

PHA 5-Year and Annual Plan

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

OMB No. 2577-0226
Expires 4/30/2011

1.0	PHA Information PHA Name: <u>Waukegan Housing Authority</u> PHA Code: <u>IL 026</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2009</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>449</u> Number of HCV units: <u>792</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
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: N/A				
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. N/A				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <u>None</u> (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. Plan is available for public inspection at the main Administrative Office of WHA.				
7.0	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> N/A				
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. 2009 Annual Plan; 2008 Performance and Evaluation Report; 2007 Performance and Evaluation Report; 2006 Performance and Evaluation Report,				
8.2	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. 2010-2013 Five-Year Action Plan included in this agency annual plan is the 2009 CFP stimulus grant				
8.3	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.				
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)				

9.0 Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income <= 30% of AMI	197	5	5	5	3	3	2
Income >30% but <=50% of AMI	213	5	5	5	3	3	2
Income >50% but <80% of AMI	152	4	4	3	3	3	2
Elderly	62	5	4	3	3	3	4
Families with Disabilities	45	5	5	4	5	3	4
Race/ethnicity Black	410	5	5	5	3	3	2
Race/ethnicity Hispanic	107	5	5	5	3	3	2
Race/ethnicity White	45	5	5	5	3	3	2

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year: 2004
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset 1991
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

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/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	393		47
Extremely low income <=30% AMI	380	97	
Very low income (>30% but <=50% AMI)	11	2.8	

Housing Needs of Families on the Waiting List			
Low income (>50% but <80% AMI)	2	.2	
Families with children	258	66	
Elderly families	13	3	
Families with Disabilities	9	2	
Race/ethnicity Black	276	70	
Race/ethnicity Hispanic	92	23	
Race/ethnicity White	25	7	
Race/ethnicity Asian	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
1 BR	102	26	12
2 BR	135	34.4	16
3 BR	116	29.5	14
4 BR	38	9.7	4
5 BR	1	0.2	1
5+ BR	1	0.2	-
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 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/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	1128		96
Extremely low income <=30% AMI	1094	97	
Very low income (>30% but <=50% AMI)	34	3	
Low income (>50% but <80% AMI)	0	-	
Families with children	1015	90	
Elderly families	135	12	
Families with Disabilities	203	18	
Race/ethnicity White	959	85	
Race/ethnicity Black	79	7	
Race/ethnicity Asian	90	8	
Race/ethnicity Hispanic			
Characteristics by Bedroom Size (Public Housing Only)			
1 BR			
2 BR			
3 BR			

Housing Needs of Families on the Waiting List			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			
If yes:			
HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? 4			
Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" 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			

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> <p>C. Strategy for Addressing Needs</p> <p>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, and the Agency's reasons for choosing this strategy.</p>
	<p>(1) Strategies</p> <p>Need: Shortage of affordable housing for all eligible populations</p>
	<p>Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:</p> <p>Select all that apply</p>
	<p><input checked="" type="checkbox"/> Employ effective maintenance and management policies to minimize the number of public housing units off-line</p> <p><input checked="" type="checkbox"/> Reduce turnover time for vacated public housing units</p> <p><input checked="" type="checkbox"/> Reduce time to renovate public housing units</p> <p><input type="checkbox"/> Seek replacement of public housing units lost to the inventory through mixed finance development</p> <p><input type="checkbox"/> Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources</p> <p><input type="checkbox"/> Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction</p> <p><input type="checkbox"/> Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required</p> <p><input checked="" type="checkbox"/> Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration</p> <p><input checked="" type="checkbox"/> Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program</p> <p><input type="checkbox"/> Participate in the Consolidated Plan development process to ensure coordination with broader community strategies</p> <p><input type="checkbox"/> Other (list below)</p>
	<p>Strategy 2: Increase the number of affordable housing units by:</p> <p>Select all that apply</p>
	<p><input checked="" type="checkbox"/> Apply for additional section 8 units should they become available</p> <p><input checked="" type="checkbox"/> Leverage affordable housing resources in the community through the creation of mixed - finance housing assistance.</p> <p><input checked="" type="checkbox"/> Pursue housing resources other than public housing or Section 8 tenant-based assistance.</p> <p><input type="checkbox"/> Other: (list below)</p>
	<p>Need: Specific Family Types: Families at or below 30% of median</p>
	<p>Strategy 1: Target available assistance to families at or below 30 % of AMI</p> <p>Select all that apply</p>
	<p><input type="checkbox"/> Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing</p> <p><input type="checkbox"/> Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8</p>

- assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints

	<input checked="" type="checkbox"/> Limited availability of sites for assisted housing <input type="checkbox"/> Extent to which particular housing needs are met by other organizations in the community <input type="checkbox"/> Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA <input checked="" type="checkbox"/> Influence of the housing market on PHA programs <input type="checkbox"/> Community priorities regarding housing assistance <input checked="" type="checkbox"/> Results of consultation with local or state government <input checked="" type="checkbox"/> Results of consultation with residents and the Resident Advisory Board <input type="checkbox"/> Results of consultation with advocacy groups <input type="checkbox"/> Other: (list below)
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).</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>The PHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of Capital funds and the proper application of our public housing policies.</p> <p>We are continuing to address public housing vacancies very aggressively and our PHAS scores indicate that other operational issues are being positively addressed.</p> <p>The PHA has responded to both 2008 Financial Audit findings and has notified HUD of these efforts (see attachment Schedule of Findings and Questioned Costs Current Audit Findings)</p> <p>Capital funds have been utilized to provide modernization of our property and our FY 2009 application will continue that effort.</p> <p>PHA has implemented local preferences to improve the living environment in addition to our modernization efforts</p> <p>The implementation of a family pet policy has provided the opportunity for residents to enjoy pets within a regulated environment. In addition, PHA re-implemented a Community Service program beginning February 21, 2003, and has been discussed with residents and each adult member of every household.</p> <p>We are confident that the PHA will be able to continue to meet and accommodate all our goals and objectives for FY 2009.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>A. Substantial Deviation from the 5-year Plan:</p> <p>The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and • any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. <p>B. Significant Amendment or Modification to the Annual Plan:</p> <p>The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> • changes to rent or admissions policies or organization of the waiting list; • additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and • any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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11.0 (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.

The PHA did not receive any comments on the PHA Plan from the Resident Advisory Board/s.

11.0 (g) Challenged Elements

There were no elements within the PHA annual plan that were challenged by residents, staff, Board of Commissioners or the general public.

CARBON MONOXIDE DETECTORS STATEMENT

The Waukegan Housing Authority has installed carbon monoxide detectors in all of its public housing units as prescribed by State and Local codes.

See attached Violence Against Women Act (VAWA) Policy

Attachment:

Violence Against Women Act (VAWA) Policy

Title VI of the VAWA adds a new housing provision that establishes several categories of protected individuals. Under the law victims of domestic violence, dating violence, sexual assault, and stalking are granted protections and cannot be denied or terminated from housing or housing assistance because of activity that is directly related to domestic violence. 2005 VAWA Pub. L. 109-162; Stat. 2960 signed into law on January 5, 2006 and codified at 42 U.S.C. §1437d(l) and 1435f(d), (0) & 1 and (u)

1.0 Purpose

The purpose of this Policy is to reduce domestic violence, dating violence, and stalking and to prevent homelessness by:

- (a) protecting the safety of victims;
- (b) creating long-term housing solutions for victims;
- (c) building collaborations among victim service providers; and
- (d) assisting WHA to respond appropriately to the violence while maintaining a safe environment for WHA, employees, tenants, applicants, Section 8 participants, program participants and others.

The policy will assist the Waukegan Housing Authority (WHA) in providing rights under the Violence Against Women Act to its applicants, public housing residents, Section 8 participants and other program participants.

This Policy is incorporated into WHA's "Admission and Continued Occupancy Policy" and "Section 8 Administration Plan" and applies to all WHA housing programs.

2.0 Definitions

The definitions in this Section apply only to this Policy.

- 2.1 **Confidentiality:** Means that WHA will not enter information provided to WHA by a victim alleging domestic violence into a shared database or provide this information to any related entity except as stated in 3.4
- 2.2 **Dating Violence:** Violence committed by a person (a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (b) where the existence of such relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; (iii) the frequency of interaction between the persons involved in the relationship. 42 U.S.C. §1437d (u)(3)(A), § 13925.

- 2.3 Domestic Violence:** Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, committed by a person with whom the victim shares a child in common, committed by a person who is cohabitating with or has cohabitated with the victim as a spouse, committed by a person similarly situated to a spouse of the victim under the domestic or family violence laws of Illinois, or committed 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 Illinois. 42 U.S.C. §1437d(u)(3)(B), § 13925.
- 2.4 Immediate Family Member:** A spouse, parent, brother or sister, or child of a victim or an individual to whom the victim stands *in loco parentis*; or any other person living in the household of the victim and related to the victim by blood or marriage. 42 U.S.C. § 1437d(u)(3)(D), § 13925.
- 2.5 Perpetrator:** A person who commits an act of domestic violence, dating domestic violence or stalking against a victim.
- 2.6 Stalking:** (a) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate the victim; (b) to place under surveillance with the intent to kill, injure, harass or intimidate the victim; (c) in the course of, or as a result of such following, pursuit, surveillance, or repeatedly committed acts, to place the victim in reasonable fear of the death of, or serious bodily injury to the victim; or (d) to cause substantial emotional harm to the victim, a member of the immediate family of the victim or the spouse or intimate partner of the victim. 42 U.S.C. §1437d(u)(3)(C), § 13925.
- 2.7 Bona Fide Claim:** A *bonafide* claim of domestic violence, dating violence or stalking must include incidents that meet the terms and conditions in the above definitions.
- 2.8 Victim:** Is a person who is the victim of domestic violence, dating violence, or stalking under this Policy and who has timely and completely completed the certification under 3.2 and 3.3 or as requested by WHA.

3.0 Certification and Confidentiality

3.1 Failure to Provide Certification Under 3.2 and 3.3

The person claiming protection under VAWA shall provide complete and accurate certifications to WHA, owner or manager within 14 business days after the party requests in writing that the person completes the certifications. If the person does not provide a complete and accurate certification within the 14 business days, WHA, owner or manager may take action to deny or terminate participation or tenancy. 42 U.S.C. §14371 (5) & (6); 42 U.S.C. § 1437F(c)(9); 42 U.S.C. §1437f(d)(l)(B)(ii)&(iii); 42 U.S.C. §1437f(o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20) or for other good cause.

3.2 HUD Approved Certification

For each incident that a person is claiming as abuse, the person shall certify to WHA, owner or manager their victim status by completing a HUD approved certification form. The person shall certify the date, time and description of the incidents, that the incidents are *bonafide* incidents of actual or threatened abuses and meet the requirements of VAWA and this Policy. The person shall provide information to identify the perpetrator including but not limited to the name and, if known, all alias names, date of birth, address, contact information such as postal, e-mail or internet address, telephone or facsimile number or other identification.

3.3 Confirmation of Certification

A person who is claiming victim status shall provide to WHA, an owner or manager: (a) documentation signed by the victim and an employee, agent or volunteer of a victim service provider, an attorney, or a medical professional from whom the victim has sought assistance in addressing domestic violence, dating violence or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. §1746) the professional's belief that the incident(s) in question are *bonafide* incidents of abuse; or (b) a federal, state, tribal, territorial, local police or court record.

3.4 Confidentiality

WHA, the owner and managers shall keep all information provided to WHA under this Section confidential. WHA, owner and manager shall not enter the information into a shared database or provide to any related entity except to the extent that:

- (a) the victim request or consents to the disclosure in writing;
- (b) the disclosure is required for:
 - (i) eviction from public housing under 42 U.S.C. §1437 l(5)&(6)(See Section 4 in this Policy)
 - (ii) termination of Section 8 assistance under 42 U.S.C. §1437f(c)(9); 42 U.S.C. §1437f(d)(l)(B)(ii)&(iii); 42 U.S.C. §1437f (o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20)(See Section 4 in this Policy); or (c) the disclosure is required by applicable law.

4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy

- 4.1 WHA shall not deny participation or admission to a program on the basis of a person's abuse status, if the person otherwise qualifies for admission of assistance.
- 4.2 An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be a serious or repeated violation of the lease by the victim and shall not be good cause for denying to a victim admission to a program, terminating Section 8 assistance or occupancy rights, or evicting a tenant.

- 4.3 Criminal activity directly related to domestic violence, dating violence, or stalking engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim of that domestic violence, dating violence or stalking.
- 4.4 Notwithstanding Sections 4.1, 4.2, and 4.3, WHA, an owner or manager may bifurcate a lease to evict, remove or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without evicting, removing, terminating assistance to or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. 42 U.S.C. §1437d(l)(6)(B)
- 4.5 Nothing in Sections 4.1, 4.2, and 4.3 shall limit the authority of WHA, an owner or manager, when notified, to honor court orders addressing rights of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members when the family breaks up.
- 4.6 Nothing in Sections 4.1, 4.2, and 4.3 limits WHA, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However WHA, owner or manager may not hold a victim to a more demanding standard.
- 4.7 Nothing in Sections 4.1, 4.2, and 4.3 limits WHA, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the WHA, owner or manager can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.
- 4.8 Nothing in Sections 4.1, 4.2, or 4.3 limits WHA, an owner or manager's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including but not limited to acts of physical violence or stalking against family members or others.
- 4.9 A Section 8 recipient who moves out of an assisted dwelling unit to protect their health or safety and who: (a) is a victim under this Policy; (b) reasonably believes he or she was imminently threatened by harm from further violence if he or she remains in the unit; and (c) has complied with all other obligations of the Section 8 program may receive a voucher and move to another Section 8 jurisdiction.

5.0 Actions Against a Perpetrator

The WHA may evict, terminate assistance, deny admission to a program or trespass a perpetrator from its property under this Policy. The victim shall take action to control or prevent the domestic violence, dating violence, or stalking. The action may include but is not limited to: (a) obtaining and enforcing a restraining or no contact order or order for protection against the perpetrator; (b) obtaining and enforcing a trespass against the perpetrator; (c) enforcing WHA or law enforcement's trespass of the perpetrator; (d) preventing the delivery of the perpetrator's mail to the victim's unit; (e) providing identifying information listed in 3.2; and (f) other reasonable measures.

6.0 WHA Right to Terminate Housing and Housing Assistance Under this Policy

6.1 Nothing in this Policy will restrict the WHA, owner or manager's right to terminate tenancy for lease violations by a resident who claims VAWA as a defense if it is determined by the WHA, owner or manager that such a claim is false.

6.2 Nothing in this Policy will restrict the WHA right to terminate tenancy if the victim tenant (a) allows a perpetrator to violate a court order relating to the act or acts of violence; or (b) if the victim tenant allows a perpetrator who has been barred from WHA property to come onto WHA property including but not limited to the victim's unit or any other area under their control; or (c) if the victim tenant fails to cooperate with an established safety strategy as designed by a local victim support service provider (see 7.2).

6.3 Nothing in this Policy will restrict the WHA right to terminate housing and housing assistance if the victim tenant who claims as a defense to an eviction or termination action relating to domestic violence has engaged in fraud and abuse against a federal housing program; especially where such fraud and abuse can be shown to have existed before the claim of domestic violence was made. Such fraud and abuse includes but is not limited to unreported income and ongoing boarders and lodgers violations, or damage to property.

7.0 Statements of Responsibility of Tenant Victim, the WHA to the Victim, and to the Larger Community.

7.1 A tenant victim has no less duty and responsibility under the lease to meet and comply with the terms of the lease than any other tenant not making such a claim. Ultimately all tenants must be able to take personal responsibility for themselves and exercise control over their households in order to continue their housing and housing assistance. The WHA will continue to issue lease violation notices to all residents who violate the lease including those who claim a defense of domestic violence.

7.2 WHA recognizes the pathologic dynamic and cycle of domestic violence and a victim of domestic violence will be referred to local victim support service providers to help victims break the cycle of domestic violence through counseling, referral and development of a safety strategy.

- 7.3 A tenant victim must take personal responsibility for exercising control over their household by accepting assistance and complying with the safety strategy or plan to best of victim's ability and reason under the circumstances. Failure to do this may be seen as other good cause.
- 7.4 All damages including lock changes will be the responsibility of the tenant victim. This is in keeping with other agency policies governing tenant caused damages.

8.0 Notice to Applicants, Participants, Tenants and Section 8 Managers and Owners.

WHA shall provide notice to applicants, participants, tenants, managers and owners of their rights and obligations under Section 3.4 Confidentiality and Section 4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy.

- 8.1 If the WHA, owner or manager knows that an applicant to or participant in a WHA housing program is the victim of dating violence, domestic violence or stalking, the WHA, owner or manager shall inform that person of this Policy and the person's rights under it.

9.0 Reporting Requirements

WHA shall include in its 5-year plan a statement of goals, objectives, policies or programs that will serve the needs of victims. WHA shall also include a description of activities, services or programs provided or offered either directly or in partnership with other service providers to victims, to help victims obtain or maintain housing or to prevent the abuse or to enhance the safety of victims.

10.0 Conflict and Scope

This Policy does not enlarge WHA's duty under any law, regulation or ordinance. If this Policy conflicts with the applicable law, regulation or ordinance, the law, regulation or ordinance shall control. If this Policy conflicts with another WHA policy such as its Statement of Policies or Section 8 Administration Plan, this Policy will control.

11.0 Amendment

The Executive Director may amend this policy when it is reasonably necessary to effectuate the Policy's intent, purpose or interpretation. The proposed amendment along with the rationale for the amendment shall be submitted to the Executive Director for consideration. Where reasonably necessary, the Executive Director may approve the amendment. The amendment shall be effective and incorporated on the date that the Executive Director signs the amendment.

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

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

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-09</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2009</u> FFY of Grant Approval: _____	
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				<input type="checkbox"/> Final Performance and Evaluation Report	
Line	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	39,180			
4	1410 Administration (may not exceed 10% of line 21)	64,400			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,200			
8	1440 Site Acquisition				
9	1450 Site Improvement	50,000			
10	1460 Dwelling Structures	430,409			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	40,000			
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)	644,189			
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.

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

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

Part I: Summary				
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-09</u>		Replacement Housing Factor Grant No:
				FFY of Grant: <u>2009</u> FFY of Grant Approval:
Type of Grant				
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director 		Date <u>9/18/09</u>		Signature of Public Housing Director Date

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-09 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
HA Wide	Community Policing	1408	100%	39,180				
Mgt Improvement	Sub total			39,180				
HA Wide	Partial salary of staff involved in CFP	1410	10%	64,400				
Admin Cost	Sub total			64,400				
HA Wide	A/E Services	1430	100%	20,200				
Fees & Cost	Sub total			20,200				
IL 26-1	A. Site improvement	1450	20 %	20,000				
Barnwell Manor	B. Repair brick exteriors	1460	1 Bldg	10,000				
	C. Upgrade main entry	1460	1 Sys	2,000				
	D. Replace screen doors	1460	120 Units	30,000				
	E. Replace entry door locks	1460	120 Units	15,000				
	F. Patch & paint interiors	1460	20 Units	50,000				
	G. Replace DHW heaters	1460	18 EA	7,200				
	Sub total			134,200				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-09 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
IL 26-1A	A. Site improvement	1450	20 %	5,000				
Armory	B. Resurface parking	1460	100 SY	1,000				
	C. Repair built up roof	1460	1 Bldg	5,750				
	D. Renovate interior	1460	10 Units	21,359				
	E. Replace DHW heaters	1460	7 EA	3,000				
	Sub total			36,109				
IL 26-2B	A. Replace park benches	1450	5 EA	5,000				
Ravine Terrace	B. Tuckpoint & seal brick	1460	1 Bldg	55,000				
	C. Replace interior doors and hardware	1460	12 EA	7,500				
	D. Renovate bathroom	1460	10 Units	20,000				
	E. Renovate units	1460	10 Units	35,000				
	F Replace A/C sleeve	1460	2 EA	2,500				
	G. Upgrade CCTV	1460	1 Sys	10,000				
	Sub total			135,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages											
PHA Name: Waukegan Housing Authority			Grant Type and Number Capital Fund Program Grant No: IL26P026501-09 Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009					
Development Number Name/PHA-Wide Activities			General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
							Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
IL 26-3			A. Replace park benches		1450	5 EA	5,000				
Poe Manor			B. Tuckpoint & seal brick		1460	1 Bldg	55,000				
			C. Replace entry doors and locks		1460	10 Units	9,500				
			D. Renovate interior		1460	6 Units	10,000				
			E. Upgrade heating system		1460	1 Bldg	30,600				
			F. Replace emergency generator		1460	1 Sys	5,000				
			G. Upgrade CCTV		1460	1 Sys	15,000				
			Sub total				130,100				
IL 26-6			A. Site improvements		1450	20 %	15,000				
Scattered Sites			B. Renovate units		1460	23 Units	30,000				
			Sub total				45,000				
HA Wide			Renovate Admin office		1470	LS	40,000				
Non-dwelling Structures			Sub total				40,000				
			Grand Total				644,189				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Waukegan Housing Authority					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	6/30/11		6/30/13		
IL 26-1, Barnwell Manor	6/30/11		6/30/13		
IL 26-1A, Armory	6/30/11		6/30/13		
IL 26-2B, Ravine Terrace	6/30/11		6/30/13		
IL 26-3, Poe Manor	6/30/11		6/30/13		
IL 26-6, Scattered Sites	6/30/11		6/30/13		

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.

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 Waukegan Housing Authority/IL 026		Locality (City/County & State) Waukegan/Lake County/Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
B.	Physical Improvements Subtotal	Annual Statement	520,409	369,409	520,409	450,000
C.	Management Improvements		39,180	39,180	39,180	109,589
D.	PHA-Wide Non-dwelling Structures and Equipment			151,000		
E.	Administration		64,400	64,400	64,400	64,400
F.	Other		20,200	20,200	20,200	20,200
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		644,189	644,189	644,189	644,189
L.	Total Non-CFP Funds					
M.	Grand Total		644,189	644,189	644,189	644,189

Part I: Summary (Continuation)						
PHA Name/Number Waukegan Housing Authority/IL 026		Locality (City/County & State) Waukegan/Lake County/Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
		Annual Statement				
	IL 26-1, Barnwell Manor		128,940		92,009	80,000
	IL 26-2E, Ravine Terrace		115,719		105,000	72,500
	IL 26-2F, Armory Terrace		207,750		119,900	85,000
	IL 26-3, Poe Manor		23,000	120,000	155,500	112,500
	IL 26-6, Scattered Sites		45,000	249,409	48,000	100,000

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 4 FFY 2012			Work Statement for Year 5 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	IL 26-1, Barnwell Manor			IL 26-1, Barnwell Manor		
Annual	A. Replace clotheslines	120 EA	18,000	A. Upgrade lighting	1 Site	10,000
Statement	B. renovate bathroom	30 Units	74,009	B. Replace door lock	100 Units	15,000
	Subtotal		92,009	C. Upgrade laundry room	LS	30,000
				D. Patch & paint interior	30 Units	25,000
				Subtotal		80,000
	IL 26-2E, Ravine Terrace			IL 26-2E, Ravine Terrace		
	A. Remove clotheslines	50 EA	7,500	A. Site Improvement	20%	10,000
	B. Resurface parking	4,000 SF	40,000	B. Patch & paint interiors	3 Units	20,000
	C. Renovate bathroom	50 EA	50,000	C. Replace rear entry door	50 EA	45,000
	D. Patch & paint interiors	25 Units	15,000	D. Upgrade laundry room	1	10,000
	Subtotal		112,500	Subtotal		85,000
	IL 26-2F, Armory Terrace			IL 26-2F, Armory Terrace		
	A. Site Improvement	20%	7,500	A. Site Improvement	20%	7,500
	B. Replace door locks	50 EA	9,900	B. Replace access cards	98 EA	15,000
	C. Renovate bathroom	50 Units	80,000	C. Replace carpeting	7 Units	20,000
	D. Patch & paint interiors	25 Units	15,000	D. Replace interior doors	20 Units	10,000
	Subtotal		112,400	E. Renovate bldg office	1	20,000
				Subtotal		72,500
	IL 26-3 Poe Manor			IL 26-3 Poe Manor		
	A. Resurface parking	4,500 SF	45,000	A. Site Improvement	20%	7,500
	B. Replace door locks	155 EA	15,000	B. Replace access card	155 EA	15,000
	C. Renovate bathroom	30 Units	80,000	C. Renovate bathroom	45 Units	90,000
	D. Patch & paint interiors	20 Units	15,500	Subtotal		112,500
	Subtotal		155,500			

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

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

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-08</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2008</u> FFY of Grant Approval: <u>2008</u>	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/08				<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	39,180		0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	63,800		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,200		0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	158,957		0.00	0.00
10	1460 Dwelling Structures	362,052		0.00	0.00
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)	644,189		0.00	0.00
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				
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
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-08</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2008</u> FFY of Grant Approval: <u>2008</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/08 <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 <u>9/10/08</u>		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-08 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
HA Wide Management Improvements	Community policing	1408	100%	39,180		0.00	0.00	0% Complete
	Subtotal			39,180		0.00	0.00	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP	1410	10%	63,800		0.00	0.00	0% Complete
	Subtotal			63,800		0.00	0.00	
HA Wide Fees & Cost	A/E services	1430	100%	20,200		0.00	0.00	0% Complete
	Subtotal			20,200		0.00	0.00	
IL 26-1 Barwell Manor	A. Expand parking	1450	5000 SF	106,000		0.00	0.00	0% Complete
	B. Resurface drives	1450	10,400 SF	52,957		0.00	0.00	0% Complete
	C. Patch & paint interiors	1460	120 Units	101,292		0.00	0.00	0% Complete
	Subtotal			260,249		0.00	0.00	
IL 26-2E Ravine Terrace	Replace bathroom lighting	1460	98 Units	16,500		0.00	0.00	0% Complete
	Subtotal			16,500		0.00	0.00	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-08 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
IL 26-2F Armory Terrace	Patch & paint interiors	1460	50 Units	74,000		0.00	0.00	0% Complete
	Subtotal			74,000		0.00	0.00	
IL 26-3 Poe Manor	Patch & paint interiors	1460	155 Units	120,260		0.00	0.00	0% Complete
	Subtotal			120,260		0.00	0.00	
IL 26-6 Scattered Sites	Comp MOD	1460	10 Units	50,000		0.00	0.00	0% Complete
	Subtotal			50,000		0.00	0.00	
	Grand Total			644,189		0.00	0.00	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Waukegan Housing Authority					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IL 26-1, Barwell Manor	6/30/10		6/30/12		
IL 26-2E, Ravine Terrace	6/30/10		6/30/12		
IL 26-2F, Armory Terrace	6/30/10		6/30/12		
IL 26-3, Poe Manor	6/30/10		6/30/12		
IL 26-6, Scattered Sites	6/30/10		6/30/12		
HA Wide	6/30/10		6/30/12		

¹Obligation 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.

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

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

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-07</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2007</u> FFY of Grant Approval: <u>2007</u>	
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: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/08				<input checked="" 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	33,270	33,270.00	33,270.00	33,270.00
4	1410 Administration (may not exceed 10% of line 21)	64,000	64,000.00	64,000.00	64,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	21,276	19,413.69	19,413.69	19,413.69
8	1440 Site Acquisition				
9	1450 Site Improvement	62,000	88,371.83	88,371.83	88,371.83
10	1460 Dwelling Structures	355,901	355,901.00	355,901.00	355,901.00
11	1465.1 Dwelling Equipment—Nonexpendable	101,832	77,322.48	77,322.48	77,322.48
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)	638,279	638,279.00	638,279.00	638,279.00
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				
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.

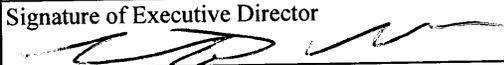
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-07</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2007</u>	
				FFY of Grant Approval: <u>2007</u>	
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: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/08					
<input checked="" type="checkbox"/> Final Performance and Evaluation Report					
		Total Estimated Cost		Total Actual Cost ¹	
Line	Summary by Development Account	Original	Revised ²	Obligated	Expended
Signature of Executive Director		Date		Signature of Public Housing Director	
		7/16/10			

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-07 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2007	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide Management Improvements	Community policing	1408	100%	33,270	33,270.00	33,270.00	33,270.00	Completed
	Subtotal			33,270	33,270.00	33,270.00	33,270.00	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP	1410	10%	64,000	64,000.00	64,000.00	64,000.00	Completed
	Subtotal			64,000	64,000.00	64,000.00	64,000.00	
HA Wide Fees & Cost	A/E services	1430	100%	21,276	19,413.69	19,413.69	19,413.69	Completed
	Subtotal			21,276	19,413.69	19,413.69	19,413.69	
IL 2 6 - 1	A. Replace screen doors	1460	120	56,455	56,455.00	56,455.00	56,455.00	Completed
Barwell Manor	B. Replace appliances	1465.1		31,832	31,832.00	31,832.00	31,832.00	Completed
	C. Renovate bathroom	1460		74,950	74,950.00	74,950.00	74,950.00	Completed
	Subtotal			163,237	163,237.00	163,237.00	163,237.00	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-07 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2007	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL 26-2E	A. Replace domestic sewer lines	1450	LS	62,000	88,371.83	88,371.83	88,371.83	Completed
Ravine Terrace	B. Replace appliances	1465.1		70,000	45,490.48	45,490.48	45,490.48	Completed
	Subtotal			132,000	133,862.31	133,862.31	133,862.31	
IL 26-2F	A. Replace screen doors	1460		34,996	34,996.00	34,996.00	34,996.00	Completed
Armory Terrace	B. Repair roofing	1460		45,000	45,000.00	45,000.00	45,000.00	
	Subtotal			79,996	79,996.00	79,996.00	79,996.00	
IL 26-3	Tuck pointing	1460		75,000	75,000.00	75,000.00	75,000.00	Completed
Poe Manor	Subtotal			75,000	75,000.00	75,000.00	75,000.00	
IL 26-6	Renovate units	1460		69,500	69,500.00	69,500.00	69,500.00	Completed
Scattered Sites	Subtotal			69,500	69,500.00	69,500.00	69,500.00	
	Grand Total			638,279	638,279.00	638,279.00	638,279.00	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Waukegan Housing Authority					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IL 26-1, Barwell Manor	9/12/09	12/31/08	9/12/11	2/23/09	
IL 26-2E, Ravine Terrace	9/12/09	12/31/08	9/12/11	2/23/09	
IL 26-2F, Armory Terrace	9/12/09	12/31/08	9/12/11	2/23/09	
IL 26-3, Poe Manor	9/12/09	12/31/08	9/12/11	2/23/09	
IL 26-6, Scattered Sites	9/12/09	12/31/08	9/12/11	2/23/09	
HA Wide	9/12/09	12/31/08	9/12/11	2/23/09	

¹Obligation 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.

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

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

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-06</u>		FFY of Grant: <u>2006</u> FFY of Grant Approval: <u>2006</u>	
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"/> Performance and Evaluation Report for Period Ending: 12/31/08 <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" 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	48,374	58,264.32	58,264.32	58,264.32
4	1410 Administration (may not exceed 10% of line 21)	62,750	62,225.00	62,225.00	62,225.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,016	16,558.50	16,558.50	16,558.50
8	1440 Site Acquisition				
9	1450 Site Improvement	65,000	51,982.10	51,982.10	51,982.10
10	1460 Dwelling Structures	235,000	452,119.08	452,119.08	452,119.08
11	1465.1 Dwelling Equipment—Nonexpendable	208,009	0.00	0.00	0.00
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)	641,149	641,149.00	641,149.00	641,149.00
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				
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.

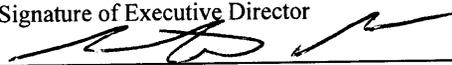
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL26P026501-06</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2006</u>	
				FFY of Grant Approval: <u>2006</u>	
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: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/08		<input checked="" 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 <u>8/18/09</u>		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-06 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2006	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
HA Wide Management Improvements	Security/Drug Elimination Program	1408	100%	48,374	58,264.32	58,264.32	58,264.32	Completed
	Subtotal			48,374	58,264.32	58,264.32	58,264.32	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP	1410	10%	62,750	62,225.00	62,225.00	62,225.00	Completed
	Subtotal			62,750	62,225.00	62,225.00	62,225.00	
HA Wide Fees & Cost	A/E services	1430	100%	22,016	16,558.50	16,558.50	16,558.50	Completed
	Subtotal			22,016	16,558.50	16,558.50	16,558.50	
IL 26-1 Barwell Manor	A. Upgrade playground	1450	LS	65,000	0.00	0.00	0.00	Delete
	B. Replace exit doors	1460	68 Units	120,000	21,031.84	21,031.84	21,031.84	Completed
	C. Replace appliances	1465.1	120 Pair	101,109	0.00	0.00	0.00	Delete
	D. Resurface parking	1450		0	51,982.10	51,982.10	51,982.10	Completed
	E. Renovate units	1460		0	4,750.00	4,750.00	4,750.00	Completed
	F. Plumbing upgrade	1460		0	18,226.00	18,226.00	18,226.00	Completed
	G. Replace roofing	1460		0	138,530.00	138,530.00	138,530.00	Completed
	Subtotal			286,109	234,519.94	234,519.94	234,519.94	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL26P026501-06 Replacement Housing Factor Grant No:			CFFP (Yes/ No): No		Federal FFY of Grant: 2006	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL 26-2 Armory	A. Replace entry doors	1460	50 Units	65,000	0.00	0.00	0.00	Delete
	B. Renovate units	1460		0	49,758.40	49,758.40	49,758.40	Completed
	C. Plumbing upgrade	1460		0	18,226.00	18,226.00	18,226.00	Completed
	Subtotal			65,000	67,984.40	67,984.40	67,984.40	
IL 26-3 Poe Manor	A. Replace appliances	1465.1	155 pair	106,900	0.00	0.00	0.00	Delete
	B. Upgrade elevator	1460		0	25,671.08	25,671.08	25,671.08	Completed
	C. Replace main entry door	1460		0	6,065.00	6,065.00	6,065.00	Completed
	D. Plumbing upgrade	1460		0	18,226.00	18,226.00	18,226.00	Completed
	Subtotal			106,900	49,962.08	49,962.08	49,962.08	
IL 26-6	A. Renovate units	1460	3 Units	50,000	123,652.00	123,652.00	123,652.00	Completed
Scattered Sites	B. Replace furnaces	1460		0	9,756.00	9,756.00	9,756.00	Completed
	C. Plumbing upgrade	1460		0	18,226.76	18,226.76	18,226.76	Completed
	Subtotal			50,000	151,634.76	151,634.76	151,634.76	
	Grand Total			641,149	641,149.00	641,149.00	641,149.00	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Waukegan Housing Authority					Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	7/17/08	7/17/08	7/17/10	12/31/08	
IL 26-1, Barwell Manor	7/17/08	7/17/08	7/17/10	12/31/08	
IL 26-2, Armory Terrace	7/17/08	7/17/08	7/17/10	12/31/08	
IL 26-3, Poe Manor	7/17/08	7/17/08	7/17/10	12/31/08	
IL 26-6, Scattered Sites	7/17/08	7/17/08	7/17/10	12/31/08	

¹Obligation 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.

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

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

Part I: Summary					
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06S02650109 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 3/18/2009 FFY of Grant Approval: 3/18/2009
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	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	\$20,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$215,003			
10	1460 Dwelling Structures	\$580,416			
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)	\$815,419			
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: Waukegan Housing Authority	Grant Type and Number Capital Fund Program Grant No.: IL06S02650109 Date of CFFP: _____		Replacement Housing Factor Grant No: FFY of Grant: 3/18/2009 FFY of Grant Approval: 3/18/2009		
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	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 II: Supporting Pages								
PHA Name: Waukegan Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06S02650109 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 3/18/2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA wide	A/E Services	1430	100%	\$20,000				
	Subtotal			\$20,000				
IL26-1 Barwell	Replace mansard Siding	1450	100%	\$50,000				
	Subtotal			\$50,000				
	Renovate units	1460	20	\$222,016				
	Subtotal			\$222,016				
IL26-2A Armory	Replace front doors	1450	100%	\$90,000				
	Exterior paint	1450	100%	\$35,000				
	Install new mail boxes	1450	100%	\$20,000				
	Subtotal			\$145,000				
	Renovate unites	1460	5	\$24,000				
IL26-2B Ravine	Replace Elevator Cabs	1450	2	\$50,000				
	subtotal			\$50,000				
	Remodel Bathrooms	1460	25	\$75,000				
	Subtotal			\$75,000				
IL26-3 Poe	Replace Elevator Cabs	1450	2	\$50,000				
	subtotal			\$50,000				
	Remodel Bathrooms	1460	25	\$75,000				
	Subtotal			\$75,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

