

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: OTTUMWA HOUSING AUTHORITY PHA Code: IA004 PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 04/2009												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 359 Number of HCV units: 237												
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan Rev. 1 <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	PH	HCV						
PH	HCV												
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: <i>To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</i>												
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. <i>PHA Goals are to: Reduce public housing vacancies by continuing on-going efforts to maintain 100% occupancy with short waiting lists for Elderly Public Housing, Family Public Housing, and the Housing Choice Voucher Program. Adapt our efforts to meet all requirements necessary to be eligible for high performer status using the new guidelines for evaluating asset management of public housing properties. Maintain or increase the Housing Choice Voucher Program lease-up rate using all funds provided or fully utilizing the 237 units available. Continue to improve Public Housing security activities for Elderly Housing. Attract supportive services to increase independence for elderly families. (See Financial Resources for details of an OHA service agency) Undertake affirmative measures and fair housing activities in partnership with the Ottumwa Human Rights Commission and the Ottumwa Diversity Group, who both support systems of identifying interpreters.</i>												

6.0	PHA Plan Update IA004v02 was submitted to provide the revisions and updates due to the 2009 ARRA Capital Fund process. Attached with this submission is a revision to the original 2009 Annual Statement and 2009 – 2013 5-Year Plan plus budget revision # 1 to the 2008 CFP Annual Statement. (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <small>For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</small> Revisions made to Financial Resources, Rent Determination, Operation and Management, Safety and Crime Prevention. (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. The 5-Year and Annual PHA Plan can be obtained at the main administrative office of the PHA. The Resident Advisory Board members and the Resident Commissioner have participated reviewing the Plan as it was developed. Copies of the final draft are posted at all OHA site offices.
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6.0
(Cont'd)

PHA Plan Elements:

Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures:
Preference for family housing applicants who are local residents and employed.

Preference for victims of natural disasters will be clarified to include victims of house fires. (Working agreement with American Red Cross to verify disaster status.)

Applications for housing assistance are available at our main office, 935 West Main Street or by mail if requested for the Public Housing Elderly Hi-Rises and Family Site plus the Housing Choice Voucher Program. Applicant families must be income eligible and pass background screens for successful previous housing program participation and no serious criminal charges. The Ottumwa Housing Authority uses a first-come first-served model for processing applications with each applicant having one offer before re-applying. Applicants are processed when turnover in housing programs occurs. Preferences for families who are victims of natural disasters and fires are available for all Ottumwa Housing Authority housing programs offered. Minimum rent for all programs is \$ 25.

Waiting List for Elderly Hi-Rise Southoak Towers AMP #1 is site based for this property. Waiting List for Elderly Hi-Rise Camelot Towers AMP #2 and Westgate Towers AMP #2 both are separate site based waiting lists. Applicants over 62 or over 18 and disabled are processed first for Elderly Hi-Rises and then applicants who are near-elderly 50-61 are offered the opportunity of housing in the Elderly Hi-Rises.

Waiting List for Family Public Housing is for two and three bedroom units. Note: Updates above describe a new preference for working families using the Low Income Limit for determining income eligibility.

Waiting List for Housing Choice Voucher Program will be processed as lease up changes.

Financial Resources: OHA continues to explore opportunities to limit cost increases and opportunities for additional income. OHA is investigating the prospect of providing direct services to OHA Public Housing residents because the Ottumwa area has few service agencies that offer a complete package of elderly waiver activities to support frail elderly residents leased in the hi-rises. The most common method of service delivery is by individuals working as independent CDAC (Consumer Directed Attended Care) Providers. Public Housing rents and operating subsidy estimated to increase slightly. Housing Choice Voucher Program HAP funds could increase slightly due to improved lease-up rate in 2008.

Listed are the anticipated resources of funding for Ottumwa Housing Authority to operate during its fiscal year ending March 31, 2010. The Public Housing Programs consisting of 3 Asset Management Projects AMP will use the collected rents, other income and operating subsidy funds to operate each AMP, the Central Office Cost Center (COCC) and the Maintenance Cost Center. Non Federal activity that could generate resources would be a new OHA service program to assist frail elderly residents with their support needs. The OHA service program would be an activity of the COCC.

Public Housing 3 AMPs

Rents	\$ 945,400
Other Income	32,000
Operating Subsidy	\$ 496,400
CFP 2008 & 2009	\$ 455,000

The Ottumwa Housing Authority Housing Choice Program will continue to use Housing Choice Voucher HAP in its efforts to fully use all of the 237 contracted unit each month. Admin. Fees will be used by the Central Office Cost Center to administer the Housing Choice Voucher Program.

HAP funds (carried over)	\$ 40,000
HAP funds	\$ 690,300
Admin. Fees	\$ 120,550

6.0
(Cont'd)

Rent Determination: No changes for 2009 for Elderly Public Housing and Housing Choice Voucher Programs.

Family Public Housing recommendation to increase the ceiling rents/flat rents by \$25 per unit. Based on 2009 New Income Limits, Family Public Housing recommendation to increase income limits to Low Income Limits. Purpose of adjustment is to seek a new market for Family Public Housing units that are difficult to maintain 100% lease-up due to short waiting list and competition from Housing Choice Voucher Program.

Ottumwa Housing Authority utilizes an Income Based Rent Policy based on the higher of 30% of adjusted monthly rent or a minimum rent of \$ 25 for all of its housing programs both for Public Housing apartments units rented or Housing Choice Voucher Programs units leased by participants. If a household pays minimum rent and has a medical hardship they may apply for an exemption to the \$ 25 rent.

Maximum or Flat Rents are identified for all Ottumwa Housing Authority Public Housing units. Flat Rents are set at a level to be as market equivalent as possible without pricing the unit too high as to create vacancies.

The Housing Choice Voucher Programs also use the calculation method of higher of 30% of adjusted monthly rent or a minimum rent of \$ 25 with the Payment Standards being set at 100% of the Wapello County Fair Market Rents to allow the HCV Program to service as many families as the funding received will allow.

Operation and Management: Disposition of Obsolete Equipment will be reviewed annually. Charge Schedule was updated for current costs.

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Grievance Procedures: No changes for 2009.

The Ottumwa Housing Authority grievance, informal hearing and review procedures were developed with the concept to create opportunities so residents and participants could continue to receive housing assistance. All steps of the process an applicant must complete to become eligible to receive housing has the opportunity for an informal hearing with Ottumwa Housing Authority staff to provide additional information. If an applicant disagrees with the results of the informal hearing they may use the Grievance Procedure to have a hearing with the Ottumwa Housing Authority Hearing Officer. Public Housing residents in violation of their Dwelling Lease are served a 14/30 day notice allowing them two weeks to correct the breach of the Dwelling Lease. If a resident feels the notice was incorrect they have the opportunity to use the Grievance Procedure to appeal. The Ottumwa Housing Authority Housing Choice Voucher Program offers its participants the opportunity to request an informal hearing to provide additional information and if the participant disagrees with the outcome of the informal hearing they can request the use of the Grievance Procedure to appeal any action of terminating their voucher and housing assistance.

6.0
(Cont'd)

Designated Housing for Elderly and Disabled Families: No changes for 2009.

The Ottumwa Housing Authority continues to research the opportunity to convert Southoak Towers AMP #1 with 103 units to elderly only housing. At this time no application has been submitted to the HUD SAC Special Applications Center, but its staff has been helpful in assisting the Ottumwa Housing Authority with information on how to apply for the "elderly only designation" for Southoak Towers. The current situation of a high vacancy rate at the other AMP #2 Camelot Towers and Westgate Towers offers choices for all applicants.

Community Service and Self-Sufficiency: No changes for 2009.

The Ottumwa Housing Authority Public Housing Programs requires that households not meeting the Community Service exemptions participate in a community service activity. The Ottumwa Housing Authority maintains a list of agencies that offer community service opportunities. The Ottumwa Housing Authority provides forms to assist both the agency and our resident the tools to track and report their community service hours. The Ottumwa Housing Authority is a partner in the Iowa Workforce Development Center's Promise Jobs Program (TNAF work requirement agency) by participating on its advisory group and offering Promise Jobs participants work opportunities at Ottumwa Housing Authority work sites. When reporting new employment Ottumwa Housing Authority staff researches the family work history and if applicable assists them in receiving the MEID Mandatory Earned Income Disallowance calculation.

Safety and Crime Prevention: Safety Policy is under review and will be updated in 2009. Crime Prevention and Screening Procedures were updated in 2007.

The Ottumwa Housing Authority plan for safety of its residents includes numerous activities. The Ottumwa Housing Authority has partnered with the Ottumwa Police Department since 1995 when we applied for a Community Oriented Policing COPS grant and were successful. The Ottumwa Housing Authority continues to pay for this position by using CFP management improvements funds. Prior to the COPS grant the Ottumwa Housing Authority experienced many incidences of drug related criminal activity occurring at our properties. A note worthy example is a resident had stored a parts of a methamphetamine lab under a child's bed. The materials were hazardous and were removed by a team of specialists from the Iowa Department of Criminal Investigation. The Ottumwa Housing Authority Liaison Officer activities include prevention by being the go between with all law enforcement agencies for completing back ground checks for criminal history. The Ottumwa Housing Authority Liaison Officer conducts a neighborhood watch program at hi-rises monthly. The Ottumwa Housing Authority Liaison Officer has daily contact with the residents at our family sites and has activities for all ages. One positive example is the annual Halloween safety contacts that are made door to door at our family sites. The partnership with the Ottumwa Police Department has resulted in Ottumwa Housing Authority staff being trained by the Police on recognizing drug related materials. All new Ottumwa Police Officers are given a tour of the Ottumwa Housing Authority as part of their introduction to the job.

Pets: No changes for 2009.

The Ottumwa Housing Authority has a policy in regard to the ownership of pets for its public housing properties.

6.0 (Cont'd)	<p>Civil Rights Certification: No changes for 2009. The Ottumwa Housing Authority regularly reviews its compliance with the Civil Rights and AFFH Certification by reviewing its policies, providing staff training on Fair Housing, maintaining up to date signage at all of its offices. The Ottumwa Housing Authority works with the city of Ottumwa Human Rights Commission and the local Legal Aid office to make referrals when contacted about a case of discrimination. The Ottumwa Housing Authority has its annual plan reviewed for consistency with the State of Iowa Consolidated Plan which has the city of Ottumwa in its jurisdiction.</p> <p>Fiscal Year Audit: The Fiscal Audit for FYE 3/31/2008 had no findings and was submitted to HUD. The Ottumwa Housing Authority's most recent audit completed for the fiscal ending March 31, 2008 had no findings.</p> <p>Asset Management: Continue to improve our methods of doing AMP Based Accounting and maintain assessment of AMP properties to discover ways to lengthen viability for the long-term. The Ottumwa Housing Authority is in the first year of the Asset Management process. Methods to allocate costs between the three AMPs are being developed and refined. The Ottumwa Housing Authority will have a Central Office Cost Center for Administrative Management and a Maintenance Cost Center for providing property maintenance services to all three of its AMPs. Annually the Ottumwa Housing Authority has updated its five year plan for meeting all modernization needs which has included staff identifying any projects that can be done without using Capital Funds with its own resources. Currently major infrastructure work is being done to the plumbing at Southoak and was done to Westgate. Plans to maintain, update and modernize public housing will be updated annually. Work will proceed as funds become available.</p> <p>Violence Against Women Act (VAWA) No changes for 2009. Latest policy adopted December 19, 2007. The Ottumwa Housing Authority worked with the Ottumwa Women's' Crisis Center and Ottumwa Police Department Liaison Officer when developing the policy in 2007. Referrals to the Ottumwa Women's Crisis Center and Southern Iowa Mental Health Center are made by Ottumwa Housing Authority staff when necessary.</p>
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7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> Not applicable for Ottumwa Housing Authority</p>
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8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. The form HUD 50075.1 for 2009 Annual Statement Rev. 1 includes new and moved forward work items identified as energy savings activities. The form HUD 50075.2 for 5 Year Plan was extensively revised, adding new work items to replace work items moved to the 2009 Annual Statement, Revision 1 of the 2008 Annual Statement and developed the 2009 ARRA Annual Statement. The changes significantly altered the 5-year plan which was reviewed by the Resident Advisory board and OHA Board of Commissioners. Year 1 of this updated 4-Year Plan for 2009 includes the following work items to modernize for both long-term physical and social viability of the AMP's. \$40,000 for Operations to assist the AMP's general fund to maintain the property. \$61,400 for Management Improvements to continue the COPS Program by contracting for a Liaison Officer with the Ottumwa Police Department. 10% or \$47,540 for Administration. \$13,000 for Fees and Costs to obtain Engineering services for Phase 2 of the Southoak Towers AMP #1 Plumbing Improvements. \$203,000 for Dwelling Structures will be used at Southoak Towers AMP # 1 to fund the Plumbing Improvement Phase 2. \$80,000 for Dwelling Equipment-Nonexpendable to replace refrigerators at Camelot and Westgate Towers AMP # 2. \$30,462 for Non-Dwelling Equipment will replace Small Tools and Computer Hardware at all three AMP's. Also, the Maintenance Vehicle for AMP # 3 will be replaced. See HUD 50075.2 for adjustments to the 5-Year Plan, no significant additional new projects were added due to on-going Plumbing Improvements where domestic hot and cold water supply lines and sewer lines were replaced to modernize Westgate in 2008 and Southoak Phase 1 in 2009 and Phase 2 in 2010.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. See Attachment HUD 50075.1 for 2009 Annual Statement Rev. 1, 2008 Performance and Evaluation Report Rev. 1, 2007 Performance and Evaluation Report</p>

8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Attachment HUD 50075.2 for 5 Year Plan Rev. 1</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. Not applicable for Ottumwa Housing Authority</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. Ottumwa Housing Authority has adequate opportunities for elderly public housing serving seniors and disabled families. 2008 waiting lists length of wait has decreased. Leasing of efficiency units continues to be a challenge. Based on November and December 2008 waiting lists, OHA offers adequate opportunities for elderly housing. Public housing family sites have short waiting lists for three bedrooms which do not allow us to maintain full occupancy and adequate waiting lists for two bedrooms due to excess capacity have identified working families with incomes below the Low Income Limit. (See PHA Plan Elements Financial Resources and Rent Determination for above for additional information.) The Housing Choice Voucher Program has also decreased the length of wait on the 2008 waiting list carry-over funds have allowed more families to receive assistance this past year.</p>

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Ottumwa Housing Authority strategy is to continue marketing all programs to obtain full utilization of all housing opportunities available. For elderly public housing, any homeless applicant willing to accept an efficiency unit can be housed quickly. For family public housing, we hope to improve lease-up for three bedrooms with applicants from our newly identified preference group. The Housing Choice Voucher Program strategy will be to work with current and new landlords to maintain an adequate pool of landlords keeping the program fully leased.</p>
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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. The Ottumwa Housing Authority family site preference should support OHA staff efforts to maintain full lease-up housing families in three bedroom units.</p> <p>The Ottumwa Housing Authority continues its efforts to provide high quality, affordable housing promoting a positive living environment at all of our properties. Ottumwa Housing Authority staff acts in a professional manner to provide residents, participants, and applicant’s opportunities including support to maintain independent living and to access community services from cooperating service agencies.</p> <p>The Ottumwa Housing Authority works with its resident advisory board every month to include their concerns as the staff works to maintain its high performing scores in PHAS replacement and SEMAP. The addition of security services was identified by residents and staff as a need that continues to provide a safe housing environment. Hopefully, finances will allow security services to be expanded where needed.</p> <p>The Ottumwa Housing Authority works to insure that all community agencies are prepared to refer their clients. The Ottumwa Housing Authority works with the New Iowan Center, Wapello Human County Human Resources Diversity Committee, the Ottumwa Human Rights Commission, and the Indian Hills Community College Adult Basic Education English as a Second Language Program to reach minority groups within our community.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>The Ottumwa Housing Authority will meet with its Residents Advisory Board for input to policy and procedure changes. The Board of Commissioners will approve policy and procedure changes to the Annual Plan. Capital Fund Budgets will be revised as needed with Residents Advisory Board meeting to review the proposed changes. Capital Fund Budgets will be adjusted with emergency needs and identified work items from the OHA 5-Year Plan with Board of Commissioners approval.</p>
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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.

Find the following original documents executed and scanned:

- (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*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet*

(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan.

**Find the following original documents executed and scanned:
Resident Advisory Board (RAB) comments**

PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

The Ottumwa Housing Authority received comments from three Resident Advisory Groups that provide representatives to the Resident Advisory Board. Their comments support the Ottumwa Housing Authority's 5-Year Plan for meeting the needs of modernization activity. Their concerns included the need for additional funds to make possible the identified work items in the 2009 Capital Fund Annual Plan. Westgate Towers and Southoak Towers indicated support for the on-going infrastructure improvements to the plumbing systems. Westgate Tower group supports the 2009 Capital Fund Annual Plan work item for replacing refrigerators. The Resident Advisory Board meets monthly and continues to provide recommendations on the operations of the Ottumwa Housing Authority.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number		Locality (City/County & State)			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2009 Rev. 1	
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	267845	292850	312845	292845
C.	Management Improvements		58615	58610	58615	58615
D.	PHA-Wide Non-dwelling Structures and Equipment		51402	26402	6402	26402
E.	Administration		47540	47540	47540	47540
F.	Other					
G.	Operations		50000	50000	50000	50000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		475402	475402	475402	475402
L.	Total Non-CFP Funds					
M.	Grand Total					

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2009</u>	Work Statement for Year <u>4</u> FFY 2012			Work Statement for Year: <u>5</u> 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	IA 004-000001 Southoak			IA 004-000001 Southoak		
Annual	<i>Replace Pole Yard Lights</i>		20000	<i>Base Cove Molding in apartments</i>		15450
Statement				IA 004-000002 Camelot & Westgate		
	IA 004-000002 Camelot & Westgate			<i>Replace Stove at Camelot</i>		34650
	<i>Replace Camelot Roof</i>		90000	<i>Base Cove Molding in hallways/lobbies</i>		28950
	<i>Replace Camelot Fire Alarm</i>		85000	<i>Rewire Fire Alarm (Westgate)</i>		20000
				<i>Floor Tile Camelot</i>		23000
	IA 004-000003 Family Sites			<i>Base Cove Molding in apartments</i>		58800
	<i>Replace Roofs</i>		67845	IA 004-000003 Family Sites		
	<i>Replace Stoves</i>		30000	<i>Dryer Vent System in 3 Bedroom units</i>		17500
	<i>Maintenance Garage Addition</i>		20000	<i>Meter sockets/ Main Breaker replaced</i>		46495
				<i>Rewire Cable TV</i>		24000
				<i>Stair Railing in 3 Bedroom units</i>		24000
	IA 004 Wide			IA 004 Wide		
	<i>Small Tools</i>		6402	<i>Riding Lawnmower</i>		20000
				<i>Small Tools</i>		6402
	Subtotal of Estimated Cost		\$ 319,247.00	Subtotal of Estimated Cost		\$ 319,247.00

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name
Ottumwa Housing Authority

Program/Activity Receiving Federal Grant Funding

PHA Plans 5 Year Plan for Fiscal Years 2009-2013 Annual Plan for Fiscal Year 2009

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.)

Camelot Towers, 827 Albia Road, Wapello, Ottumwa, IA 52501

Southoak Towers, 102 West Finley, Wapello, Ottumwa, IA 52501

Westgate Towers, 910 West Second, Wapello, Ottumwa, IA 52501

935 West Main Street, Ottumwa, IA 52501

1102-1120 Elm Court, Wapello, Ottumwa, IA 52501

223-229 Fairview, Wapello, Ottumwa, IA 52501

02-12 Hedrick Heights, Wapello, Ottumwa, IA 52501

1105-1115 Jay, Wapello, Ottumwa, IA 52501

808-814 North Fellows, Wapello, Ottumwa, IA 52501

103-149 Taft Circle, Wapello, Ottumwa, IA 52501

125-127 Taft Ave, Wapello, Ottumwa, IA 52501

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

Daniel V. Stroda

Title

Executive Director

Signature

Daniel V. Stroda

Date

1/7/2009

X

Certification of Payments to Influence Federal Transactions

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

Applicant Name

OTTUMWA HOUSING AUTHORITY

Program/Activity Receiving Federal Grant Funding

PHA PLANS 5 YEAR PLAN FOR FY 2009-2013 ANNUAL PLAN FOR FY 2009

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

Daniel V. Stroda

Title

Executive Director

Signature



Date (mm/dd/yyyy)

1/7/2009

Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: _____ FFY of Grant Approval: _____	
Type of Grant					
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
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 Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)				
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				

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

Part I: Summary				
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____		FFY of Grant: _____ FFY of Grant Approval: _____
Type of Grant				
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: _____)
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director		Date		Signature of Public Housing Director Date

Part I: Summary

PHA Name: OTTUMWA HOUSING AUTHORITY	
Grant Type and Number Capital Fund Program Grant No: IA05P00450107	Replacement Housing Factor Grant No: _____
FFY of Grant: 2007	FFY of Grant Approval: 2007

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

Line	Summary by Development Account 12/31/2008	Total Estimated Cost	Total Actual Cost ¹
1	Total non-CFP Funds	Rev. 1 3/18/2008	12/31/2008
2	1406 Operations (may not exceed 20% of line 21) ²	0.00	0.00
3	1408 Management Improvements	59,300.00	55,824.70
4	1410 Administration (may not exceed 10% of line 21)	45,590.00	45,590.00
5	1411 Audit		27,007.04
6	1415 Liquidated Damages		
7	1430 Fees and Costs	49,090.00	49,090.00
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures	294,160.00	293,981.57
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment	7,816.00	11,469.73
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities ⁴		
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)	455,956.00	454,627.00
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	59,300.00	55,824.70
24	Amount of line 20 Related to Security – Hard Costs		
25	Amount of line 20 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 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
 Expires 4/30/2011

Part I: Summary	
PHA Name: OTTUMWA HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: IA05P004450107 Replacement Housing Factor Grant No:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Final Performance and Evaluation Report	<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account 12/31/2008 Original Revised ² Obligated Total Actual Cost ¹ Total Estimated Cost Expended Date
Signature of Executive Director <i>[Signature]</i> Date 1/7/2009	Signature of Public Housing Director Date

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: OTTUMWA HOUSING AUTHORITY Page 1 of 1

8. Federal Action Number:

IA05P00450108	Capital Fund Program	FFY 2008	Open Capital Fund
IA05P00450107	Capital Fund Program	FFY 2007	Open Capital Fund

Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: _____ FFY of Grant Approval: _____	
Type of Grant					
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
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 Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)				
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				

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

Part I: Summary				
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____		FFY of Grant: _____ FFY of Grant Approval: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director		Date	Signature of Public Housing Director	Date

Part I: Summary

PHA Name: OTTUMWA HOUSING AUTHORITY
 Grant Type and Number: Capital Fund Program Grant No: IA05P00450108
 Replacement Housing Factor Grant No: _____
 Date of CFFP: _____
 FFY of Grant: 2008
 FFY of Grant Approval: 2008

Type of Grant: Performance and Evaluation Report for Period Ending: 12/31/2008
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Final Performance and Evaluation Report

Line	Summary by Development Account	12/31/2008	Total Estimated Cost	Original	Revised ²	Obligated	Expended	Total Actual Cost ¹
1	Total non-CFF Funds	0.00	0.00	105,118.17	0.00	0.00	12/31/2008	12/31/2008
2	1406 Operations (may not exceed 20% of line 21) ²	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3	1408 Management Improvements	55,284.70	55,284.70	0.00	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	47,540.00	47,540.00	0.00	0.00	47,540.00	16,916.34	16,916.34
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							
9	1450 Site Improvement							
10	1460 Dwelling Structures	366,000.00	366,000.00	105,118.17	0.00	0.00	0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable							
12	1470 Non-dwelling Structures							
13	1475 Non-dwelling Equipment	6,037.30	6,037.30	1,326.00	1,326.00	1,326.00	1,326.00	1,326.00
14	1485 Demolition							
15	1492 Moving to Work Demonstration							
16	1495.1 Relocation Costs							
17	1499 Development Activities ³							
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)	475,402.00	475,402.00	153,984.17	153,984.17	153,984.17	18,242.34	18,242.34
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	55,824.70	55,824.70	55,824.70	55,824.70	55,824.70	55,824.70	55,824.70
24	Amount of line 20 Related to Security – Hard Costs							
25	Amount of line 20 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 PHAs with under 250 units in management may use 100% of CFFP Grants for operations.
⁴ RHF funds shall be included here.

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

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

Part I: Summary	
PHA Name: OTTUMWA HOUSING AUTHORITY	Grant Type and Number: Capital Fund Program Grant No: 1A05P00450108 Replacement Housing Factor Grant No: _____ Date of CFFP: _____
Type of Grant: <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Summary by Development Account	FFY of Grant: 2008 FFY of Grant Approval: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Summary by Development Account Line Total Estimated Cost Total Actual Cost Original Revised Obligated Expended Date 12/31/2008 Date 1/7/2009	Signature of Executive Director: <i>[Signature]</i> Date 1/7/2009 Signature of Public Housing Director: _____ Date 1/7/2009

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: OTTUMWA HOUSING AUTHORITY		Federal FY of Grant: 2008	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date) 06/30/2010	All Funds Expended (Quarter Ending Date) 06/30/2012	Reasons for Revised Target Dates ¹
Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date
IA004-000001	06/13/2010	06/13/2012	open
SOUTHOK			
IA004-000002	06/13/2010	06/13/2012	open
WESTGATE & CAMELOT			
IA004-000003	06/13/2010	06/13/2012	open
FAMILY			
NON-DWELLING EQUIPMENT			
06/13/2010	06/13/2010	06/13/2012	open
HA WIDE	06/13/2010	06/13/2012	open

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.

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 X 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 4-1-09, 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.

OTTUMWA HOUSING AUTHORITY

PHA Name

IA 004

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 09 - 20 13

Annual PHA Plan for Fiscal Years 20 09 - 20

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
Signature 	Chairman, Board of Commissioners Date 1-7-2009

Stratgate Towers
December 16, 2008

As representatives of Stratgate Towers, I want to thank the Ottawa Housing Authority for the improvements to our homes during the past year. The new plumbing is greatly appreciated. The steady supply of really hot water is great. We thank maintenance for the new paint job on the circle drive. The and the flowers have made the entrance more welcoming.

We also thank the maintenance staff for the cleanliness of our foyer, elevators and hallways.

The OHA staff are always ready to assist us when we need help.

The addition of new refrigerators in the kitchen would be a welcome upgrade. We hope this can happen soon. Other residents have

expressed to their thanks for the continued attention of OHA to giving us a secure place to live.

Chela Randolph
Emma Davis
Virginia Nipp
Justin Carder

We, as representatives of Southcoke Towers wish to thank the
Ottumwa Housing Authority, which includes the Director and his hard
working staff which is the hub of a great organization. We are
grateful for all they have done for us over the past years with some great
improvements. We are grateful for the Director of Operations and his
maintenance staff for the work that do to keep our building operating
properly and for the upkeep of the grounds. We are looking forward to
the next major project of the replacing of the water and sewer systems at
Southcoke Towers. We ask that the Ottumwa Housing Authority
be fully funded for this project and that the Board of Commissioners
will grant approval for sufficient funds needed to complete
this project. We are also thankful to hear that the residents
of Westgate Towers are well pleased with the plumbing improvements.
One day we at Southcoke Towers will be able to say the same.

Roman C. Iwanowski	President
Colleen Allen	Vice President
Marguerite Hocke-Smith	Secretary Mrs. Tom
James Thomas	Secretary Elect
Yvonne Olson	Treasurer

To whom it may concern,
We as representatives at Camelot Towers residents are grateful and very appreciative of all the grateful things Ottumwa Housing Authority has provided for us in the past and in the future. We would like a plug in on the first light pole. We also like the new Cabinet doors. Again we are grateful for the excellent maintenance provided for us by the Ottumwa Housing Authority and the friendliness and prompt actions of Ottumwa Housing Authority Staff.

Sincerely

Janet Yeoman President

Janice Mason Vice President

Ethel Orna Treasurer

Emmie Graham Secretary

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0048

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: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> 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:		5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:	
6. Federal Department/Agency: Congressional District, if known: 4c		7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known: IA05P00450109		9. Award Amount, if known: \$ _____	
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 this 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:  Print Name: Daniel V. Stroda Title: Executive Director Telephone No.: 641-682-8369 Date: 1/7/2009	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	