

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: Palatka Housing Authority PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2009</u> PHA Code: FL057				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>383</u> Number of HCV units: <u>Baseline (340)</u>				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" 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
	PHA 1:				PH
	PHA 2:				HCV
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:				
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. The Palatka Housing Authority continues to implement PIH Notice 2006-42 (Violence Against Women and Justice Reauthorization Act 2005 & Form HUD-50066 (Certification of Domestic Violence, Dating Violence, or Stalking, in both Public Housing and Section 8 HCV programs.				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (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. (a) Revised PHA Plan elements as follows: 1) Planned application to designate project-based Section 8 Vouchers for construction of a 34 – 36 unit development replacing the disposed/demolished public housing Frank G. George Development by only elderly families. 2) Planned application for 100 Family Unification Vouchers (FUP) for residents of Palatka and Putnam County. 3) Facilitation of two ROSS Grants (Homeownership/Family Self-Sufficiency and Elderly/Disabled). (b) Locations for public viewing of PHA Annual Plan: 1) Main administrative office of the PHA 2) Main administrative office of the City of Palatka 3) Public library 4) PHA development (Dr. James A. Long Community Center)				
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.				
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 <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: a) FY 2009 Capital Fund Program Annual Statement (FL29P057501-09 – FL057a02) b) P & E Report Ending 09/30/2008 (FL29P057501-07 – FL057c02) c) P & E Report Ending 09/30/2008 (FL29P057501-08 – FL057d02)				

8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See Attachments:</p> <ul style="list-style-type: none"> a) FY 2010 - 2013 Capital Fund Program Five-Year Action Plan (FL057b02) b) FL29P057-501-01 (FL057I02) c) FL29P057-501-03 (FL057m02) d) FL29P057-501-06 (FL057n02) 																																																																																																
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred in finance capital improvements.</p>																																																																																																
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <table border="1" data-bbox="240 642 1414 1079"> <thead> <tr> <th colspan="8">Housing Needs of Families in the Jurisdiction</th> </tr> <tr> <th colspan="8">By Family Type</th> </tr> <tr> <th>Family Type</th> <th>Overall</th> <th>Afford-ability</th> <th>Supply</th> <th>Quality</th> <th>Access-ibility</th> <th>Size</th> <th>Loca-tion</th> </tr> </thead> <tbody> <tr> <td>Income <= 30% of AMI</td> <td>1640</td> <td>5</td> <td>4</td> <td>4</td> <td>2</td> <td>2</td> <td>3</td> </tr> <tr> <td>Income >30% but <=50% of AMI</td> <td>2692</td> <td>4</td> <td>4</td> <td>4</td> <td>2</td> <td>2</td> <td>2</td> </tr> <tr> <td>Income >50% but <80% of AMI</td> <td>1121</td> <td>3</td> <td>3</td> <td>3</td> <td>2</td> <td>2</td> <td>2</td> </tr> <tr> <td>Elderly</td> <td>1046</td> <td>5</td> <td>5</td> <td>3</td> <td>3</td> <td>2</td> <td>2</td> </tr> <tr> <td>Families with Disabilities</td> <td>N/A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>White</td> <td>881</td> <td>2</td> <td>2</td> <td>2</td> <td>2</td> <td>2</td> <td>2</td> </tr> <tr> <td>African Americans</td> <td>1020</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> <td>2</td> </tr> <tr> <td>Hispanic</td> <td>323</td> <td>5</td> <td>4</td> <td>2</td> <td>2</td> <td>3</td> <td>2</td> </tr> <tr> <td>Other</td> <td>N/A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>See other tables (Housing Needs of Families Public Housing Waiting List/Section 8 tenant-based assistance Waiting List) at end.</p>	Housing Needs of Families in the Jurisdiction								By Family Type								Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion	Income <= 30% of AMI	1640	5	4	4	2	2	3	Income >30% but <=50% of AMI	2692	4	4	4	2	2	2	Income >50% but <80% of AMI	1121	3	3	3	2	2	2	Elderly	1046	5	5	3	3	2	2	Families with Disabilities	N/A							White	881	2	2	2	2	2	2	African Americans	1020	5	4	3	3	3	2	Hispanic	323	5	4	2	2	3	2	Other	N/A						
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9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>																																																																																																

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.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>(a) Progress in Meeting Mission and Goals: The Palatka Housing Authority in partnership with the community is committed to providing safe, affordable and quality housing options for economic independence to residents of Palatka and Putnam County. We seek to create equal opportunities through education and training for residents to reach self-sufficiency and economic independence. Our efforts to progressively meet our mission and goals have been enhanced with the successful application and receipt of two ROSS Grants from HUD; the Homeownership and Family Self-Sufficiency and the Elderly and disabled Grant. Both have been funded for three years respectively with the primary goals of homeownership and self-sufficiency for our residents.</p> <p>To date the Homeownership grant has provided service to over 75 residents with approximately 20 signing contracts for full participation within the first 6 months of service. The Elderly/Disabled grant has provided services to over 50 residents to include Medicaid and health services, recreational activities and quality of life. Both grants are providing substantial opportunities to the residents we serve at Palatka Housing Authority. We have a signed MOU with partner, Work Source, to provide job training opportunities for adult residents while the ROSS grant has afforded us the chance to make General Equivalency Diploma (GED) and Adult Basic Education (ABE) via St. Johns River Community College (SJRCC) available to our adult residents.</p> <p>(b) Significant Amendment – The Palatka Housing Authority’s definition of significant amendment in reference to our Five-Year Agency Plan and Annual Plan will apply if a formal vote of the Board of Commissioners is required for any changes to the PHA Five-Year Plan.</p> <p>(c) Substantial Deviation/Modification – The Palatka Housing Authority has determined that a substantial deviation/modification will occur only if a formal vote of the Board of Commissioners is required for changes. In addition, any decision to demolish or dispose of a development or designate a development as “elderly only” or “disabled only”, requiring a public hearing and Board of Commissioner approval, as well as HUD approval, will be considered a substantial deviation/modification to the PHA Five-Year Agency Plan.</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> <p>(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)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(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.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p> <p>See Attachments:</p> <p>a) Form HUD-50077 PHA Certifications of Compliance with the PHA Plans and Related Regulations – FL057e02)</p> <p>b) Form HUD-50070 Certification for a Drug-Free Workplace – FL057f02)</p> <p>c) Form HUD-50071 Certification of Payments to Influence Federal Transactions – FL057g02)</p> <p>d) Form SF-LLL Disclosure of Lobbying Activities – FL057h02)</p> <p>e) Resident Advisory Board (RAB) comments – FL057i02)</p> <p>f) Certification PHA Plans Consistency with the Consolidated Plan (FL057j02)</p> <p>g) PHA (VAWA Plan) (FL057k02)</p>
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9.0 (continued below)

Housing Needs of Families on the Waiting List	
Waiting list type: (select one)	
<input type="checkbox"/>	Section 8 tenant-based assistance
<input checked="" type="checkbox"/>	Public Housing
<input type="checkbox"/>	Combined Section 8 and Public Housing
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)
If used, identify which development/sub-jurisdiction:	

Housing Needs of Families on the Waiting List			
	# of families	% of total families	Annual Turnover
Waiting list total	289		141
Extremely low income <=30% AMI	281	97%	
Very low income (>30% but <=50% AMI)	8	2%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	168	58%	
Elderly families	112	38%	
Families with Disabilities	61	21%	
White	92	31%	
African American	194	67%	
Hispanic	2	0%	
Other	N/A		
Characteristics by Bedroom Size (Public Housing Only)			
1BR	114	39%	
2 BR	127	43%	
3 BR	39	13%	
4 BR	8	2%	
5 BR	1	0%	
5+ BR	N/A		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/sub-jurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	33		30
Extremely low income <=30% AMI	33	100%	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	19	57%	
Elderly families	2	6%	
Families with Disabilities	0	0	
White	7	21%	
African American	26	78%	
Hispanic	0	0	
Other	N/A		
Characteristics by Bedroom			

Housing Needs of Families on the Waiting List

Size (Public Housing Only)			
1 BR	13	39%	
2 BR	12	36%	
3 BR	1	.03%	
4 BR	7	21%	
5 BR	0	0	
5+ BR	N/A		
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: Palatka Housing Authority	Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:	Federal FY of Grant: 2009
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no :)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	80,564			
3	1408 Management Improvements	168,514			
4	1410 Administration	84,257			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	93,500			
10	1460 Dwelling Structures	198,951			
11	1465.1 Dwelling Equipment—Nonexpendable	4,500			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities	212,292			
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	842,578			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	Total Actual Cost		Status of Work
					Funds Obligated	Funds Expended	
AMP11 Scattered Sites	Operations	1406		<u>17,724</u>			
AMP12 Northside Homes	Operations	1406		<u>24,170</u>			
AMP14 Dr. James A. Long	Operations	1406		<u>20,946</u>			
AMP15 Rosa K. Ragsdale	Operations	1406		<u>17,724</u>			
AMP11/SS	Resident Services/Dev Activities	1408		14,087.74			
	Staff Wages	1408		13,517.01			
	Staff Benefits	1408		3,707.30			
	Training/Travel	1408		5,560.95			
	Consultant Services	1408		200			
				<u>37,073</u>			
AMP12/NH	Resident Services/Dev Activities	1408		19,516.06			
	Staff Wages	1408		18,199.44			
	Staff Benefits	1408		5,055.40			
	Training/Travel	1408		7,583.10			
	Consultant Services	1408		200			
				<u>50,554</u>			

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
						Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
AMP14/DR. JAL	Resident Services/Dev Activities	1408		16,887.46				
	Staff Wages	1408		15,773.04				
	Staff Benefits	1408		4,381.40				
	Training/Travel	1408		6,572.10				
	Consultant Services	1408		200				
				43,814				
AMP15/RKR	Resident Services/Dev Activities	1408		14,087.74				
	Staff Wages	1408		13,517.01				
	Staff Benefits	1408		3,707.30				
	Training/Travel	1408		5,560.95				
	Consultant Services	1408		200				
				37,073				

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Central Office	Administration	1410		<u>84,257</u>				
AMP11/SS	CPTED/Landscaping	1450		<u>7,500</u>				
AMP12/NH	CPTED/Landscaping	1450		<u>5,000</u>				
AMP14/DR. JAL	Fencing	1450		80,000				
	Playground Upkeep	1450		1,000				
				<u>81,000</u>				

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	

				Original	Revised 2	Funds Obligated	Funds Expended	
AMP11/SS	Water Distribution	1460	84 Units	3,000				
	Roof Repair	1460	84 Units	5,000				
	Column Upgrade	1460	84 Units	5,000				
				<u>13,000</u>				
AMP12/NH	Water Distribution	1460	116 Units	10,250				
	Roof Repair	1460	116 Units	7,750				
				<u>18,000</u>				
AMP14/DR. JAL	Bath Remodel	1460	16 Units	<u>35,265</u>				
AMP15/RKR	Bath Remodel	1460	16 Units	30,686				
	Water Distribution	1460	34 Units	102,000				
				<u>132,686</u>				
AMP12/NH	Water Heaters	1465. 1		4,500				
	Development Activities	1499		<u>212,292</u>				
TOTAL CFP				<u>842,578</u>				

Signature of Executive Director & Date

Signature of Public Housing Director & Date

**Capital Fund Program Five-Year Action Plan
Part I: Summary**

PHA Name		Palatka Housing Authority		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1 2009	Work Statement for Year 2 FFY Grant: FL29P057-501-09 PHA FY: 2010	Work Statement for Year 3 FFY Grant: PHA FY: 2011	Work Statement for Year 4 FFY Grant: PHA FY: 2012	Work Statement for Year 5 FFY Grant: PHA FY: 2013
AMP11	Annual Statement	17,724	17,724	17,724	17,724
AMP12		24,170	24,170	24,170	24,170
AMP14		20,946	20,946	20,946	20,946
AMP15		17,724	17,724	17,724	17,724
Operations Subtotal		80,564	80,564	80,564	80,564
Management Improvements		168,514	168,514	168,514	168,514
Administration		84,257	84,257	84,257	84,257
Site Improvement		179,500	120,000	163,000	160,000
Dwelling Structures		181,186	270,986	261,686	349,243
Dwelling Equipment		38,400			
Development Activities		110,157	118,257	84,557	
Grand Total		842,578	842,578	842,578	842,578

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: Palatka Housing Authority	Grant Type and Number Capital Fund Program Grant No: FL29P057-501-07 Replacement Housing Factor Grant No:	Federal FY of Grant: 2007
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 9/30/08
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	80,564	80,564	80,564	0
3	1408 Management Improvements	161,128	161,128	161,128	6,925.08
4	1410 Administration	80,564	80,564	80,564	80,564
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000	60,689.50	30,000	0
8	1440 Site Acquisition				
9	1450 Site Improvement	273,657	243,591.55	165,477.50	94,370.15
10	1460 Dwelling Structures	25,000	33,790.50	16,790.50	7,830.50
11	1465.1 Dwelling Equipment—Nonexpendable	31,250	31,250	0	0
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000	3,800	3,800	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	10,000	1,780	1,780	1,780
18	1499 Development Activities	108,478	108,483.45	108,478	
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	805,641	805,641	648,582	191,469.73
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Operations	1406						
		.11		17,724.08	17,724.08	17,724.08	0	
		.12		24,169.20	24,169.20	24,169.20	0	
		.14		20,946.64	20,946.64	20,946.64	0	
		.15		17,724.08	17,724.08	17,724.08	0	
				80,564	80,564	80,564	0	
PHA-WIDE	Resident Services/Development Activity	1408						
		.11		12,348.16	12,348.16	12,348.16	520.69	
		.12		16,838.40	16,838.40	16,838.40	297.02	
		.14		14,593.28	14,593.28	14,593.28	406.10	
		.15		12,348.16	12,348.16	12,348.16	265.16	
				56,128	56,128	56,128	1,488.97	
	Management Improvement Staff Wages	1408						
		.11		7,700	7,700	7,700	839.73	
		.12		10,500	10,500	10,500	1,145.08	
		.14		9,100	9,100	9,100	992.40	
		.15		7,700	7,700	7,700	839.73	
				35,000	35,000	35,000	3,816.94	
	Management Improvement Staff Benefits	1408						
		.11		2,750	2,750	2,750	63.79	
		.12		3,750	3,750	3,750	86.98	
		.14		3,250	3,250	3,250	75.38	
		.15		2,750	2,750	2,750	63.78	
				12,500	12,500	12,500	289.93	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Training & Travel	1408						
		.11		5,500	5,500	5,500	472.55	
		.12		7,500	7,500	7,500	604.50	
		.14		6,500	6,500	6,500	252.19	
		.15		5,500	5,500	5,500	0	
				25,000	25,000	25,000	1,329.24	
	Consultant Services	1408						
		.11		2,750	2,750	2,750	0	
		.12		3,750	3,750	3,750	0	
		.14		3,250	3,250	3,250	0	
		.15		2,750	2,750	2,750	0	
				12,500	12,500	12,500	0	
	Security/Video	1408						
		.11		4,400	4,400	4,400	0	
		.12		6,000	6,000	6,000	0	
		.14		5,200	5,200	5,200	0	
		.15		4,400	4,400	4,400	0	
				20,000	20,000	20,000	0	
	Total for Account 1408			161,128	161,128	161,128	6,925.08	
PHA-WIDE	Administrative Costs	1410		26,466.49	26,466.49	26,466.49	26,466.49	
	Administrative Wages	1410		42,312.33	42,312.33	42,312.33	42,312.33	
	Administrative Benefits	1410		11,785.18	11,785.18	11,785.18	11,785.18	
	Total for Account 1410			80,564	80,564	80,564	80,564	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Fees & Costs	1430		30,000	25,689.50	30,000		
	Modernization Officer			0	35,000	0	0	
	Total for Account 1430			30,000	60,689.50	30,000	0	
PHA-WIDE	Playground – Lemon Heights	1450		10,000	0	0	0	
	Playground – Northside Homes			7,500	0	0	0	
	Playground – Dr. James A. Long			10,000	0	0	0	
	Playground – Rosa K. Ragsdale			7,500	0	0	0	
	CPTED/Landscaping			7,390.34	14,824.89	7,954.39	4,500	
	Sidewalks/Curbing – Northside Homes			122,457.66	59,277.80	87,392.21	59,277.80	
	Fencing – WM, LH & MC			0	33,179.86	0	0	
	Fencing – Northside Homes			48,809	33,991.50	30,592.35	30,592.35	
	Fencing – Dr. James A. Long			60,000	102,317.50	39,538.55	0	
	Total for Account 1450			273,657	243,591.55	165,477.50	94,370.15	

Signature of Public Housing Director & Date

Signature of Executive Director & Date

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-09 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Replace Water Heaters	1460		14,000	17,000	0	0	
	Water Renewal			3,000	0	0	0	
	Mailbox Replacement			8,000	16,790.50	16,790.50	7,830.50	
	Total for Account 1460			25,000	33,790.50	16,790.50	7,830.50	
	Appliances	1465		31,250	31,250	0	0	
	Computer Equipment (Soft)	1475		4,000	0	0	0	
	Maintenance Equipment (Soft)			1,000	0	0	0	
	Maintenance Equipment (Capital)			0	3,800	3,800	0	
	Total for Account 1475			5,000	3,800	3,800	0	
	Relocation	1495		10,000	1,780	1,780	1,780	
	Development	1499		108,478	108,483.45	108,478	0	
	Total Capital Fund 2007			805,641	805,641	648,582	191,469.73	

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: Palatka Housing Authority	Grant Type and Number Capital Fund Program Grant No: FL29P057-501-08 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: 9/30/08
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised (1)	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	80564	80564	80564	0
3	1408 Management Improvements	168514	168514	128628	0
4	1410 Administration	84257	84257	80564	16798.27
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30000	65000	30000	0
8	1440 Site Acquisition				
9	1450 Site Improvement	274735	213378	164848	0
10	1460 Dwelling Structures	25000	62357	8000	0
11	1465.1 Dwelling Equipment—Nonexpendable	31250	31250	0	0
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5000	4000	5000	0
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	10000	0	10000	0
18	1499 Development Activities	133258	133258	108478	0
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	842578	842578	616082	16798.27
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director & Date

Signature of Public Housing Director & Date

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Operations	1406		80,564	80,564	80,564	0	
	Resident Services/Development Activity	1408		47,514	47,514	47,628	0	
	Management Improvement Staff Wages			46,500	46,500	35,000	0	
	Staff Benefits			18,000	18,000	12,500	0	
	Training/Travel			24,000	24,000	25,000	0	
	Staff Uniforms			0	0	8,500	0	
	Consultant Services			12,500	12,500	0	0	
	Security/Video			20,000	20,000	0	0	
	Total for Account 1408			168,514	168,514	128,628	0	
	Administrative Costs	1410		84,257	84,257	80,564	16,798.27	
	Total for Account 1410			84,257	84,257	80,564	16,798.27	
PHA-WIDE	Fees & Costs	1430		30,000	30,000	30,000	0	
	Total for Account 1430			30,000	65,000	30,000	0	
	Playground – Lemon Heights	1450		10,000	0	0	0	
	Playground – Northside Homes			7,500	0	0	0	
	Playground – Dr. James A. Long			10,000	0	0	0	
	Playground – Rosa K. Ragsdale			7,500	0	0	0	
	CPTED/Landscaping			9,833.34	15,000	7,390.34	0	
	Security Lighting			0	10,000	0	0	
	Sidewalks/Curbing – Northside Homes			121,092.66	0	122,457.66	0	
	Fencing – WM, LH & MC			0	50,000	0	0	
	Fencing – Northside Homes			48,809	12,126	35,000	0	
	Total for Account 1450			274,735	213,378	164,848	0	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated	Funds Expended	
PHA-WIDE	Enclose Stairwells	1460		8,000	20,000	0	0	
	Water Renewal			3,000	10,000	0	0	
	Replace Water Heaters			14,000	14,000	0	0	
	Exterior Painting			0	1,000	0	0	
	Mailbox Replacement			0	12,357	8,000	0	
	Security Screen Doors			0	5,000	0	0	
	Total for Account 1460			25,000	62,357	8,000	0	
	Appliances	1465		31,250	31,250	0	0	
	Computer Equipment (Soft)	1475		4,000	0	4,000	0	
	Maintenance Equipment (Soft)			1,000	0	1,000	0	
	Maintenance Equipment (Capital)			0	4,000	0	0	
	Total for Account 1475			5,000	4,000	5,000	0	
	Relocation	1495		10,000	0	10,000	0	
	Development	1499		133,258	133,258	108,478	16,798.27	
	TOTAL Capital Fund 2008			842,578	842,578	616,082	16,798.27	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program Grant No: FL29P057-501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated	Funds Expended	

Signature of Public Housing Director & Date

Signature of Executive Director & Date

Capital Fund Program page 4 of 5

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Palatka Housing Authority		Grant Type and Number Capital Fund Program No: FL29P057-501-08 Replacement Housing Factor No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Operations	9/1/2008			9/1/2010			
Resident Services	9/1/2008			9/1/2010			
Training & Travel	9/1/2008			9/1/2010			
Staff Uniforms	9/1/2008			9/1/2010			
Consultant Services	9/1/2008			9/1/2010			
Administrative Costs	9/1/2008			9/1/2010			
Fees & Costs	9/1/2008			9/1/2010			
Playgrounds	9/1/2008			9/1/2010			
Sidewalks/Curbing	9/1/2008			9/1/2010			

RESOLUTION #516

PHA CERTIFICATIONS OF COMPLIANCE WITH THE PHA PLAN AND REGULATIONS BOARD RESOLUTION TO ACCOMPANY THE PHA PLAN

Acting on behalf of the Board of Commissioners of the Palatka Housing Agency (PHA), as its Chairman, I approve the submission of the 5-Year Plan and Annual Plan for PHA fiscal year beginning April 1, 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 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 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.
4. 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.
5. The PHA 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.
6. 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.
7. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
 - 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)..U.S. Department of Housing and Urban Development Office of Public and Indian Housing PHA Certifications of Compliance with the PHA Plans and Related Regulations 12/99
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. 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.
10. 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.
11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
 12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.
 13. For PHA Plan that includes a PHDEP Plan as specified in 24 CFR 761.21: The PHDEP Plan is consistent with and conforms to the "Plan Requirements" and "Grantee Performance Requirements" as specified in 24 CFR 761.21 and 761.23 respectively and the PHA will maintain and have available for review or inspection (at all times), records or documentation of the following:
 - Baseline law enforcement services for public housing developments assisted under the PHDEP plan;
 - Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);
 - Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;
 - Coordination with other law enforcement efforts;
 - Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and
 - All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.
 14. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
 15. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
 16. 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.
 17. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
 18. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
 19. 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) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments.).
 20. 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. U.S. Department of Housing and Urban Development Office of Public and Indian Housing PHA Certifications of Compliance with the PHA Plans and Related Regulations
 21. 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 attachments 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.

Commissioner Blevins moved that the foregoing resolution be adopted and it was seconded by Commissioner Curry.

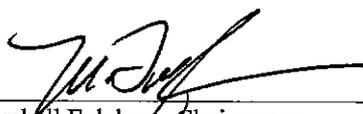
Upon hearing of the roll call, it was determined by the Chairperson to have received a majority of affirmative votes and was declared duly, adopted, this 15th day of January, 2009.

AYES

NAYS

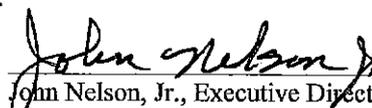
Chairperson
Commissioner
Commissioner
Commissioner Evans (absent)
Commissioner Spell (absent)

Fulghum
Allen
Blevins



Marshall Fulghum, Chairperson

I CERTIFY that the above resolution was duly passed at the meeting of this Authority held on the above stated date, appropriate Notice as required by the By-Laws of this Agency.



John Nelson, Jr., Executive Director/Secretary

SEAL:

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Palatka Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund

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 Federal agency 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.)

400 N. 15th Street, Palatka, FL 32177

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

John Nelson, Jr.

Title

Executive Director

Signature

X 

Date

02/03/2009

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

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Palatka Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund

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

John Nelson, Jr.

Title

Executive Director

Signature



Date (mm/dd/yyyy)

02/03/2009

DISCLOSURE OF LOBBYING ACTIVITIES

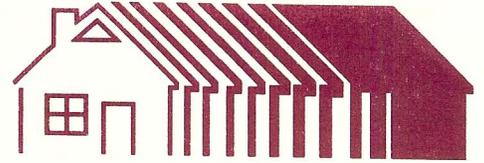
Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB
0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="" type="checkbox"/> b. a. contract b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. a. bid/offer/application b. initial award c. post-award	3. Report Type: <input type="checkbox"/> a. a. initial filing b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c	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 H.U.D.	7. Federal Program Name/Description: CFP CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): None	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: <u>John Nelson Jr</u> Print Name: <u>John Nelson, Jr.</u> Title: <u>Executive Director</u> Telephone No.: <u>(386) 329-0132</u> Date: <u>2/3/2009</u>	
Federal Use Only:	Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

*PALATKA
HOUSING
AUTHORITY*



Serving Palatka's Housing Needs Since 1962

December 1, 2008

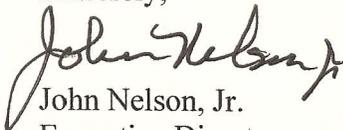
Lakesha Session
Chairperson, Resident Council
2300 Bronson St. C-116
Palatka, FL. 32177

Dear Ms. Session,

Enclosed please find a copy of the Palatka Housing Authority's FY 2009 Annual Plan. If the members of the Resident Council have no comments or recommended changes please sign the enclosed letter and return it to our office as soon as possible.

If you have any questions, please contact me at 329-0132.

Sincerely,



John Nelson, Jr.
Executive Director

Enclosures

January 15, 2009

Mr. John Nelson
Executive Director
Palatka Housing Authority
400 North 15th Street
Palatka, FL. 32178

Dear Mr. Nelson,

The Resident Council has reviewed the proposed Annual Plan for the Fiscal Year 2009 and has no comments or recommended changes.

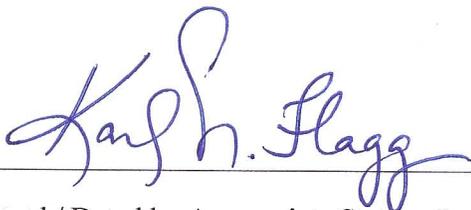
Sincerely,



Lakesha Session
Chairperson, Resident Council

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

I, *Karl N. Flagg* the *Mayor, City of Palatka* certify
that the Five Year and Annual PHA Plan of the *Palatka Housing Authority* is
consistent with the Consolidated Plan of *City of Palatka* prepared
pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

ATTACHMENT K

Violence Against Women and Justice Department Reauthorization Act, 2005

The Violence against Women Reauthorization Act of 2005 (VAWA) prohibits denial of admission to an otherwise qualified applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking. Specifically, Section 607(2) of VAWA adds the following provision to Section 6 of the U.S. Housing Act of 1937, which lists contract provisions and requirements for the public housing program: Every contract for contributions shall provide that . . . the public housing agency shall not deny admission to the project to any applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking if the applicant otherwise qualifies for assistance or admission, and that nothing in this section shall be construed to supersede any provision of any Federal, State, or local law that provides greater protection than this section for victims of domestic violence, dating violence, or stalking.

Definitions

As used in VAWA:

- The term *domestic violence* includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

- The term *dating violence* means violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim; and where the existence of such a relationship shall be determined based on a consideration of the following factors:
 - The length of the relationship
 - The type of relationship
 - The frequency of interaction between the persons involved in the relationship

- The term *stalking* means:
 - To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or
 - To place under surveillance with the intent to kill, injure, harass, or intimidate another person; and
 - In the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily

injury to, or to cause substantial emotional harm to (1) that person, (2) a member of the immediate family of that person, or (3) the spouse or intimate partner of that person.

- The term *immediate family member* means, with respect to a person –
 - A spouse, parent, brother or sister, or child of that person, or an individual to whom that person stands in the position or place of a parent; or
 - Any other person living in the household of that person and related to that person by blood and marriage.

Notification and Victim Documentation

PHA Policy

PHA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under PHA's policies. Therefore, if PHA makes a determination to deny admission to an applicant family on the basis of an unfavorable history, PHA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking

One of the following:

A police or court record documenting the actual or threatened abuse

A statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal hearing or must request an extension in writing at that time.

If the applicant so requests, PHA will grant an extension of 10 business days, and will postpone scheduling the applicant's informal hearing until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant PHA determines the family is eligible for assistance, no informal hearing will be scheduled and PHA will proceed with admission of the applicant family.

Perpetrator Removal or Documentation of Rehabilitation

PHA Policy

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, PHA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the public housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation.

This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

PHA Confidentiality Requirements

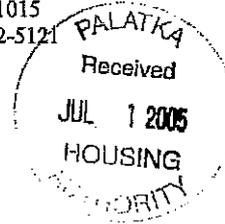
All information provided to PHA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared database nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law.

The Lee Conlee House, Inc. (LCH) is the local domestic violence center located in Palatka. LCH is the certified center for survivors of domestic violence in Putnam County. They provide crisis and post-crisis intervention services for battered women and their children. The Lee Conlee House provides individual counseling, support groups, emergency shelter, adult and child advocacy, legal referrals and court advocacy, 24-Hour crisis line, injunction assistance, assistance filing victim compensation claims including relocation assistance, and community education and trainings. The PHA/LCH has partnered to make known to domestic violence victims and their families of the availability of PHA/LCH services.



U. S. Department of Housing and Urban Development
Jacksonville Office, Region 4
Charles Bennett Federal Building
400 West Bay Street Suite 1015
Jacksonville, Florida 32202-5121

*Copy to Steve
HUD Correspondence File*



June 29, 2005

Mr. John Nelson Jr.,
Executive Director
Palatka Housing Authority
400 N 15th Street
Palatka, Florida 32177-3104

Dear Mr. Nelson:

Subject: Submission of the AMCC

We have received and reviewed the Housing Authority's AMCC submitted for CGP grant:

FL29P057-501-01 \$1,005,174.00

We have verified that the grant is ready for audit. As soon as possible please provide an audit completed by an independent auditor, which by their evaluation agrees to the amount disbursed in our Line of Credit Control System (LOCCS). When we receive the audit for this reporting period, this grant will be closed by HUD's Accounting Center.

For your records, we are including a copy of your form HUD-53001, "approved for audit."

If we can be of further assistance, please contact our Staff Engineer Engineer, Greg Cáceres, by email at gregorio_caceres@hud.gov or by phone at (904) 232-1777, extension. 2090.

Sincerely yours,

John G. Niesz
Director
Office of Public Housing

Enclosure

**Actual Comprehensive Grant
Cost Certificate**
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(Exp. 08/30/2005)

PHA/HA Name Palatka Housing Authority	Comprehensive Grant Number FL29P057501-01
	FFY of Grant Approval 2001

The PHA/HA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

A. Original Funds Approved	\$ 1,005,174.00
B. Revised Funds Approved	\$ 1,005,174.00
C. Funds Advanced	\$ 1,005,174.00
D. Funds Expended (Actual Modernization Cost)	\$ 1,005,174.00
E. Amount to be Recaptured (A-D)	\$ 0.00
F. Excess of Funds Advanced (C-D)	\$ 0.00

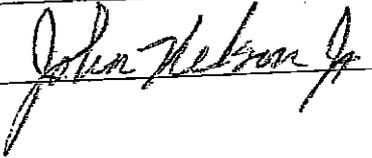
2. That all modernization work in connection with the Comprehensive Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

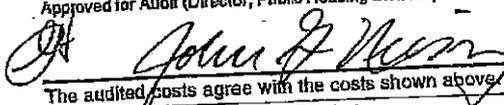
4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and

5. That the time in which such liens could be filed has expired.

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)

Signature 	Date 01/24/2005
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For HUD Use Only

The Cost Certificate is approved for audit. Approved for Audit (Director, Public Housing Division) 	Date 6-29-05
The audited costs agree with the costs shown above. Verified (Director, Public Housing Division)	Date
Approved (Field Office Manager)	Date



U. S. Department of Housing and Urban Development
Jacksonville Field Office
Charles Bennett Federal Building
400 West Bay Street
Suite 1015
Jacksonville, Florida 32202-4410

DEC 19 2006

Mr. John Nelson, Jr.
Executive Director
Palatka Housing Authority
400 North 15th Street
Palatka, Florida 32178-1277

Re: Capital Fund Program (CFP) FL29P05750103

Dear Mr. Nelson:

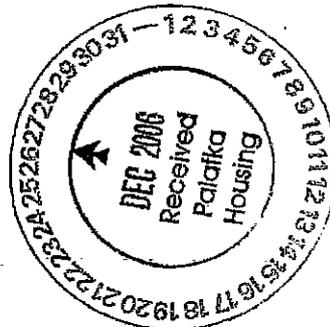
This letter will serve to transmit form HUD-52839, Actual Comprehensive Grant Cost Certificate, approved for audit. The Actual Comprehensive Grant Cost Certificate is applicable to the Capital Fund Program FL29P05750103. Please provide this document to your independent auditor for consideration in the audit.

Should you have any questions concerning this matter, please feel free to contact Mr. Robert Caravello of my staff at (904) 232-1777, extension 2081.

Sincerely,

John G. Niesz
Director
Office of Public Housing

Enclosure(s)



HUD's mission is to increase homeownership; support community development and increase access to affordable housing free from discrimination.

**Actual Comprehensive Grant
Cost Certificate**
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(Exp. 06/30/2005)

PHA/IHA Name <i>Palatka Housing Authority 400 N. 15th St. Palatka, FL 32177</i>	Comprehensive Grant Number <i>FL29P001501-03</i>
	FFY of Grant Approval <i>2003</i>

The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

A. Original Funds Approved	\$	<i>741,074</i>
B. Revised Funds Approved	\$	<i>741,074</i>
C. Funds Advanced	\$	<i>741,074</i>
D. Funds Expended (Actual Modernization Cost)	\$	<i>741,074</i>
E. Amount to be Recaptured (A-D)	\$	<i>-0-</i>
F. Excess of Funds Advanced (C-D)	\$	<i>-0-</i>

2. That all modernization work in connection with the Comprehensive Grant has been completed;
3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;
4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and
5. That the time in which such liens could be filed has expired.

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)

Signature <i>John Nelson Jr</i>	Date <i>Dec 6, 2006</i>
------------------------------------	----------------------------

For HUD Use Only

The Cost Certificate is approved for audit.

Approved for Audit (Director, Public Housing Division) <i>John J. [Signature]</i>	Date <i>12-19-06</i>
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The audited costs agree with the costs shown above.

Verified (Director, Public Housing Division)	Date
--	------

Approved (Field Office Manager)	Date
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**Actual Comprehensive Grant
Cost Certificate**
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(Exp. 11/30/2008)

PHA/IHA Name Palatka Housing Authority	Comprehensive Grant Number FL29P057501-06
	FFY of Grant Approval 2006

The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

A. Original Funds Approved	\$ 819,906.00
B. Revised Funds Approved	\$ 819,906.00
C. Funds Advanced	\$ 819,906.00
D. Funds Expended (Actual Modernization Cost)	\$ 819,906.00
E. Amount to be Recaptured (A-D)	\$ -0-
F. Excess of Funds Advanced (C-D)	\$ -0-

- That all modernization work in connection with the Comprehensive Grant has been completed;
- That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;
- That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and
- That the time in which such liens could be filed has expired.

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)

Signature 	John Nelson, Jr. Executive Director	Date 11/25/08
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For HUD Use Only

The Cost Certificate is approved for audit.

Approved for Audit (Director, Public Housing Division)	Date
--	------

The audited costs agree with the costs shown above.

Verified (Director, Public Housing Division)	Date
--	------

Approved (Field Office Manager)	Date
---------------------------------	------