Dunn

Phone: (334) 585-2165

TDD: (334) 585-2165

Email : abbehoau@ala.net

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 2009
[24 CFR Part 903.12(c)]

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al101v01	2009 Streamlined Annual PHA Plan
al101av01	CFP 501-08-2008 P & E Report
al101bv01	CFP 501-07-2007 P & E Report
al101cv01	CFP 501-06-2006 P & E Report
al101dv01	List of RAB
al101ev01	Violence Against Women Act Statement

A. PHA PLAN COMPONENTS

- 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
- 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
- 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- 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-LLL a, *Disclosure of Lobbying Activities.*

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

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

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

A. Site-Based Waiting Lists-Previous Year

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

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? None
2. Yes No: Are any or all of the PHA’s site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
 If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously
 If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- PHA main administrative office
- All PHA development management offices
- Management offices at developments with site-based waiting lists
- At the development to which they would like to apply
- Other (list below)

2. Capital Improvement Needs

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

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

A. Capital Fund Program

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

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

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

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

HOPE VI Revitalization Grant Status
a. Development Name:
b. Development Number:

c. Status of Grant:

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

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:
4. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
5. Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

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

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

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

2. Program Description:

a. Size of Program

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

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

b. PHA-established eligibility criteria

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

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

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

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

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

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

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

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

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

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

1. Consolidated Plan jurisdiction: (provide name here)
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
X	<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
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. X Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
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
	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
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures X Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	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
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
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
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs X Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). X 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)
	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: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009
<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	5,000.00			
3	1408 Management Improvements	2,000.00			
4	1410 Administration	500.00			
5	1411 Audit	750.00			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	2,422.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00			
10	1460 Dwelling Structures	10,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	1,000.00			
12	1470 Nondwelling Structures	25,000.00			
13	1475 Nondwelling Equipment	1,000.00			
14	1485 Demolition	5,000.00			
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)	57,672.00			
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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:		Federal FY of Grant: 2009
<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
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009		
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	
AL101	Operations	1406		5,000.00				
AL101	Management Improv	1408		2,000.00				
AL101	Administration	1410		500.00				
AL101	Audit	1411		750.00				
AL101	Fees & Costs	1430		2,422.00				
AL101	Site Improvements	1450		5,000.00				
AL101	Dwelling Structures	1460		10,00.00				
AL101	Non-Dwelling Struct	1470		25,000.00				
AL101	Non-Dwelling Equip	1475		1,000.00				

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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009		
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	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program No: AL09P10150109 Replacement Housing Factor No:					Federal FY of Grant: 2009
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406-PHA Wide	09/2010			09/2013			
1408-PHA Wide	09/2010			09/2013			
1410-PHA Wide	09/2010			09/2013			
1411 PHA Wide	09/2010			09/2013			
1430 PHA Wide	09/2010			09/2013			
1450 AL101-01	09/2010			09/2013			
1460 AL101-01	09/2010			09/2013			
1465.1 AL101-01	09/2010			09/2013			
1475 PHA Wide	09/2010			09/2013			
1485 AL101-01	09/2010			09/2013			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:			
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant: 2010 PHA FY: 2010	FFY Grant: 2011 PHA FY: 2011	FFY Grant: 2012 PHA FY: 2012	FFY Grant: 2013 PHA FY: 2013
	Annual Statement				
1406-PHA WIDE		OPERATIONS	OPERATIONS	OPERATIONS	OPERATIONS
1408		MANAGEMENT IMPROVEMENTS	MANAGEMENT IMPROVEMENTS	MANAGEMENT IMPROVEMENTS	MANAGEMENT IMPROVEMENTS
1410		ADMINISTRATION	ADMINISTRATION	ADMINISTRATION	ADMINISTRATION
1411		AUDIT	AUDIT	AUDIT	AUDIT
1430		FEES & COSTS	FEES & COSTS	FEES & COSTS	FEES & COST
1450		SITE IMPROVEMENT	SITE IMPROVEMENT	SITE IMPROVEMENT	SITE IMPROVEMENT
1460		DWELLING STRUCT	DWELLING STRUCT	DWELLING STRUCT	DWELLING STRUCT
1465		DWELLING EQUIP	DWELLING EQUIP	DWELLING EQUIP	DWELLING EQUIP
1470		NON-DWELLING ST	NON-DWELLING ST	NON-DWELLING ST	DEMOLITION
CFP Funds Listed for 5-year planning		57,672.00	57,672.00	57,672.00	57,672.00
Replacement Housing Factor Funds					

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: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 08/31/08 <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	5,000.00		00	00
3	1408 Management Improvements	2,000.00		00	00
4	1410 Administration	500.00		00	00
5	1411 Audit	750.00		00	00
6	1415 Liquidated Damages	00			
7	1430 Fees and Costs	200.00		00	00
8	1440 Site Acquisition	00			
9	1450 Site Improvement	20,000.00		00	00
10	1460 Dwelling Structures	23,583.00		00	00
11	1465.1 Dwelling Equipment—Nonexpendable	1,000.00		00	00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	1,000.00		00	00
14	1485 Demolition	3,763.00		00	00
15	1490 Replacement Reserve	00			
16	1492 Moving to Work Demonstration	00			
17	1495.1 Relocation Costs	00			
18	1499 Development Activities	00			
19	1501 Collateralization or Debt Service	00			
20	1502 Contingency	00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	57,796.00		00	00
22	Amount of line 21 Related to LBP Activities	00			
23	Amount of line 21 Related to Section 504 compliance	00			
24	Amount of line 21 Related to Security – Soft Costs	00			
25	Amount of Line 21 Related to Security – Hard Costs	00			
26	Amount of line 21 Related to Energy Conservation	000			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 08/31/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
H/A WIDE	OPERATIONS	1406		5,000		00	00	
H/A WIDE	COMPUTER UPGRADES	1408		2,000		00	00	
H/A WIDE	ADMINISTRATION	1410		500		00	00	
H/A WIDE	AUDIT	1411		750		00	00	
H/A WIDE	FEES & COSTS	1430		200		00	00	
101-01	PAVING & ANNUAL MAINTENANCE	1450		20,000		00	00	
101-01	ROOFING	1460	3			00	00	

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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
101-01	KITCHEN/BATH RETROFIT	1460	3	21,310		00	00	
101-01	A/C REPLACEMENTS	1460	3	2,273		00	00	
101-01	STOVES/REFRIGERATORS/WATER HEATERS	1465.1	4	1,000		00	00	
PHA-WIDE	MISC TOOLS	1475	1	1,000		00	00	
101-01	DEMOLITION	1485		3,763				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program No: AL09P10150108 Replacement Housing Factor No:					Federal FY of Grant: 2008
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406-H/A WIDE	09/2009			09/2012			
1408-H/A WIDE	09/2009			09/2012			
1410-H/A WIDE	09/2009			09/2012			
1411-H/A WIDE	09/2009			09/2012			
1430-H/A WIDE	09/2009			09/2012			
1430-101-01	09/2009			09/2012			
1450-101-01	09/2009			09/2012			
1460-101-01	09/2009			09/2012			
1465.1-101-01	09/2009			09/2012			
1475-H/A WIDE	09/2009			09/2012			

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name				<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1			Work Statement for Year	Work Statement for Year
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan						
Part II: Supporting Pages—Work Activities						
Activities for Year 1	Activities for Year : FFY Grant:			Activities for YearFFY Grant:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual						
Statement						

Capital Fund Program Five-Year Action Plan					
Part II: Supporting Pages—Work Activities					
Activities for FFY Grant:			Activities for YearFFY Grant:		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost

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: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 08/31/2008 <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	6,332.00		6,332.00	00
3	1408 Management Improvements	4,000.00		4,000.00	00
4	1410 Administration	5,602.00		5,602.00	
5	1411 Audit	750.00		750.00	
6	1415 Liquidated Damages	00		00	
7	1430 Fees and Costs	750.00		750.00	700.00
8	1440 Site Acquisition	00		00	
9	1450 Site Improvement	4,000.00		4,000.00	7,650.00
10	1460 Dwelling Structures	33,599.00		33,599.00	
11	1465.1 Dwelling Equipment—Nonexpendable	2,200.00		2,200.00	
12	1470 Nondwelling Structures	00		00	
13	1475 Nondwelling Equipment	1,800.00		1,800.00	
14	1485 Demolition	00		00	
15	1490 Replacement Reserve	00		00	
16	1492 Moving to Work Demonstration	00		00	
17	1495.1 Relocation Costs	00		00	
18	1499 Development Activities	00		00	
19	1501 Collateralization or Debt Service	00		00	
20	1502 Contingency	00		00	
21	Amount of Annual Grant: (sum of lines 2 – 20)	59,033.00		59,033.00	8,350.00
22	Amount of line 21 Related to LBP Activities	00		00	
23	Amount of line 21 Related to Section 504 compliance	00		00	
24	Amount of line 21 Related to Security – Soft Costs	00		00	
25	Amount of Line 21 Related to Security – Hard Costs	00			
26	Amount of line 21 Related to Energy Conservation	000			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 08/31/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150107 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	
H/A WIDE	OPERATIONS	1406		6,332		6,332		
H/A WIDE	COMPUTER UPGRADES	1408		4,000		4,000		
H/A WIDE	ADMINISTRATION	1410		5,602		5,602		
H/A WIDE	AUDIT	1411		750		750	700.00	
H/A WIDE	FEES & COSTS	1430		750		750		
101-01	LANDSCAPING & ANNUAL MAINTENANCE	1450		4,000		4,000	7,650.00	

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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150107 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	
101-01	ROOFING	1460	3	18,310		18,310		
101-01	KITCHEN/BATH RETROFIT	1460	3	13,016		13,016		
101-01	A/C REPLACEMENTS	1460	3	2,273		2,273		
101-01	STOVES/REFRIGERATORS/WATER HEATERS	1465.1	4	2,200		2,200		
PHA-WIDE	MISC TOOLS	1475	1	1,800		1,800		

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program No: AL09P10150107 Replacement Housing Factor No:					Federal FY of Grant: 2007
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406-H/A WIDE	09/2008			09/2011			
1408-H/A WIDE	09/2008			09/2011			
1410-H/A WIDE	09/2008			09/2011			
1411-H/A WIDE	09/2008			09/2011			
1430-H/A WIDE	09/2008			09/2011			
1430-101-01	09/2008			09/2011			
1450-101-01	09/2008			09/2011			
1460-101-01	09/2008			09/2011			
1465.1-101-01	09/2008			09/2011			
1475-H/A WIDE	09/2008			09/2011			

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name				<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
		FFY Grant:	FFY Grant:	FFY Grant:	FFY Grant:
	Annual Statement				
CFP Funds Listed for 5-year planning					
Replacement Housing Factor Funds					

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: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150106 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 08/31/08 <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	7,987.00		7,987.00	7,382.71
3	1408 Management Improvements	7,310.00		7,310.00	
4	1410 Administration	5,602.00		5,602.00	
5	1411 Audit	750.00		750.00	700.00
6	1415 Liquidated Damages	00			
7	1430 Fees and Costs	750.00		750.00	
8	1440 Site Acquisition	00			
9	1450 Site Improvement	4,000.00		4,000.00	7,769.26
10	1460 Dwelling Structures	27,273.00		27,273.00	14,360.06
11	1465.1 Dwelling Equipment—Nonexpendable	2,200.00		2,200.00	528.00
12	1470 Nondwelling Structures	00			
13	1475 Nondwelling Equipment	1,800.00		1,800.00	
14	1485 Demolition	00			
15	1490 Replacement Reserve	00			
16	1492 Moving to Work Demonstration	00			
17	1495.1 Relocation Costs	00			
18	1499 Development Activities	00			
19	1501 Collateralization or Debt Service	00			
20	1502 Contingency	00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	57,672.00		57,672.00	30,740.03
22	Amount of line 21 Related to LBP Activities	00			
23	Amount of line 21 Related to Section 504 compliance	00			
24	Amount of line 21 Related to Security – Soft Costs	00			
25	Amount of Line 21 Related to Security – Hard Costs	00			
26	Amount of line 21 Related to Energy Conservation	000			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 08/31/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Measures				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150106 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	
H/A WIDE	OPERATIONS	1406		7,987		7,987.00	7,382.71	
H/A WIDE	COMPUTER UPGRADES	1408		7,310		4,360.00		
H/A WIDE	ADMINISTRATION	1410		5,602		5,602.00		
H/A WIDE	AUDIT	1411		750		750.00	700.00	
H/A WIDE	FEES & COSTS	1430		750		750.00		
101-01	LANDSCAPING & ANNUAL MAINTENANCE	1450		4,000		819.26	819.26	

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 II: Supporting Pages								
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150106 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	
101-01	PARKING/PAVING	1450			6,950.00	6,950.00	6,950.00	
101-01	ROOFING	1460	3	15,000		14,180.74	6,000.00	
101-01	KITCHEN/BATH RETROFIT	1460	3	10,000		10,000.0	8,360.06	
101-01	A/C REPLACEMENTS	1460	3	2,273		2,273.00	528.00	
101-01	STOVES/REFRIGERATORS/WATER HEATERS	1465.1	4	2,200		2,200.00		
PHA-WIDE	SEWER MACHINE	1475	1	1,800		1,800.00		
				57,672.00		57,672.00	30,740.03	

8. Capital Fund Program Five-Year Action Plan

2008

LIST OF RESIDENT ADVISORY BOARD MEMBERS

Ms. Mary Miller 103 Southdale Ct. Apt 20
Abbeville, AL 36310

Ms. Peggy Herring 101 Southdale Ct. Apt 23
Abbeville, AL 36310

Mr. Mickey Nelson 105 Girard Ct. Apt 36
Abbeville, AL 36310

Violence Against Women Act Statement

The following notice was review and presented to the residents of the Housing Authority of the City of Abbeville, Alabama in Resident Meeting on September 22, 2008.

Residents were notified in said meeting that referreals for domestic violence will be made to:

**HOUSE OF RUTH
DOMESTIC VIOLENCE SERVICES/SEXUAL
ASSAULT SERVICES
(334) 793-5214
24 HOUR CRISIS LINE (800) 650-6522**

NOTICE TO ALL RESIDENTS OF ABBEVILLE HOUSING AUTHORITY

Please be advised that PIH 2006-23 advises all Housing Authorities to notify their clients residing within their subsidized units that under the Violence Against Women Act and Department of Justice Reauthorization Act of 2005 (VAWA) PHA's are prohibited from eviction of and removal of assistance from certain persons living in public or Section 8 assisted housing if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking, as those terms are defined in Section 3 of the United States Housing Act of 1937 as amended by VAWA. Any client who fears that their lease may be in jeopardy due to Domestic Violence, Dating Violence, or Stalking by a member of a tenant's household, any guest or other person under the tenant's control, is hereby directed to report such abuse to the Executive Director and provide either a completed HUD Form 50066, Certification of Domestic Violence, Dating Violence, or Stalking. In lieu of providing the HUD Form 50066 a tenant may provide to PHAs (1) a police record or court record, (2) documentation signed and attested to 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.

Any relief sought from any incident which may be considered grounds for possible termination of tenancy under VAWA should be submitted within 14 business days from the offense in order to qualify for consideration.

Please see attached documentation for guidance and submission.

PIH – 2006-42

HUD-50066