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

1.0 PHA Information

PHA Name: **Housing Authority of the County of Merced** PHA Code: **CA-023**

PHA Type: ☐ Small ☐ High Performing ☒ **Standard** ☐ HCV (Section 8)

PHA Fiscal Year Beginning: (MM/YYYY): **10/2009**

2.0 Inventory (based on ACC units at time of FY beginning in 1.0 above)

Number of PH units: **454** Number of HCV units: **2,705**

3.0 Submission Type

☐ 5-Year and Annual Plan ☒ **Annual Plan Only** ☐ 5-Year Plan Only

4.0 PHA Consortia ☐ 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.

N/A

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:

N/A

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.

N/A

6.0 PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

Housing Authority of the County of Merced's Administrative Plan
Chapter 4 - Establishing Preferences and Maintaining the Wait list

- *Section D. Local Preferences*, was revised and adopted on May 20, 2008 by the HACM Board of Commissioners by Resolution No. 08-02 to include "residency and working" preference.
- *Section D. Local Preferences*, was revised and adopted on September 16, 2008, by the HACM of Commissioners by Resolution No. 08-15 to support the City of Merced's Consolidated Plan. Preference for families referred by the City of Merced's affordable housing program.
- The chapter was revised and adopted on October 21, 2008, by the HACM Board of Commissioners by Resolution No. 08-20 to include *Section H. Order of Selection*.

Housing Authority of the County of Merced's Low Income Housing Program ACOP
Chapter 10.0- Tenant Selection

- *Section 10.1 Preferences/Ranking*, was revised and adopted on May 20, 2008 by the HACM Board of Commissioners by Resolution No. 08-03 to include "residency and working" preference.

Housing Authority of the County of Merced's Family Self Sufficiency Program Action Plan

- An annual update was adopted on August 19, 2008, by the HACM Board of Commissioners by Resolution No. 08-10. The revisions were needed in order to be consistent with current practice and compliant with HUD 24 CFR language.

6.0	**(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.** • Copies of the 5-Year/Annual PHA Plans may be obtained by contacting the administrative office of the HACM, 405 U Street, Merced, CA 95341 • Copies may also be obtained by contacting: Merced: 401 Lesher Dr., Suite B, Merced, CA 95341 Atwater: 2870 Crest Rd., Atwater, CA 95301 Livingston: 1005 8th St., Livingston, CA 95334 Dos Palos: 21918 Lexington Ave., Dos Palos, CA 93620 Los Banos: 88 7th St., Los Banos, CA 93635
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.* Development Project number CA39-230001 Gateway Homes, 39 units affected as part of a disposition project approved in November 2006. Relocation of families almost complete. In an effort to leverage existing affordable housing resources to create additional rental units that are affordable to low and very low income families, HACM received approval for the demolition of 30 existing public housing units to be replace with 82 new affordable units.
8.0	**Capital Improvements.** Please complete Parts 8.1 through 8.3, as applicable.
8.1	**Capital Fund Program Annual Statement/Performance and Evaluation Report.** As part of the PHA 5-Year and Annual Plan, annually complete and submit the *Capital Fund Program Annual Statement/Performance and Evaluation Report,* form HUD-50075.1, for each current and open CFP grant and CFFP financing. *ATTACHMENT (h)*
8.2	**Capital Fund Program Five-Year Action Plan.** As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan,* 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. *ATTACHMENT (i)*
8.3	**Capital Fund Financing Program (CFFP).** ☐ 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.
9.0	**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. *ATTACHMENT (j)*

9.1	**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.** • HACM will continue efforts to maximize the number of affordable units available. • Employ effective maintenance and management policies to minimize number of public housing units off-line • Reduce turnover time for vacated units • Undertake measures to ensure access to affordable housing among families assisted, regardless of unit size • Maintain or increase Section 8 lease-up rates by marketing to owners, particularly to those outside areas of minority and poverty concentration

10.0

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.

HACM submits its Annual Agency Plan for Fund Year 2009 to the U.S. Department of Housing and Urban Development (HUD). The following summary provides a brief review of the progress made in meeting the goals and objectives that were adopted as part of the agency's 5-Year Plan:

EXPANSION OF HOUSING STOCK

1. Complete the rebuilding process at the Planada Migrant Center
2. Develop new affordable housing units/complexes throughout Merced County
3. Expand financial base-increase funding from non-federal resources

- *The Planada, Felix Torres Migrant Center which will include a 60-unit migrant housing with 52 units for year round housing pending release of State funds which have been frozen. The agency has gone out to bid and contracts are being finalized. The child-care facility has been completed.*
- *Currently in the final stages of the relocation process of the Gateway Terrace Project. The disposition of 39 public housing units will provide 82 new affordable rental units.*
- *In 2006, HACM purchased Oak Terrace which includes 64 affordable units.*

MARKETABILITY

1. Enhance the marketability of the Housing Authority of the County of Merced's public housing units
2. The Housing Authority of the County of Merced shall become a more customer-oriented organization

- *HACM has been more aggressive in advertising programs, utilizing newspapers and radio for their marketing efforts to reach qualified families.*
- *Results from an annual agency Client Satisfaction Survey are used to improve customer service.*
- *Obligation of Capital Funds provided landscape improvements to increase marketability.*

SECURITY

1. Provide a safe and secure environment in the Housing Authority of the County of Merced's public housing developments
2. Provide a safe and secure environment for the Housing Authority of the County of Merced's employees
3. Improve the residents and community's perception of safety and security in the Housing Authority of the County of Merced's pubic housing development

- *Staff will continue to promote tenant safety by carefully reviewing and addressing, as appropriate, tenant safety concerns and complaints.*
- *Lighting issues were addressed at the Livingston Complex after the Resident Advisory Board (RAB) expressed concerns of poor lighting conditions.*
- *Trimmed trees/bushes cleared for better view*
- *Fencing added*
- *Results from an annual agency Client Satisfaction Survey are used to improve security.*
- *Results from a HUD Resident Satisfaction Survey, is used to address safety and security issues.*

TENANT-BASED HOUSING

1. Manage the Housing Authority of the County of Merced's tenant-based program in an efficient and effective manner thereby qualifying as a "high performer" under HUD's Section 8 Management Assessment Program (SEMAP)
2. Lease up all new increments of Section 8 Housing within available funding constraints

- *Agency continues to work within current funding constraints and in maintaining a high utilization rate.*
- *HCV Staff continue to work and promote the program to new landlords/owners in an effort to provide rental opportunities throughout the county.*
- *Agency will continue to improve SEMAP score (currently 79%)*

MAINTENANCE

1. Maintain the Housing Authority of the County of Merced's real estate in safe, decent and sanitary condition
2. Deliver timely and high quality maintenance service to the residents of the Housing Authority

- *Staff continues to maintain the overall good condition of all units, assuring compliance with established quality and safety standards.*
- *Available Capital Funds will be used to maintain and upgrade current housing stock.*
- *Shall continue to rehabilitate units. Improvements have included: window replacement, siding repair, car port repair, replacement of HVAC units.*
- *Seek additional funding sources as they become available. Continue to improve PHAS score (currently 86%) and turn over vacant Public Housing units within 20 days of the vacate date.*

FISCAL RESPONSIBILITY

1. Ensure full compliance with all applicable standards and regulations including government generally accepted accounting practices
2. Reduce dependency on federal funding

- *Aggressively pursuing all federal, state and local funding announcements.*
- *HACM will continue to explore alternative means of funding new development and construction of affordable housing units.*
- *Continue to develop and strengthen partnerships with private developers and utilize local non-profit agencies to expand other housing revenue sources not generally available to Public Housing Agencies.*

PUBLIC IMAGE

1. Perform pubic relations throughout community
2. Enhance the image of affordable housing programs in our community
3. Develop productive partnerships with community organizations

- *Continue HACM high visibility and positive image through increased involvement in the community.*
- *Convene at least one meeting per year with Section 8 landlords, and other property managers, realtors and housing providers.*
- *Participate in Continuum of Care, assisting homeless persons with psychiatric disabilities through Shelter Plus Care program.*

SUPPORTIVE SERVICES

1. Improve access of public housing residents to services that support economic opportunity and quality
2. Improve economic opportunity (self-sufficiency) for the families and individuals that reside in our Housing Authority of the County of Merced
3. Provide supportive services targeting the elderly/disabled through ROSS elderly disabled program.
4. Operate the John O'Banion Learning Center to best meet our resident and community needs. The HACM provides lease space to several community organizations, including: a branch of the Stanislaus County Office of Education; daycare provider; Golden Valley Health Center; medical services; Merced County Office of Education; educational programs; Merced County Library; Women and Infant Care Program; Resident Services Offices.

- *HACM continues to increase community partnerships and seek funding sources to maintain and expand existing programs to tenants and HCV/Section 8 clients.*
- *Staff continues to develop and promote strong working relationships with social services providers in an effort to increase the availability to resources to families.*
- *Continue to promote all Self-Sufficiency, FSS and Homeownership programs. There was one(1) FSS graduate for 2008. Forty-three (43) FFS participants that have contracts in place.*

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

Substantial deviations, significant amendments, and/or modifications are considered discretionary changes in the plans or policies of the Housing Authority that fundamentally change the mission, goals, objectives, and/or plans of the Agency. This manner of change requires formal approval from the Board of Commissioners.

- *Substantial Deviation from the 5-Year Plan: None*
- *Significant Amendment or Modification to the Annual Plan: None*

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): N/A (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:N/A (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) (j) Housing Needs of Families (k) Form HUD-50075, *Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan*

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing **Expires 4/30/2011**

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-*Year and Annual* PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the___ 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 10/01/2009 hereinafter referred to as the Plan , of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
   - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
   - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
   - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
   - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
   - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
    (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
    (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
    (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Housing Authority of the County of Merced — PHA Name

CA 023 — PHA Number/HA Code

X 5-Year PHA Plan for Fiscal Years 2009 - 2013

X Annual PHA Plan for Fiscal Years 2009 - 2013

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Mary P. Stillahn, Commissioner	Housing Authority of the County of Merced Board of Commissioners
Signature: Mary P. Stillahn	Date: 07/21/2009

ATTACHMENT (a)

Civil Rights Certification

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

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of the County of Merced	CA 023
PHA Name	PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Rennise Ferrario	Title	Executive Director
Signature	Rennise Ferrario	Date	7/6/09

ATTACHMENT (b)

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the County of Merced

Program/Activity Receiving Federal Grant Funding

Housing Authority of the County of Merced

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Rennise Ferrario	Executive Director
Signature	**Date**
X Rennise Ferrario	7/6/09

form **HUD-50070** (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

ATTACHMWNT (c)

OMB Approval No. 2577-0157 (Exp. 3/31/2010)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of the County of Merced

Program/Activity Receiving Federal Grant Funding

Capital Funds

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Rennise Ferrario	Executive Director
Signature	**Date (mm/dd/yyyy)**
Rennise Ferrario	2/6/09

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handboooks 7417.1, 7475.13, 7485.1, & 7485.3

ATTACHMENT (d)

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action:
[b] a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

2. Status of Federal Action:
[NA] a. bid/offer/application
b. initial award
c. post-award

3. Report Type:
[a] a. initial filing
b. material change
For Material Change Only:
year _____ quarter _____
date of last report _____

4. Name and Address of Reporting Entity:
[x] **Prime** [ ] **Subawardee**
Tier _____, *if known*:
Housing Authority of the County of Merced
405 "H" Street
Merced, CA 95341
Congressional District, *if known*: 4c 18th

5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:
N/A
Congressional District, *if known*:

6. Federal Department/Agency:
U.S. Department of Housing and Urban Development (HUD)

7. Federal Program Name/Description:
N/A
CFDA Number, *if applicable*: _____

8. Federal Action Number, *if known*:
N/A

9. Award Amount, *if known*:
$ 0.00

10. a. Name and Address of Lobbying Registrant
(*if individual, last name, first name, MI*):

b. Individuals Performing Services (*including address if different from No. 10a*)
(*last name, first name, MI*):

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature: Rennise Ferrario
Print Name: Rennise Ferrario
Title: Executive Director
Telephone No.: 209-386-41008 Date: 7/6/09

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.

2. Identify the status of the covered Federal action.

3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.

4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.

5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.

6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.

7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.

8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."

9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.

10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

    (b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).

11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

MEMO

To: Housing Authority of the County of Merced, Board of Commissioners

From: Resident Advisory Board

Date: May 4 , 2009

Subject: PHA Plan

As a members of the Resident Advisory Board for the Housing Authority of the County of Merced, we volunteered to review and provide input on the Housing Authority of the County of Merced's Annual Plan for Year 2009.

We are pleased to inform you that as a group we have completed this process. We have no recommendations for additions or deletions to the plan.

We would like to thank you for the opportunity to represent the residents and to serve the Housing Authority in this capacity.

Maria Sanchez

Sara Copeland

Jose Chavez

ATTACHMENT (h)

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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39P023501-07 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:** ☐ **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	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) [3]	0.00	0.00	0.00	0.00
3	1408 Management Improvements	72,000	72,000	46,656	46,656
4	1410 Administration (may not exceed 10% of line 21)	221,500	91,869	91,869	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	57,487	10,000	1,326	1,326
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	0.00	0.00	0.00	0.00
10	1460 Dwelling Structures	517,706	734,824	499,128	262,991
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	10,000	10,000	1,193	1,193
13	1475 Non-dwelling Equipment	40,000	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities [4]	0.00	0.00.	0.00	0.00

[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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39P023501-07 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:)**

☒ **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
18a	1501 Collateralization or Debt Service paid by the PHA	0.00			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00			
19	1502 Contingency (may not exceed 8% of line 20)	0.00			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	918,693	918,693	640,172	312,166
21	Amount of line 20 Related to LBP Activities	0.00			
22	Amount of line 20 Related to Section 504 Activities	0.00			
23	Amount of line 20 Related to Security - Soft Costs	0.00			
24	Amount of line 20 Related to Security - Hard Costs	0.00			
25	Amount of line 20 Related to Energy Conservation Measures	0.00			

Signature of Executive Director Date 7/6/09

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.

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. 2577-0266
Expires 4/30/2011

Part I: Summary

PHA Name:	Grant Type and Number	FFY of Grant:
The Housing Authority of the County of Merced	Capital Fund Program Grant No:	2008
	Replacement Housing Factor Grant No: CA39R023501-08	FFY of Grant:
	Date of CFFP:	2008

[X] Original Annual Statement [ ] Reserve for Disasters/Emergencies [ ] Revised Annual Statement (revision no:)
[ ] Performance & Evaluation Report for Period Ending: [ ] Final Performance & Evaluation

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			$ -	$ -
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures			$ -	$ -
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Nondwelling Structures			$ -	$ -
13	1475 Nondwelling Equipment			$ -	$ -
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	$ 43,992			
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)	$ 43,992	$ -	$ -	$ -
21	Amount of line 21 Related to LBP Activities	$ -	$ -	$ -	$ -
22	Amount of line 21 Related to Section 504 compliance				
23	Amount of line 21 Related to Security -- Soft Costs				
24	Amount of Line 21 Related to Security -- Hard Costs				
25	Amount of line 21 Related to Energy Conservation Measures				

[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] PHA's 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
Expires 4/30/2011

Part I: Summary

PHA Name:	Grant Type and Number	FFY of Grant:
The Housing Authority of the County of Merced	Capital Fund Program Grant No: - Replacement Housing Factor Grant No: CA39R023501-08 Date of CFFP:	2008 FFY of Grant: 2008

[X] Original Annual Statement [ ] Reserve for Disasters/Emergencies [ ] Revised Annual Statement (revision no:)
[ ] Performance & Evaluation Report for Period Ending: [ ] Final Performance & Evaluation

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended

Signature of Executive Director	Date	Signature of Public Housing Director	Date
Remise Lenain	7/6/09		

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: Housing Authority of the County of Merced	**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
☒ **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	$0.00			
2	1406 Operations (may not exceed 20% of line 21) [3]	$0.00			
3	1408 Management Improvements	$0.00			
4	1410 Administration (may not exceed 10% of line 21)	$91,869			
5	1411 Audit	$0.00			
6	1415 Liquidated Damages	$0.00			
7	1430 Fees and Costs	$10,000			
8	1440 Site Acquisition	$0.00			
9	1450 Site Improvement	$427,316			
10	1460 Dwelling Structures	$354,508			
11	1465.1 Dwelling Equipment—Nonexpendable	$0.00			
12	1470 Non-dwelling Structures	$10,000			
13	1475 Non-dwelling Equipment	$25,000			
14	1485 Demolition	$0.00			
15	1492 Moving to Work Demonstration	$0.00			
16	1495.1 Relocation Costs	$0.00			
17	1499 Development Activities [4]	$0.00			

[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.
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[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: Housing Authority of the County of Merced	**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

☒ **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
18a	1501 Collateralization or Debt Service paid by the PHA	$0.00			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	$0.00			
19	1502 Contingency (may not exceed 8% of line 20)	$0.00			
20	Amount of Annual Grant:: (sum of lines 2 - 19)	$918,693			
21	Amount of line 20 Related to LBP Activities	$0.00			
22	Amount of line 20 Related to Section 504 Activities	$0.00			
23	Amount of line 20 Related to Security - Soft Costs	$0.00			
24	Amount of line 20 Related to Security - Hard Costs	$0.00			
25	Amount of line 20 Related to Energy Conservation Measures	$0.00			

Signature of Executive Director Dennise Serano **Date** 7/6/09

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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CFFP (Yes/ 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]	
PHA-WIDE	ADMINISTRATION	1410		$91,869				
PHA-WIDE	FEES & COSTS	1430		$10,000				
PHA-WIDE	SITE IMPROVEMENTS	1450		$427,316				
23-04, Los Banos	Dumpster Removal, Street repair			$140,684				
23-06, Dos Palos	Playground equipment, ext.lighting, site improvements			$74,000				
23-10, Merced	Dumpster removal, site improvements			$37,632				
23-12, Atwater, Winton, Los Banos, Dos Palos	Parking lot repair			$150,000				
23-13, Merced	Replace exterior lighting			$25,000				
PHA-WIDE	DWELLING STRUCTURES	1460		$354,508				
23-11, Los Banos	Roof Repair		10	$72,000				
23-12, Atwater, Winton, Los Banos, Dos Palos	AC vent repair, siding replacement		22	$268,508				
23-13, Merced	Awning repair		28	$14,000				
PHA-Wide	Nondwelling Structures	1470		$10,000				
PHA-Wide	Nondwelling Equipment	1475		$25,000				

[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.

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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39P02350108 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:** ☐ **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	0.00	0.00		
2	1406 Operations (may not exceed 20% of line 21) [3]	0.00	0.00		
3	1408 Management Improvements	0.00	0.00		
4	1410 Administration (may not exceed 10% of line 21)	99,063	94,664		
5	1411 Audit	0.00	0.00		
6	1415 Liquidated Damages	0.00	0.00		
7	1430 Fees and Costs	60,000	60,000		
8	1440 Site Acquisition	0.00	0.00		
9	1450 Site Improvement	177,000	177,000		
10	1460 Dwelling Structures	574,573	567,448		
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	0.00		
12	1470 Non-dwelling Structures	12,000	12,000		
13	1475 Non-dwelling Equipment	68,000	35,532		
14	1485 Demolition	0.00	0.00		
15	1492 Moving to Work Demonstration	0.00	0.00		
16	1495.1 Relocation Costs	0.00	0.00		
17	1499 Development Activities [4]	0.00	0.00		

[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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39P02350108 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:** ☐ **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	0.00	0.00		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00		
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	990,636	946,644		
21	Amount of line 20 Related to LBP Activities	0.00	0.00		
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00		
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00		
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00		
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00		

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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39P02350108 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]	
PHA-WIDE	ADMINISTRATION	1410		99,063	94,664			
PHA-WIDE	FEES & COSTS	1430		60,000	60,000			
PHA-WIDE	SITE IMPROVEMENTS	1450		177,000	177,000			
23-02, Los Banos	Street Repair			42,000	42,000			
23-05, Dos Palos	Parking Lot Repair			30,000	30,000			
23-06, Livingston	Parking Lot Repair			70,000	70,000			
23-11, Los Banos	Landscape Upgrade			10,000	10,000			
23-11, Los Banos	Parking Lot Upgrade & Seal			25,000	25,000			
PHA-WIDE	DWELLING STRUCTURES	1460		574,573	567,448			
23-03, Atwater	Window Replacement		15	42,000	37,500			
23-03, Atwater	Unit Modernization		15	45,000	35,448			
23-06, Livingston	Facia Repair/Exterior Paint		60	38,000	45,000			
23-10, Merced	Carport Roof Repair		2	8,985	8,985			
23-10, Merced	Replace Kitchen & Bath Counters/Cabinets		44	30,000	130,552			
23-11, Los Banos	Exterior Paint		10	52,000	26,000			
23-12, Atwater	Repair Siding		6	62,588	78,963			
23-12, Atwater	Window Replacement		36	35,000	80,000			
23-12, Atwater	Unit Modernization		64	180,000	85,000			
23-13, Atwater	Exterior Paint		28	25,000	40,000			

[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.

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 II: Supporting Pages

PHA Name: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39PO2350108 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]	
23-02, Los Banos	Window Repalcement		20	56,000	0.00			
PHA-WIDE	NON-DWELLING STRUCTURES	1470		12,000	12,000			
PHA-WIDE	NON-DWELLING EQUIPMENT	1475		68,000	35,532			

[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: Housing Authority of the County of Merced					**Federal FFY of Grant: 2008**
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	
CA39P023-02, Los Banos	6/12/10		06/12/12		
CA39P023-03, Atwater	6/12/10		06/12/12		
CA39P023-06, Livingston	6/12/10		06/12/12		
CA39P023-10, Merced	6/12/10		06/12/12		
CA39P023-11, Los Banos	6/12/10		06/12/12		
CA39P023-12, Atwater, Winton, Los Banos, Dos Palos	6/12/10		06/12/12		
CA39P023-13, Merced	6/12/10		06/12/12		

[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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name:					**Federal FFY of Grant:**
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	

[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.

ATTACHMENT (i)

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

PHA Name/Number Housing Authority of the County of Merced CA39P023			Locality (City/County & State) Merced/Merced, California		☒Original 5-Year Plan ☐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	$781,824	$781,824	$781,824	$781,824
C.	Management Improvements		$0.00	$0.00	$0.00	$0.00
D.	PHA-Wide Non-dwelling Structures and Equipment		$35,000	$35,000	$35,000	$35,000
E.	Administration		$91,869	$91,869	$91,869	$91,869
F.	Other (Fees & Costs)		$10,000	$10,000	$10,000	$10,000
G.	Operations		$0.00	$0.00	$0.00	$0.00
H.	Demolition		$0.00	$0.00	$0.00	$0.00
I.	Development		$0.00	$0.00	$0.00	$0.00
J.	Capital Fund Financing – Debt Service		$0.00	$0.00	$0.00	$0.00
K.	Total CFP Funds		$918,693	$918,693	$918,693	$918,693
L.	Total Non-CFP Funds					
M.	Grand Total					

Part I: Summary (Continuation)

PHA Name/Number Housing Authority of the County of Merced CA39P023			Locality (City/county & State) Merced/Merced, California		☒Original 5-Year Plan ☐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_____
	CA39P023-01, Merced	Annual Statement	$0.00	$0.00	$0.00	$0.00
	CA39P023-02, Los Banos		$200,000	$0.00	$100,00	$150,000
	CA39P023-03, Atwater		$67,500	$37,500	$0.00	$75,000
	CA39P023-04, Los Banos		$0.00	$205,000	$164,824	$0.00
	CA39P023-05, Dos Palos		$15,000	$48,000	$105,000	$175,000
	CA39P023-06, Livingston		$195,000	$195,000	$300,000	$100,000
	CA39P023-10, Merced		$264,000	$184,000	$0.00	$30,000
	CA39P023-11,Los Banos		$40,324	$50,000	$0.00	$0.00
	CA39P023-12, Atwater, Winton, Los Banos, Dos Palos		$0.00	$45,000	$0.00	$0.00
	CA39P023-13, Merced		$0.00	$17,324	$112,000	$95,912
	PHA-Wide: Administration		$91,869	$91,869	$91,869	$91,869
	PHA-Wide: Fees & Costs		$10,000	$10,000	$10,000	$10,000
	PHA-Wide: Non-Dwelling Structures		$10,000	$10,000	$10,000	$10,000
	PHA-Wide: Non-Dwelling Structures & Equipment		$25,000	$25,000	$25,000	$25,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY _2009_____	Work Statement for Year __2_____ FFY _____2010_____			Work Statement for Year: ___3_____ FFY ___2011_____		
	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	CA39P023-01, Merced		$0.00	CA39P023-01, Merced		$0.00
Annual	CA39P023-02, Los Banos: Unit modifications, site improvements	20	$200,000	CA39P023-02, Los Banos: Ext. Paint	20	50,000
Statement	CA39P023-03, Atwater: Unit modifications	15	$67,500	CA39P023-03, Atwater: Ext. paint	15	$37,500
	CA39P023-04, Los Banos:		$0.00	CA39P023-04, Los Banos: Re-roof	20	$205,000
	CA39P023-05, Dos Palos: Site improvements		$15,000	CA39P023-05, Dos Palos: Unit Modifications	12	$48,000
	CA39P023-06, Livingston: Unit modifications	30	$195,000	CA39P023-06, Livingston: Unit modifications	30	$195,000
	CA39P023-10, Merced: Replace cabinets, countertops and vanities	44	$264,000	CA39P023-10, Merced: Ext. paint	44	$184,000
	CA39P023-11, Los Banos: Unit upgrades	10	$40,324	CA39P023-11, Los Banos: Ext. Paint	10	$50,000
	CA39P023-12, Atwater, Winton, Los Banos, Dos Palos:		$0.00	CA39P023-12, Atwater, Winton, Los Banos, Dos Palos: Unit Mods	10	$45,000

	CA39P023-13, Merced		$0.00	CA39P023-13, Merced: Site Improvements	28	$17,324
	PHA-WIDE: ADMINISTRATION		$91,869	PHA-WIDE: ADMINISTRATION		$91,869
	PHA-WIDE: FEES & COSTS		$10,000	PHA-WIDE: FEES & COSTS		$10,000
	PHA-WIDE: NONDWELLING STRUCTURES		$10,000	PHA-WIDE: NONDWELLING STRUCTURES		$10,000
	PHA-WIDE: NONDWELLING EQUIPMENT		$25,000	PHA-WIDE: NONDWELLING EQUIPMENT		$25,000
	Subtotal of Estimated Cost		$918,693	Subtotal of Estimated Cost		$918,693

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	CA39P023-01, Merced		$0.00	CA39P023-01, Merced		$0.00
Annual	CA39P023-02, Los Banos: Re-roof	20	$100,000	CA39P023-02, Los Banos: Replace fence, Replace HVAC	20	$150,000
Statement	CA39P023-03, Atwater:		$0.00	CA39P023-03, Atwater: Re-roof	15	$75,000
	CA39P023-04, Los Banos: Ext. Paint, Unit Mods	20	$164,824	CA39P023-04, Los Banos:		$0.00
	CA39P023-05, Dos Palos: Ext. Paint	30	$105,000	CA39P023-05, Dos Palos: Exterior lights; install fencing, Replace driveways	30	$175.000
	CA39P023-06, Livingston: Re-roof	60	$300,000	CA39P023-06, Livingston: Install drainage system		$100,000
	CA39P023-10, Merced: Site Improvements		$0.00	CA39P023-10, Merced: Replace fencing		$30.000
	CA39P023-11, Los Banos:		$0.00	CA39P023-11, Los Banos:		$0.00

	CA39P023-12, Atwater, Winton, Los Banos, Dos Palos:		$0.00	CA39P023-12, Atwater, Winton, Los Banos, Dos Palos:		$0.00
	CA39P023-13, Merced: Unit upgrades	28	$112,000	CA39P023-13, Merced: HVAC Replacement	28	$95,912
	PHA-WIDE: ADMINISTRATION		$91,869	PHA-WIDE: Sidewalk repair/replace		$155,912
	PHA-WIDE: FEES & COSTS		$10,000	PHA-WIDE: ADMINISTRATION		$91,869
	PHA-WIDE: NONDWELLING STRUCTURES		$10,000	PHA-WIDE: FEES & COSTS		$10,000
	PHA-WIDE: NONDWELLING EQUIPMENT		$25,000	PHA-WIDE: NONDWELLING STRUCTURES		$10,000
				PHA-WIDE: NONDWELLING EQUIPMENT		$25,000
	Subtotal of Estimated Cost		$918,693	Subtotal of Estimated Cost		$918,693

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	$

ATTACHMENT (j)

Statement of Housing Needs

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

Based upon the information contained in the Consolidated Plan applicable to the jurisdiction, and/or other date available to the PHA, the following provides a view of the housing needs in the jurisdiction. The housing need for each factor is rated from 1-5, with 1 being "no impact" and 5 being "severe impact".

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ability	Size	Location
Income <= 30% of AMI	4603	5	5	4	3	3	4
Income >30% but <=50% of AMI	1100	5	5	4	3	3	4
Income >50% but <80% of AMI	130	4	4	2	2	2	2
Elderly	387	5	4	3	3	2	2
Families with Disabilities	58	5	5	4	3	3	2
Ethnicity: Hispanic	1685	5	3	3	3	3	3
Non-Hispanic	1784	5	3	3	3	3	3
Unknown	2365	5	3	3	3	3	3
Race: Black	769	3	3	3	3	3	3
Race: Am. Indian	33	3	3	3	3	3	3
Race: Asian	241	3	3	3	3	3	3

Housing Needs of Families on the Waiting List – Combined Wait Lists

1BR	1765	30%
2 BR	1669	28%
3 BR	1151	20%
4 BR	630	10%
5 BR	356	6%
5+ BR	262	4%

Housing Needs of Families
Public Housing Waiting List

	# of families	% of total families	Annual Turnover
Waiting list total	2252		68
Extremely low income <=30% AMI	2034	91%	
Very low income (>30% but <=50% AMI)	177	7%	
Low income (>50% but <80% AMI)	41	2%	
Families with children	1253	55%	
Elderly families	168	8%	
Families with Disabilities	22	1%	
Race/ethnicity: Unknown	1402	62%	
Black	145	6%	
American Indian	8	0%	
Asian/Pac Isled	59	2%	
Hispanic	429	19%	
Non-Hispanic	421	19%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	943	42%	
2 BR	741	33%	
3 BR	344	15%	
4 BR	118	5%	
5 BR	60	2%	
5+ BR	46	2%	

Housing Needs of Families
Section-8 Tenant-Based Waiting List

	# of families	% of total families	Annual Turnover
Waiting list total	3581		161
Extremely low income <=30% AMI	2569		
Very low income (>30% but <=50% AMI)	923		
Low income (>50% but <80% AMI)	89		
Families with children	2652	74%	
Elderly families	227	6%	
Families with Disabilities	38	1%	
Race/ethnicity: Unknown	963	28%	
Black	624	17%	
American Indian	25	1%	
Asian/Pac Isld	182	5%	
Hispanic	1256	35%	
Non-Hispanic	1363	38%	

Housing Needs of Families on the Sec. 8 Waiting List

1BR	822	23%
2 BR	928	26%
3 BR	807	23%
4 BR	512	15%
5 BR	296	8%
5+ BR	216	6%

ATTACHMENT (k)

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

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, *John Bramble* the *City Manager* certify that the Five Year and Annual PHA Plan of the *Housing Authority - County of Merced* is consistent with the Consolidated Plan of *City of Merced* prepared pursuant to 24 CFR Part 91.

John M. Bramble 5-12-09

Signed / Dated by Appropriate State or Local Official

ATTCHMENT (k)

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

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, *Cathy E. Creswell* the *Deputy Director* certify that the Five Year and Annual PHA Plan of the *Merced County Housing Authority* is consistent with the Consolidated Plan of *the State of California* prepared pursuant to 24 CFR Part 91.

Cathy E. Creswell 5/1/09

Signed / Dated by Appropriate State or Local Official

Proof of Publication

(2015.5 C.C.P.)

Proof of Publication of

PUBLIC NOTICE

STATE OF CALIFORNIA)
) ss.
County of Merced)

I am a citizen of the United States and a resident of the County aforesaid; I am over the age of eighteen years, and not a party to or interested in the above entitled matter. I am the principal clerk of the printer of the Merced Sun-Star, a newspaper of general circulation, printed and published in the City of Merced, County of Merced, and which newspaper has been adjudged a newspaper of general circulation by the Superior Court of the County of Merced, State of California, under the date of July 14, 1964, Case Number 33224 that the notice, of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to wit:

APRIL 17, 20, 21, 2009

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature

04/21/2009

Date:

This space is for the County Clerk's Filing Stamp

PUBLIC NOTICE

The Housing Authority of the County of Merced is announcing the availability for public review and comment of a Draft HUD FiscalYear 2009 Public Housing Agency Annual Plan for the period of 10/01/09 through 09/30/2010. The plan may be reviewed at the Housing Authority Main Office located at 405 "U" Street in Merced during office hours: Monday thru Friday 8:00 a.m.-5:00 p.m. (Closed every other Friday).

Comments will be received until 5:00 p.m., on Monday, June 1, 2009.

A public hearing regarding the Plan will be at the Housing Authority of the County of Merced Board of Commissioners Meeting on Tuesday, June 16, 2009, at 5:30 p.m., at 405 "U" Street, Merced, CA., for final adoption of the HUD Public Housing Agency Annual Plan FY 2009.

Legal April 17, 20, 21, 2009

RECEIVED
APR 27 2009
Merced County
Housing Authority

Proof of Publication

(2015.5 C.C.P.)

Proof of Publication of

PUBLIC NOTICE

STATE OF CALIFORNIA)
) ss.
County of Merced)

I am a citizen of the United States and a resident of the County aforesaid; I am over the age of eighteen years, and not a party to or interested in the above entitled matter. I am the principal clerk of the printer of the Merced Sun-Star, a newspaper of general circulation, printed and published in the City of Merced, County of Merced, and which newspaper has been adjudged a newspaper of general circulation by the Superior Court of the County of Merced, State of California, under the date of July 14, 1964, Case Number 33224 that the notice, of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to wit:

APRIL 17, 20, 21, 2009

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature

04/21/2009

Date:

This space is for the County Clerk's Filing Stamp

PUBLIC NOTICE

The Housing Authority of the County of Merced is announcing the availability for public review and comment of a Draft HUD FiscalYear 2009 Public Housing Agency Annual Plan for the period of 10/01/09 through 09/30/2010. The plan may be reviewed at the Housing Authority Main Office located at 405 "U" Street in Merced during office hours: Monday thru Friday 8:00 a.m.-5:00 p.m. (Closed every other Friday).

Comments will be received until 5:00 p.m., on Monday, June 1, 2009.

A public hearing regarding the Plan will be at the Housing Authority of the County of Merced Board of Commissioners Meeting on Tuesday, June 16, 2009, at 5:30 p.m., at 405 "U" Street, Merced, CA., for final adoption of the HUD Public Housing Agency Annual Plan FY 2009.

Legal April 17, 20, 21, 2009

RESOLUTION NO. 09-13

APPROVING PHA ANNUAL PLAN FOR FISCAL YEAR 2009 FOR SUBMISSION TO HUD (PENDING ANY REQUIRED OR NECESSARY CHANGES PRIOR TO SUBMISSION)

WHEREAS, HUD requires the Authority to submit an Annual Plan for FY 2009; and

WHEREAS, the Plan is in full compliance with HUD regulations, has been on display for a period of 45 days for public review and comment, and the required Public Hearing was held during a regular board meeting (06/16/2009); and

WHEREAS, the Plan is consistent with the Consolidated Plans of the City of Merced and the State of California,

THEREFORE, BE IT RESOLVED that the Board of Commissioners of the Housing Authority of the County of Merced does hereby approve the PHA Annual Plan for Fiscal Year 2009 for submission to HUD (pending any required or necessary change prior to submission).

The foregoing Resolution was duly passed and adopted by the Board of Commissioners of the Housing Authority of the County of Merced on a motion adopted by the following vote:

Motion: Commissioner Garibay
Second: Commissioner Henderson

Ayes: 4 (Garibay, Reyburn, Stillahn, Henderson)

Noes: None

Absent or Not Voting: None

Chairman, Board of Commissioners
Housing Authority of the County of Merced

Dated: July 1, 2009

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: Housing Authority of the County of Merced	Grant Type and Number Capital Fund Program Grant No: CA39S023501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

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)	125,395			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,128,554			
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.

Submitted to Rumse 4/6/09

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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39S023501-09 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2009** **FFY of Grant Approval: 2009**

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
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)	1,253,949			
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: Housing Authority of the County of Merced	**Grant Type and Number** Capital Fund Program Grant No: CA39S023501-09 CFFP (Yes/ 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]	
CA23-04	Upgrade electrical circuitry	1460	30	40,000				
CA23-06	Upgrade electrical circuitry	1460	60	80,000				
CA23-11	Replace roofs	1460	10	60,000				
CA23-02	Replace & upgrade electrical circuits, panels and wiring	1460	20	137,554				
CA23-05	Replace windows	1460	30	84,000				
CA23-11	Replace windows	1460	10	42,000				
CA23-10	Replace windows	1460	44	130,000				
CA23-02	Replace windows	1460	20	60,000				
CA23-12A	Replace siding	1460	36	495,000				

[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.

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 II: Supporting Pages

PHA Name:	**Grant Type and Number** Capital Fund Program Grant No: CFFP (Yes/ 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]	

[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.

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the County of Merced					**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	
CA23-04	03-17-2010		03-12-2012		
CA23-06	03-17-2010		03-12-2012		
CA23-11	03-17-2010		03-12-2012		
CA23-02	03-17-2010		03-12-2012		
CA23-05	03-17-2010		03-12-2012		
CA23-11	03-17-2010		03-12-2012		
CA23-10	03-17-2010		03-12-2012		
CA23-02	03-17-2010		03-12-2012		
CA23-12A	03-17-2010		03-12-2012		

[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.

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name:					**Federal FFY of Grant:**
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	

[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.

MEMORANDUM

TO: Board of Commissioners,
Housing Authority of the County of Merced

FROM: Rennise Ferrario, Executive Director

DATE: April 3, 2009

SUBJECT: Recommendation to approve Resolution No. 09-11, accepting the American Recovery and Reinvestment Act/Capital Funds

On February 17, 2009 the American Recovery and Reinvestment Act was signed, providing public Housing Authority's with additional funds for capital projects.

This resolution is brought to the Board for approval of accepting one fully executed Capital Fund Program (CFP) Amendment in the amount of $1,253,949.00

The Housing Authority will be able to access funds once a Capital Fund Annual Statement Form is received.

RECOMMENDATION

It is recommended that the Board of Commissioners of the Housing Authority of the County of Merced approve Resolution No. 09-11, accepting the American Recovery and Reinvestment Act/Capital Funds and authorize the Executive Director to sign off on behalf of the agency.

RESOLUTION NO. 09-11

ACCEPTING THE AMERICAN RECOVERY AND REINVESTMENT ACT/CAPITAL FUNDS

WHEREAS, on February 17, 2009 the American Recovery and Reinvestment Act was signed, providing public Housing Authority's with additional funds for capital projects; and

NOW, THEREFORE, BE IT RESOLVED that the Board of Commissioners of the Housing Authority of the County of Merced:

THAT, the Board of Commissioners approves and accepts one fully executed Capital Fund Program (CFP) Amendment in the amount of $1,253,949.00; and

THAT, the Executive Director, on behalf of HACM, is hereby authorized to take all actions necessary to implement the foregoing resolution.

The foregoing Resolution was duly passed and adopted by the Board of Commissioners of the Housing Authority of the County of Merced, at a regular meeting of the Board held on the 3rd day of April 2009, on a motion adopted by the following vote:

Motion: Patrick Bowman
Second: Karen Henderson

Ayes: 5
Noes: 0

Absent: no
Abstain: no

Chairperson of the Board of Commissioners
Housing Authority of the County of Merced

Dated: April 3, 2009