

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Livingston County Housing Authority</u> PHA Code: <u>IL094</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2009</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>237</u> Number of HCV units: <u>73</u>				
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. 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: The mission of the Livingston County Housing Authority is to provide quality housing, free from discrimination, to eligible people in a professional, fiscally responsible manner and be a positive force in our community by working with others to assist these families with appropriate supportive services.				
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. Our strategy is to keep our units in quality condition, make the constituents aware of its availability and serve as many families/individuals as we can. We also attempt to coordinate services for our residents so that self-sufficiency is always a goal they strive to obtain. We continue to provide quality housing, free from discrimination, to eligible people in a professional, fiscally responsible manner. We continue to be a positive force in our community by working with other agencies to assist families with appropriate supportive services to promote self sufficiency. We continue to strive to improve the quality of assisted housing and have completed a modernization program at IL094-02 site and also have completed a capital fund project to upgrade all of our accessible units to bring them into compliance with all regulations relative to Section 504. We have attempted to increase customer satisfaction by focusing on better communication with our residents. We work hard at keeping our units in quality condition by performing regular maintenance, preventative maintenance and modernization as the funds become available. Customer Satisfaction is important to us and we encourage our staff to conduct themselves professionally and promote positive communication with our residents and the community.				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: No Revisions (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. Main Office – 903 W. North Street, Pontiac, IL 61764 AMP 1 – Office, 920 W. Madison Street, Pontiac, IL 61764 AMP 3 – Office, Reni Court, Chatsworth, IL 60921				
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>				
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. Attached for CFP 2008				

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. Attached for CFP Years 2009-2013</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.</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. Generally, rental housing in our jurisdiction is not affordable to low and very-low income constituents without assistance. The supply of units appears to be sufficient but not affordable and often the units are in deplorable condition. There are really no poverty stricken areas within our jurisdiction...units are located throughout all neighborhoods in all towns within the county. Because of the lack of quality and affordability in rental housing in our area, assisted housing continues to be a necessary and desired by those living in our jurisdiction and those on our waiting lists.</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.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. We continue to be a positive force in our community by working with other agencies to assist families with appropriate supportive services to promote self sufficiency. We continue to strive to improve the quality of assisted housing and have completed a modernization program at IL094-02 (Meadowview Court) site and updating all of our accessible units at every site to bring them into conformance with all applicable Section 504 requirements. We continue to strive to improve customer satisfaction by focusing on better communication with our residents and applicants, with our community and with other social service agencies serving this area.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" The LCHA reserves the right to full fungibility in the accomplishment of its goals and objectives in the capital improvement plan. Funds from one year's plan may be utilized to accomplish any work items scheduled during the five-year plan and shall not be considered a substantial deviation. Emergency work items shall take precedence over scheduled work items and shall not be considered a substantial deviation. Any excess funds remaining after completion of the scheduled work items for the annual plan year, may be utilized for future year's planned work items or transferred into the operations account. Capital Funds originally designated for operations may be utilized to supplement any other approved work items in order to accomplish the goals in the Plan. This shall not be considered a substantial deviation. Capital Funds may be transferred into Operations at any time to prevent the LCHA from being designated as financially troubled. This shall not be considered a substantial deviation.</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (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)</p>

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Part I: Summary	
PHA Name: IL094 Livingston County Housing Authority	Grant Type and Number Capital Fund Program Grant No: IL06P094501-07 Replacement Housing Factor Grant No: Date of CFFP: 06/30/2008
FFY of Grant: 2007 FFY of Grant Approval: 2008	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	37,033		0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40,000		17,000	17,000
8	1440 Site Acquisition				
9	1450 Site Improvement	40,000		32,900`	32,900
10	1460 Dwelling Structures	242,848		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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: IL094 Livingston County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P09450107 Replacement Housing Factor Grant No: Date of CFFP: 06/30/2008			FFY of Grant:2007 FFY of Grant Approval: 2008	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	358,720				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date 05/20/2009		Signature of Public Housing Director		
				Date		

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⁴ RHF funds shall be included here.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: IL094 Livingston County 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	
HA-Wide	09/10/2009		09/10/2011		
IL094-01	09/10/2009		09/10/2011		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary		
PHA Name: Livingston County Housing Authority IL094	Grant Type and Number Capital Fund Program Grant No: IL06P09450108 Replacement Housing Factor Grant No: Date of CFFP: 06/30/2008	FFY of Grant: 2008 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/30/2009 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)	37,861	0	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40,000	0	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	100,000	185,506	0	0
10	1460 Dwelling Structures	200,753	115,247	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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: Livingston County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P09450108 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2008 FFY of Grant Approval: 2009	
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: 06/30/2008			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	378,614				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities	115,247				
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date 05/14/2009		Signature of Public Housing Director		
				Date		

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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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Livingston County Housing Authority IL094				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	
PHA-Wide	06/12/2010		06/12/2012		
IL094-01	06/12/2010		06/12/2012		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 IL094 Livingston County Housing Authority		Locality (City/County & State) Pontiac, Livingston, Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name PHA-Wide	Work Statement for Year 1 FFY <u> 2009 </u>	Work Statement for Year 2 FFY <u> 2009 </u> ARRA Funds	Work Statement for Year 3 FFY <u> 2010 </u>	Work Statement for Year 4 FFY <u> 2011 </u>	Work Statement for Year 5 FFY <u> 2012 </u>
B.	Physical Improvements Subtotal	Annual Statement	418,325	282,848	282,848	242,848
C.	Management Improvements		13,000			
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		47,925	38,872	35,872	35,872
F.	Other			40,000	40,000	40,000
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		479,250	358,720	358,720	358,720
L.	Total Non-CFP Funds					
M.	Grand Total					

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary (Continuation)						
PHA Name/Number IL094 Livingston County Housing Authority		Locality (City/county & State) Pontiac, Livingston, Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name PHA-Wide	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY 2013 _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____
B.	Physical Improvements Subtotal	Annual Statement	152,305			
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		130,543			
E.	Administration		35,872			
F.	Other		40,000			
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		358,720			
L.	Total Non-CFP Funds					
M.	Grand Total					
B.	Physical Improvements Subtotal					

Development or PHA-Wide	Work Activity	Management Activity
ADD'L CFP WORK ITEMS AS MONEY IS AVAILABLE		
PHA-Wide		Update Computer Hardware/Software
IL094-01	Parking Lot Replacement Replace Floor tiles in Community Room & Kitchen Remodel 1st Floor Restrooms Seal & Tuckpoint Bldg Exterior Replace Roof Replace Electronic Entry System Replace Entry Doors Replace Toilets Security Cameras Replace Boilers	
IL094-02	Security Cameras Replace Roofs Replace Sidewalks/Stoops Replace Parking Lots Replace Storm Doors/windows Landscaping Replace Playground Equipment	
IL094-05	Replace Playground Equipment Replace Roofs Replace Sidewalks/Stoops Replace Parking Lots Replace Storm Doors/windows Replace Furnaces	
IL094-06	Replace Playground Equipment Replace Roofs Replace Sidewalks/stoops Replace Parking Lots Replace Storm Doors/windows Landscaping	
IL094-07	IL094-07 Replace Roofs Replace Sidewalks/stoops	

Development or PHA-Wide ADD'L CFP WORK ITEMS AS MONEY IS AVAILABLE	Work Activity	Management Activity
IL094-09	Replace Storm Doors/Windows Landscaping Replace Parking Lots Replace Roofs Replace Sidewalks/stoops Replace Storm Doors/Windows Landscaping Replace Parking Lots	
IL094-10	Replace Furnace Replace Carpet Replace Kitchen/Bathroom Floor	