

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

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 there under at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined 5-Year Plan for Fiscal Years 2009 - 2013

Streamlined Annual Plan for Fiscal Year 2009

THE PIEDMONT 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.

PHA PLAN COMPONENTS

AL110V01

PHA 5 Year and Annual Plan HUD -50075

Attachment "A"

Significant Amendment

Attachment "B"

Violence Against Women Act

Attachment "F"

Resident Advisory Board and Comments

Attachment "G"

Challenged Elements

Electronic Attachment

Capital Fund Program Original Annual Statement FY2010 HUD 50075-1

Electronic Attachment

CFP Five Year Action Plan HUD 50075-2

Electronic Attachment

P&E Statements for FY2009

Electronic Attachment

Stimulus Annual Statement FY2009

Electronic Attachment

P&E Statements for CFP FY 2008

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>The Piedmont Housing Authority</u> PHA Code: <u>AL110</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>7/1/2009</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>211</u> Number of HCV units: _____					
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. The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.					
5.2	Goals and Objectives. The Goals and Objectives of the Housing Authority are: <ul style="list-style-type: none"> Plans for the 2010 and 2011 CFP grant is to go into project AL 110-01 to completely gut the units and remove the old paneling and replace with sheetrock, install new cabinets, update all plumbing and electrical to code, Install new hard wired with battery back up smoke detectors, and possible new floor tile, insulation and any additional items that we deem necessary for all 36 units in Highland Homes. 					
6.0	PHA Plan Update <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Policies we have updated are:</p> <ol style="list-style-type: none"> ACOP Dwelling Lease Special Entry Form into the units Procurement Policy Trespass Policy Flat rent/Ceiling Rents Revised utility allowances Reasonable Accommodation Form Procurement Policy for Stimulus Grant Award Pet Policy <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. The public may obtain copies of the 5-Year and Annual PHA Plan at the Piedmont Housing Authority Office located at 154 Craig Piedmont, AL 36272</p>					
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. N/A					
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.					

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. See Attachments</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. See Attachment</p>
8.3	<p>Capital Fund Financing Program (CFFP). X 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 waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. Based on the Consolidation Plan, Available Data, our waiting list and the waiting list of other PHAs in our area indicate a shortage of affordable housing for all populations.</p> <p>Our Waiting is as follows:</p> <ul style="list-style-type: none"> 1 BR 8 approved – 4 offers out 2 BR 0 approved 3 BR 1 approved I offer 4 BR 0 approved 6 of these are extremely low income applicants 2 of these are very low income applicants
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. Maximize the number of affordable units available by employing effective maintenance and management policies to minimize the number of off line units and reduce turnaround time for vacant units. Strategy influenced by funding and staffing constraints.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(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. Progress in Meeting 5 Year Goals</p> <p>In the five year plan the Housing Authority set many goals. Goals that we have accomplished are:</p> <p style="text-align: center;"><i>The PHA accomplished its primary goals in its 5-year plan. We have completely renovated and landscaped Development one. We have installed new playground equipment. We have purchased a new copy machine for the office. Became a part of the bond pool program in Alabama. The PHA continues the award winning honor roll program and project Care Learning Center. We also publish quarterly news letter. All of these goals were meet and we intend to utilize our future Capital Funds to further increase the developments appearance, curb appeal and desirability.</i></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” See Attachment A</p>

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11.0	<p>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.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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ATTACHMENT “A”

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”

**PIEDMONT HOUSING AUTHORITY
POLICY ON
VIOLENCE AGAINST WOMEN ACT
AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2005
PUBLIC LAW 109-162**

IMPLEMENTATION: ON JANUARY 5, 2006, PRESIDENT BUSH SIGNED INTO LAW AS PUBLIC LAW 109-162, THE VIOLENCE AGAINST WOMEN ACT (VAWA) AND THE DEPARTMENT OF JUSTICE REAUTHORIZATION ACT OF 2005. SECTION 603 OF THE LAW AMENDS SECTION 5A OF THE U.S. HOUSING ACT (42 U.S.C. 1437C-1) TO REQUIRE THAT PHAS’ FIVE YEAR AND ANNUAL PLANS TO CONTAIN INFORMATION REGARDING ANY GOALS, ACTIVITIES, OBJECTIVES, POLICIES, OR PROGRAMS OF THE PHA THAT ARE INTENDED TO SUPPORT OR ASSIST VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING, SECTIONS 606 AND SECTION 607 AMEND THE SECTION 8 AND PUBLIC HOUSING SECTIONS OF THE U.S. HOUSING ACT (42 U.S.C. 1437F AND 1437D) TO PROTECT CERTAIN VICTIMS OF CRIMINAL DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING AS WELL AS MEMBERS OF THE VICTIMS IMMEDIATE FAMILIES FROM LOSING THEIR HUD ASSISTED HOUSING AS A CONSEQUENCE OF THE ABUSE OF WHICH THEY WERE THE VICTIM.

THE VIOLENCE AGAINST WOMEN ACT (VAWA) PROHIBITS THE 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.

POLICY: IT IS THE INTENT OF THE PIEDMONT HOUSING AUTHORITY TO COMPLY WITH THE PROVISIONS OF THE IMPLEMENTATION OF THE VIOLENCE AGAINST WOMEN ACT (VAWA) AND THE DEPARTMENT OF JUSTICE REAUTHORIZATION ACT OF 2005. THE PIEDMONT HOUSING AUTHORITY MAKES A FIRM COMMITMENT THAT NO INDIVIDUAL WHO CLAIMS TO BE A VICTIM OF ABUSE UNDER THE VAWA WHO COMPLETES THE HA CERTIFICATION TO THE ALLEGED ABUSE, OR PROVIDES OTHER ACCEPTABLE DOCUMENTATION AS OUTLINES IN THE CERTIFICATION, AND COMPLIES WITH THE CONDITIONS OF THE CERTIFICATION, WILL BE EVICTED FROM PUBLIC HOUSING OR HAVE THEIR SECTION 8 ASSISTANCE TERMINATED. THE PIEDMONT HOUSING AUTHORITY WILL ONLY TAKE ACTIONS TO HAVE THE PERSON COMMITTING THE VIOLENCE REMOVED FROM THE DWELLING LEASE OR SECTION 8 VOUCHER ASSISTANCE, FOR THE PROTECTION OF THE REST OF THE FAMILY OR IF THE PERSON IS NOT A PARTY TO THE HOUSEHOLD, BANNED FROM THE PREMISES.

STEPS TO BE TAKEN: UPON RECEIVING A COMPLAINT OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT OR STALKING MADE BY A TENANT, THE HOUSING AUTHORITY WILL HAVE THE TENANT TO COMPLETE CERTIFICATION FOR HUD-50066 (OR PROVIDE OTHER ACCEPTABLE DOCUMENTS IN LIEU OF THE CERTIFICATION) TO CERTIFY THAT THE ALLEGED INCIDENT OF ABUSE ARE BONA FIDE AND AGREES TO HAVE THE ALLEGED ABUSED REMOVED FROM THE PUBLIC HOUSING DWELLING LEASE AND / OR SECTION 8 VOUCHER ASSISTANCE OR IF THE PERSON IS NOT ON THE LEASE, BANNED FORM THE PREMISES.

IF THE OFFENDER IS A PARTY TO THE LEASE, THE TENANT-VICTIM WILL BE ADVISED THAT THE TENANT-OFFENDER IS STILL LEGALLY ON THE LEASE / SECTION 8 ASSISTANCE, AND CAN NOT BE REMOVED WITHOUT A COURT ORDER. THE HOUSING AUTHORITY WILL REFER THE TENANT-VICTIM TO A DOMESTIC VIOLENCE SHELTER, ALLOW THE TENANT-VICTIM AND REMAINING FAMILY MEMBERS TO RELOCATE FOR SAFETY REASONS TO ANOTHER PUBLIC HOUSING DEVELOPMENT MANAGED BY THE HOUSING AUTHORITY OR IF THE TENANT IS ON SECTION 8, ISSUE THE PARTICIPATING FAMILY A VOUCHER, WHICH WILL ALLOW FOR RELOCATION.

ONCE DOMESTIC VIOLENCE DOCUMENTATION IS PROVIDED AND CERTIFIED TO, BY A TENANT OF THE ALLEDGED ABUSE, THE HOUSING AUTHORITY WILL START ACTIONS TO HAVE THE TENANT-OFFENDER EVICTED FROM THE PREMISES BY ISSUING A FOURTEEN (14) DAY NOTICE OF EVICTION, HAND DELIVERED TO THE TENANT-OFFENDER. THE NOTICE WILL STATE THE REASON FOR THE EVICTION IS FOR DOMESTIC VIOLENCE AND CRIMINAL ACTIVITY THAT INTERFERES WITH AND THREATENS THE HEALTH, SAFETY, OR RIGHT TO PEACEFUL ENJOYMENT OF THE PREMISE OF OTHER RESIDENTS. UPON EXPIRATION OF THE FOURTEEN (14) DAY NOTICE, IF THE TENANT-OFFENDER HAS NOT VACATED THE PREMISES, A CIVIL ACTION FOR EVICTION WILL BE INSTITUTED BY THE HOUSING AUTHORITY TO HAVE THE TENANT-OFFENDER REMOVED.

THE TENANT-VICTIM WILL BE ADVISED THAT THEY CAN ALSO GO TO THE COURTS AND ASK FOR AN INJUNCTION UNDER THE STATE LAWS GOVERNING DOMESTIC VIOLENCE TO REMOVE THE OFFENDING PERSON FROM THE UNIT. THIS WILL IMMEDIATELY REMOVE THE TENANT-OFFENDER FROM THE UNIT WHILE THE HOUSING AUTHORITY EVICTS THE TENANT-OFFENDER FROM THE LEASE. ONCE THE TENANT-OFFENDER IS REMOVED FROM THE LEASE, THE TENANT WILL BE ADVIES THAT THE TENANT-OFFENDER MAY NOT BE ALLOWED BACK ON THE PREMISES AND IF SO ALLOWED WOULD BE IN VIOLATION IF THEIR LEASE AND COULD BE TERMINATED FOR THIS.

OBJECTIVE ONE: TO INFORM ALL PUBLIC HOUSING AND SECTION 8 HOUSEHOLDS OF THE REQUIREMENTS OF THE VIOLENCE AGAINST WOMEN ACT (VAWA), THE HA WILL GO OVER THE VAWA WITH ALL PARTICIPANTS DURING ORIENTATION, INITIAL LEASE-UP, AND AT EACH ANNUAL RECERTIFICATION THEREAFTER. EACH HOUSEHOLD WILL BE INFORMED OF THE REQUIREMENTS TO COMPLETE AND SUBMIT A CERTIFICATION, OR OTHER INFORMATION THAT MAY BE PROVIDED IN LIEU OF THE CERTIFICATION IF THEY ARE A VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING. TENANT WILL BE INFORMED THAT BY SUBMITTING THE REQUIRED CERTIFICATION EACH QUALIFIED TENANT

AND FAMILY MEMEBRS WILL BE PROTECTED FROM BEING EVICTED FROM PUBLIC HOUSING OR TERMINATED FROM THE SECTION 8 HOUSING PROGRAMS BASED ON ACTS OF SUCH VIOLENCE AGAINST THEM PROVIDED THE PERSON COMMITTING THE VIOLENCE IS REMOVED FROM THEIR LEASE OR SECTION 8 VOUCHER ASSISTANCE. EACH PARTICIPANT WILL BE REQUIRED TO SIGN A NOTICE THAT THEY WERE INFORMED OF THE VAWA AND THE REQUIREMENTS THAT MUST BE MET.

OBJECTIVE TWO: TO ENSURE THAT ALL SECTION 8 LANDLORDS ARE MADE AWARE OF THE REQUIREMENTS OF THE VAWA. THE HA WILL MAIL ALL CURRENT LANDLORDS A NOTICE EXPLAINING THE REQUIREMENTS OF VAWA. ALL NEW LANDLORDS COMING UNDER THE SECTION 8 PROGRAM WILL BE EXPLAINED THE VIOLENCE AGAINST WOMEN ACT PRIOR TO BEING ON THE PROGRAM. EVERY LANDLORD MUST SIGN THE NOTICE DOCUMENTING THAT THE HOUSING AUTHORITY HAS INFORMED THE LANDLORD OF THE REQUIREMENTS TO COMPLY WITH THE VAWA AND THAT ALL HOUSING ASSISTANCE PAYMENT CONTRACTS EXECUTED WILL CONTAIN THE VAWA LANGUAGE.

PROGRAM PLANS: TO WORK IN CONJUNCTION WITH OTHER STATE AND LOCAL AGENCIES SUCH AS THE LOCAL POLICE DEPARTMENT, SOCIAL SERVICE AGENCIES, PROVIDERS OF DIRECT SERVICES, DOMESTIC VIOLENCE SHELTERS AND THE COMMUNITY AT LARGE TO DEVELOP EFFECTIVE STRATEGIES, SERVICES, EDUCATION AND PREVENTION PROGRAMS TO VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, AND STALKING.

ATTACHMENT “F”

The resident advisory board had no comments.

ATTACHMENT “G”

No elements were challenged.

Part I: Summary	
PHA Name: The Hosing Authority of Piedmont	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL 09-P110-50109 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)	20,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	183,055.84			
10	1460 Dwelling Structures				
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.

Part I: Summary					
PHA Name: The Hosing Authority of Piedmont	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL 09-P110-50109 Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval:			
Type of Grant					
<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:		<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	94,980.16			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	298,036			
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
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 I: Summary	
PHA Name: The Hosing Authority of Piedmont	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL 09-S110-50109 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)	20,000		1,895.00	948.20
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	37,500		29,720.00	13,748.20
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	152,985		0	
11	1465.1 Dwelling Equipment—Nonexpendable	168,750		347,620.00	153,552.67
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: The Hosing Authority of Piedmont	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL 09-S110-50109 Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval:			
Type of Grant					
<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:		<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)	379,235.00	379,235.00		168,249.07
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 I: Summary		
PHA Name: The Hosing Authority of Piedmont	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL 09-P110-50108 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:)
 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)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	14,189		14,189	14,189
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	188,512.19		188,512.19	188,512.19
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: The Hosing Authority of Piedmont	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AL 09-P110-50108 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 type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" 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	96,899.81		96,899.81	72,508.75
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	299,601		299,601	275,209.94
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
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.

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 The Housing Authority of the City of Piedmont AL 110		Locality (City/County & State)			<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	203,130.34	204,326.63	201,686.15	204,308.87
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service		97,869.66	95,673.37	98,313.85	95,691.13
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		300,000	300,000	300,000	300,000

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

Part I: Summary (Continuation)						
PHA Name/Number The Housing Authority of the City of Piedmont AL 110		Locality (City/county & State)			<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 2011	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
		Annual Statement				
	PHA wide		97,869.66	95,673.37	98,313.85	95,691.13
	AL 110-1		203,130.34	204,326.63		
	AL 110-2					89,271.29
	AL 110-3					115,037.58
	AL 110-4				201,686.15	

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 II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year <u>2011</u> FFY <u>2011</u>			Work Statement for Year: <u>2012</u> FFY <u>2012</u>		
	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	<i>Capital Fund Financing – Debt Service</i>		97,869.66	<i>Capital Fund Financing – Debt Service</i>		95,673.37
Annual	AL 110-1		203,130.34	AL 110-4 <i>Remove and replace kitchen cabinets, add addition onto the back of the units for washer and dryer</i>	.	204,326.63
Statement						
	Subtotal of Estimated Cost		\$300,000	Subtotal of Estimated Cost		\$300,000

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**

	Subtotal of Estimated Cost	\$300,000	Subtotal of Estimated Cost	\$300,000
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Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$