

PHA Plans
Streamlined Annual
Version

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

OMB No. 2577-0226
(exp. 08/31/2009)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan
for Fiscal Year: 2009

PHA Name:
Hammond Housing Authority

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan Agency Identification

PHA Name: Hammond Housing Authority

PHA Number: IN010

PHA Fiscal Year Beginning: (mm/yyyy) 01/2009

PHA Programs Administered:

Public Housing and Section 8

Number of public housing units: 458
Number of S8 units: 639

Section 8 Only

Number of S8 units:

Public Housing Only

Number of public housing units:

PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

PHA Plan Contact Information:

Name: Maria C. Becerra
TDD: 800/743-3333

Phone: 219/989-3265

Email (if available): mariacbecerra@aol.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

PHA's main administrative office PHA's development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. Yes No.

If yes, select all that apply:

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library PHA website Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA PHA development management offices
- Other (list below)

Streamlined Annual PHA Plan
Fiscal Year 2009
[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

A. PHA PLAN COMPONENTS

- 1. Site-Based Waiting List Policies
903.7(b)(2) Policies on Eligibility, Selection, and Admissions
- 2. Capital Improvement Needs
903.7(g) Statement of Capital Improvements Needed
- 3. Section 8(y) Homeownership
903.7(k)(1)(i) Statement of Homeownership Programs
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- 6. Supporting Documents Available for Review
- 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- 8. Capital Fund Program 5-Year Action Plan

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL & SF-LLL a, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B.

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics

2. What is the number of site based waiting list developments to which families may apply at one time?
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?
4. Yes No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component.

1. How many site-based waiting lists will the PHA operate in the coming year?0
2. Yes No: Are any or all of the PHA’s site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. Yes No: May families be on more than one list simultaneously
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Capital Fund Program

1. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. Yes No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. Yes No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status
a. Development Name:
b. Development Number:

c. Status of Grant:

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

3. Yes No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name(s) below:

4. Yes No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

Columbia Center Revitalization Plan

5. Yes No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

Columbia Center Revitalization Plan / Section 8 Project Based Vouchers / LIHTC – Affordable Housing / Property Management and Maintenance of LIHTC – Affordable Housing Property / Acquiring Rental Properties

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program

(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to the next component; if “yes”, complete each program description below (copy and complete questions for each program identified.)

2. Program Description: **The Section 8 Homeownership Program will work with FSS participants that have a final goal of homeownership. The FSS participants will have full time employment and FSS contracts ending in 2009. This will also include home eligible elderly/disabled.**

a. Size of Program

Yes No: Will the PHA limit the number of families participating in the Section 8 homeownership option?

If the answer to the question above was yes, what is the maximum number of participants this fiscal year? **Five to ten in 2009.**

b. PHA-established eligibility criteria

Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:

- **Employment gaps will be limited to 30 days (exception – elderly/disabled).**
- **FSS participants will have first priority for the available slots (exception – elderly/disabled).**

c. What actions will the PHA undertake to implement the program this year (list)?

The Hammond Housing Authority will develop policies and procedures for the Administration Plan by December 2008. As well as develop relationships with financial institutions for finance assistance within 2009.

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

Yes No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.

1. Yes No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:

- low utilization rate for vouchers due to lack of suitable rental units
- access to neighborhoods outside of high poverty areas
- other (describe below:)

2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: (provide name here)

City of Hammond, Indiana

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
A	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
A	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
A	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Pla .</i>	5 Year and standard Annual Plans
A	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
A	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA’s public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
A	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
A	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
A	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
A	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
A	Schedule of flat rents offered at each public housing development. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
A	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
A	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
A	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
A	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
A	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
A	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
A	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
A	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
A	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
A	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
A	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
A	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

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

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

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
7. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.

13. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
14. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
15. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
16. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
17. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
18. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
19. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments.).
20. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
21. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

Hammond Housing Authority IN010
 PHA Name PHA Number/HA Code

- Streamlined PHA Plan for Fiscal Year: 2009
 Standard PHA Plan for Fiscal Year: 20__
 Standard Five-Year PHA Plan for Fiscal Years 20__ - 20__, including Annual Plan for FY 20__
 Streamlined Five-Year PHA Plan for Fiscal Years 20__ - 20__, including Annual Plan for FY 20__

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

Name of Authorized Official	Title
Dr. Leo Bryant	Chairman / Board of Commissioners
Signature	Date
X <i>Leo A. Bryant</i>	September 22, 2008

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Hammond Housing Authority

Program/Activity Receiving Federal Grant Funding

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

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

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

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

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

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

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

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

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

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

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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

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

1402 173rd Street Hammond, Lake, IN 46324	4923 Hohman Avenue Hammond, Lake, IN 46320	1607 173rd Street Hammond, Lake, IN 46324	7329 Columbia Circle West Hammond, Lake, IN 46324
--	---	--	--

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

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

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

Name of Authorized Official Maria C. Becerra	Title Executive Director
Signature X <i>Maria C. Becerra</i>	Date 10-14-08

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Hammond Housing Authority

Program/Activity Receiving Federal Grant Funding

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

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

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

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

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

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

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

Name of Authorized Official Maria C. Becerra	Title Executive Director
Signature 	Date (mm/dd/yyyy) 10-14-08

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Hammond Housing Authority 1402 173rd Street Hammond, Indiana 46324 Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u><i>Maria C. Becerra</i></u> Print Name: <u>Maria C. Becerra</u> Title: <u>Executive Director</u> Telephone No.: <u>(219)989-3265, ext. 303</u> Date: <u>10-14-08</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

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

I, Thomas M. McDermott, Jr. the Mayor of the City of Hammond certify
that the Five Year and Annual PHA Plan of the Hammond Housing Authority is
consistent with the Consolidated Plan of City of Hammond, Indiana prepared
pursuant to 24 CFR Part 91.



10-14-08

Signed / Dated by Appropriate State or Local Official

Annual Statement / Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Capital Fund Program(CFP) Part I: Summary

Office of Public and Indian Housing

PHA Name: Housing Authority of the City of Hammond of Lake County Indiana	Comprehensive Grant Number IN36P010501-05	FF
---	---	----

- Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number **5 Dated 11/1/07**
 Performance and Evaluation Report for Program Year Ending
 Final Performance and Evaluation Report
 U

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual	
		Original	Revised (1)	Obligated	
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 20)	211,325.00	211,325.00	211,325.00	
3	1408 Management Improvements	80,000.00	80,000.00	80,000.00	
4	1410 Administration	130,625.00	130,625.00	130,625.00	
5	1411 Audit	2,000.00	2,000.00	2,000.00	
6	1415 Liquidated Damages	0.00	0.00	0.00	
7	1430 Fees and Costs	35,413.88	30,000.00	30,000.00	
8	1440 Site Acquisition	0.00	0.00	0.00	
9	1450 Site Improvement	2,392.00	2,392.00	2,392.00	
10	1460 Dwelling Structures	800,461.12	800,461.12	800,461.12	
11	1465.1 Dwelling Equipment-Nonexpendable	10,000.00	10,000.00	10,000.00	
12	1470 Non-dwelling Structures	1,120.00	1,120.00	1,120.00	
13	1475 Non-dwelling Equipment	4,103.00	9,516.88	9,516.88	
14	1485 Demolition	0.00	0.00	0.00	
15	1490 Replacement Reserve	0.00	0.00	0.00	
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	
17	1495.1 Relocation Costs	28,815.00	28,815.00	28,815.00	
18	1498 Mod Used for Development	0.00	0.00	0.00	
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	
20	Amount of Annual Grant (Sum of lines 2-19)	1,306,255.00	1,306,255.00	1,306,255.00	
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	
22	Amount of line 20 Related to Section 504 Compliance	10,000.00	10,000.00	10,000.00	
23	Amount of line 20 Related to Security	70,000.00	70,000.00	70,000.00	
24	Amount of line 20 Related to Energy Conservation Measures	50,000.00	50,000.00	50,000.00	
Signature of Executive Director _____ Date _____		Signature of Public Housing Director/Office of American Programs Administrator _____			

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.

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ²
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	01 1406	01	211,325.00	211,325.00	211,325.00	211,325.00	Complete
	Sub Total			211,325.00	211,325.00	211,325.00	211,325.00	
Management Improvements	Drug Enforcement Personnel	01 1408	01	70,000.00	70,000.00	70,000.00	70,000.00	Complete
	Staff Training	01 1408	01	10,000.00	10,000.00	10,000.00	10,000.00	
	Sub Total			80,000.00	80,000.00	80,000.00	80,000.00	
Administration	Administrative Salaries	01 1410	01	130,625.00	130,625.00	130,625.00	130,625.00	Complete Complete
	Sub Total			130,625.00	130,625.00	130,625.00	130,625.00	
Audit	Audit Costs	01 1411	01	2,000.00	2,000.00	2,000.00	2,000.00	Complete
	Sub Total			2,000.00	2,000.00	2,000.00	2,000.00	
Fees & Costs	Forum Architects	02 1430	01	35,413.88	30,000.00	30,000.00	30,000.00	Complete
	Sub Total			35,413.88	30,000.00	30,000.00	30,000.00	
Site Improvement	Swing replacement	01 1450	2 sets	500.00	500.00	500.00	500.00	Complete
	Swing replacement	02 1450	2 sets	500.00	500.00	500.00	500.00	
	Sidewalk	01 1450	200 sf	1,392.00	1,392.00	1,392.00	1,392.00	
	TP townhome cleanouts	02 1450	28	0.00	0.00	0.00	0.00	
Sub Total			2,392.00	2,392.00	2,392.00	2,392.00		
Dwelling Units	TP Hi-rise remodel all units,	02 1460	75,000 sf	800,461.12	800,461.12	800,461.12	800,467.12	Complete
	TP Townhome Reroofing	02 1460	9 bldg	0.00	0.00	0.00	0.00	
	Sub Total			800,461.12	800,461.12	800,461.12	800,467.12	
Dwelling Equip Non-Exp	Stoves & Refrigerators	01 1465	20 each	10,000.00	10,000.00	10,000.00	10,000.00	Complete
	Sub Total			10,000.00	10,000.00	10,000.00	10,000.00	
Non Dwelling Structures	Admin Bldg Auto Doors	01 1470	01	1,120.00	1,120.00	1,120.00	1,120.00	Complete
	Sub Total			1,120.00	1,120.00	1,120.00	1,120.00	
Non-Dwelling Equip	Lawnmowers	01 1475	16	1,450.00	1,450.00	1,450.00	1,450.00	Complete
	Electric Cart	01 1475	1	0.00	0.00	0.00	0.00	
	2 way radios	01 1475	14	2,653.00	2,653.00	2,653.00	2,653.00	
	Key cutting machine	01 1475	1	0.00	0.00	0.00	0.00	
	Computers/printers/software	01 1475	1 lot	0.00	5,413.88	5,413.88	5,407.88	
	Sub Total			4,103.00	9,516.88	9,516.88	9,510.88	
Relocation Costs	Relocation Costs - CC Master Plan	01 1495	35	0.00	0.00	0.00	0.00	Complete
	Relocation Costs - TP Rehab	02 1495	119	28,815.00	28,815.00	28,815.00	28,815.00	
	Sub Total			28,815.00	28,815.00	28,815.00	28,815.00	
Contingency	Contingency	01 1502	01	0.00	0.00	0.00	0.00	Complete
	Sub Total			0.00	0.00	0.00	0.00	
	Total			1,306,255.00	1,306,255.00	1,306,255.00	1,306,255.00	

Signature of Executive Director

Date

Signature of Public Housing Director

Date

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.

Capital Fund Program(CFP) **Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates ²
	Original	Revised ¹	Actual ²	Original	Revised ¹	Actual ²	
IN10-1 Columbia Center	08/18/07		9/5/07	08/18/09		9/4/08	
IN10-2 Turner Park	08/18/07		9/5/07	08/18/09		9/4/08	
PHA Wide	08/18/07		9/5/07	08/18/09		9/4/08	

Signature of Executive Director

Date

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

2 To be completed for the Performance and Evaluation Report.

Annual Statement / Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Capital Fund Program(CFP) Part I: Summary

Office of Public and Indian Housing

PHA Name:

Comprehensive Grant Number

FF

Housing Authority of the City of Hammond of Lake County Indiana

IN36P010501-06

Original Annual Statement

Reserve for Disasters/Emergencies

Revised Annual Statement/Revision Number: **6 Dated 7/3/08**

Performance and Evaluation Report for Program Year Ending

Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual	
		Original	Revised (1)	Obligated	
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 20)	229,156.00	229,156.00	229,156.00	
3	1408 Management Improvements	107,624.00	107,624.00	107,624.00	
4	1410 Administration	114,578.00	114,578.00	116,923.78	
5	1411 Audit	2,000.00	2,000.00	2,000.00	
6	1415 Liquidated Damages	0.00	0.00	0.00	
7	1430 Fees and Costs	80,000.00	35,379.41	35,379.41	
8	1440 Site Acquisition	0.00	0.00	0.00	
9	1450 Site Improvement	27,000.00	152,951.72	152,951.72	
10	1460 Dwelling Structures	425,422.00	436,191.38	433,845.60	
11	1465.1 Dwelling Equipment-Nonexpendable	20,000.00	22,122.38	22,122.38	
12	1470 Non-dwelling Structures	10,700.00	10,941.61	10,941.61	
13	1475 Non-dwelling Equipment	104,300.00	104,024.00	104,024.00	
14	1485 Demolition	91,941.00	0.00	0.00	
15	1490 Replacement Reserve	0.00	0.00	0.00	
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	
17	1495.1 Relocation Costs	30,000.00	27,752.50	27,752.50	
18	9000 Mod Used for Development (CFFP)	0.00	0.00	0.00	
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	
20	Amount of Annual Grant (Sum of lines 2-19)	1,242,721.00	1,242,721.00	1,242,721.00	
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	
22	Amount of line 20 Related to Section 504 Compliance	10,000.00	10,000.00	10,000.00	
23	Amount of line 20 Related to Security	70,000.00	55,000.00	55,000.00	
24	Amount of line 20 Related to Energy Conservation Measures	50,000.00	50,000.00	50,000.00	
Signature of Executive Director		Date		Signature of Public Housing Director/Office of American Programs Administrator	

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

² To be completed for the Performance and Evaluation Report.

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ²
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	01 1406	1	229,156.00	229,156.00	229,156.00	229,156.00	
	Sub Total			229,156.00	229,156.00	229,156.00	229,156.00	
Management Improvements	Drug Enforcement Personnel	01 1408	1	105,000.00	105,000.00	105,000.00	62,789.58	
	Staff Training	01 1408	1	2,624.00	2,624.00	2,624.00	0.00	
	Sub Total			107,624.00	107,624.00	107,624.00	62,789.58	
Administration	Administrative Salaries	01 1410	1	114,578.00	114,578.00	116,923.78	116,923.78	
	Sub Total			114,578.00	114,578.00	116,923.78	116,923.78	
Audit	Audit Costs	01 1411	1	2,000.00	2,000.00	2,000.00	2,000.00	
	Sub Total			2,000.00	2,000.00	2,000.00	2,000.00	
Fees & Costs	Forum Architects	01/02 1430	1	80,000.00	18,864.67	18,864.67	18,864.67	
	Capital Needs Unlimited	01/02 1430	1		16,514.74	16,514.74	16,514.74	
	Sub Total			80,000.00	35,379.41	35,379.41	35,379.41	
Site Improvement	Playground	01 1450	1	750.00	0.00	0.00	0.00	
	Playground	02 1450	1	750.00	0.00	0.00	0.00	
	Tree trimming	01 1450	15	5,500.00	4,400.00	4,400.00	0.00	
	TP Patio Fencing	02 1450	1	20,000.00	21,956.00	21,956.00	21,956.00	
	TP Side Walks	02 1450	1 lot	0.00	9,000.00	9,000.00	9,000.00	
	CC Elect & Gas Service Relocation	01 1450	1	0.00	86,823.00	86,823.00	36,842.00	
	TP Townhomes-remove asphalt areas	02 1450	11	0.00	15,310.00	15,310.00	15,310.00	
	TP Hi-Rise Patio Landscaping	02 1450	1	0.00	15,462.72	15,462.72	0.00	
	Sub Total			27,000.00	152,951.72	152,951.72	83,108.00	
Dwelling Units	Hi-rise remodel	02 1460	119 units	380,400.00	222,812.85	222,812.85	222,812.85	
	TP townhouse roofing	02 1460	4 bldg	45,022.00	168,378.53	166,032.75	51,097.92	
	TP Clean Outs	02 1460	80	0.00	45,000.00	45,000.00	0.00	
	Sub Total			425,422.00	436,191.38	433,845.60	273,910.77	
Dwelling Equip Non-Exp	Stoves & Refrigerators	01 1465	20	5,000.00	7,122.38	7,122.38	3,723.38	
	AC units	01 1465	30	15,000.00	15,000.00	15,000.00	0.00	
	Sub Total			20,000.00	22,122.38	22,122.38	3,723.38	
Non Dwelling Structures	Maintenance Bldg Fence	01 1470	1	5,300.00	5,295.00	5,295.00	5,295.00	
	Maintenance Bldg Flooring	01 1470	1	5,400.00	5,646.61	5,646.61	5,646.61	
	Sub Total			10,700.00	10,941.61	10,941.61	10,941.61	
Non-Dwelling Equip	Computers / Software	01 1475	1 Lot	60,000.00	60,000.00	60,000.00	57,234.98	
	Maintenance Elect Cart	02 1475	1	8,300.00	8,278.00	8,278.00	8,278.00	
	Maintenance Van	01 1475	1	18,000.00	35,746.00	35,746.00	35,746.00	
	Maintenance Van	02 1475	1	18,000.00	0.00	0.00	0.00	
	Sub Total			104,300.00	104,024.00	104,024.00	101,258.98	
Demolition	CC Redevelopment	01 1485	45 units	91,941.00	0.00	0.00	0.00	
	Sub Total			91,941.00	0.00	0.00	0.00	
Relocation Costs		01 1495	0	30,000.00	27,752.50	27,752.50	27,752.50	
	Sub Total			30,000.00	27,752.50	27,752.50	27,752.50	
Mod Used for Development (CFFF)	CC Redevelopment	01 9000	1	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Contingency	Contingency	01 1502	1	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
	Total			1,242,721.00	1,242,721.00	1,242,721.00	946,944.01	

Signature of Executive Director

Date

Signature of Public Housing Director

Date

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.

Previous edition is obsolete

form HUD-52837 (9/98)
 ref Handbook 7485.3

Capital Fund Program(CFP) **Part III: Implementation Schedule**

Office of Public and Indian Housing

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates ²
	Original	Revised ¹	Actual ²	Original	Revised ¹	Actual ²	
IN10-1 Columbia Center	07/18/08			07/18/10			
IN10-2 Turner Park	07/18/08			07/18/10			
PHA Wide	07/18/08			07/18/10			

Signature of Executive Director

Date

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

2 To be completed for the Performance and Evaluation Report.

Annual Statement / Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Capital Fund Program(CFP) Part I: Summary

Office of Public and Indian Housing

PHA Name:

Comprehensive Grant Number

FF

Housing Authority of the City of Hammond of Lake County Indiana

IN36P010501-07

- Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number: **2 dated 9/19/08**
 Performance and Evaluation Report for Program Year Ending
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual	
		Original	Revised (1)	Obligated	
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 20)	120,747.00	120,747.00	120,747.00	
3	1408 Management Improvements	55,000.00	55,000.00	55,000.00	
4	1410 Administration	120,747.00	120,747.00	120,747.00	
5	1411 Audit	2,000.00	2,000.00	2,000.00	
6	1415 Liquidated Damages	0.00	0.00	0.00	
7	1430 Fees and Costs	35,000.00	35,000.00	0.00	
8	1440 Site Acquisition	0.00	0.00	0.00	
9	1450 Site Improvement	107,000.00	107,000.00	458.45	
10	1460 Dwelling Structures	85,000.00	85,000.00	0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	10,000.00	10,000.00	0.00	
12	1470 Non-dwelling Structures	0.00	0.00	0.00	
13	1475 Non-dwelling Equipment	8,000.00	28,515.00	276.21	
14	1485 Demolition	100,000.00	100,000.00	0.00	
15	1490 Replacement Reserve	0.00	0.00	0.00	
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	
17	1495.1 Relocation Costs	143,000.00	143,000.00	0.00	
18	9000 Mod Used for Development (CFFP)	398,466.00	398,466.00	0.00	
19	1502 Contingency (may not exceed 8% of line 20)	22,515.00	0.00	0.00	
20	Amount of Annual Grant (Sum of lines 2-19)	1,207,475.00	1,205,475.00	299,228.66	
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	
22	Amount of line 20 Related to Section 504 Compliance	0.00	0.00	0.00	
23	Amount of line 20 Related to Security	55,000.00	55,000.00	55,000.00	
24	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	
Signature of Executive Director		Date		Signature of Public Housing Director/Office of American Programs Administrator	

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

² To be completed for the Performance and Evaluation Report.

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ^z
				Original	Revised ¹	Funds Obligated ^z	Funds Expended ^z	
PHA Wide	Operations	01 1406	1	120,747.00	120,747.00	120,747.00	120,747.00	
	Sub Total			120,747.00	120,747.00	120,747.00	120,747.00	
Management Improvements	Drug Enforcement Personnel	01 1408	1	55,000.00	55,000.00	55,000.00	0.00	
	Staff Training	01 1408	1	0.00	0.00	0.00	0.00	
	Sub Total			55,000.00	55,000.00	55,000.00	0.00	
Administration	Administrative Salaries	01 1410	1	120,747.00	120,747.00	120,747.00	11,210.72	
	Sub Total			120,747.00	120,747.00	120,747.00	11,210.72	
Audit	Audit Costs	01 1411	1	2,000.00	2,000.00	2,000.00	0.00	
	Sub Total			2,000.00	2,000.00	2,000.00	0.00	
Fees & Costs	A&E Services	01/02 1430	1	35,000.00	35,000.00	0.00	0.00	
	Sub Total			35,000.00	35,000.00	0.00	0.00	
Site Improvement	Playground	01 1450	1	750.00	750.00			
	Playground	02 1450	1	750.00	750.00	0.00	0.00	
	Tree trimming	01 1450	15	5,500.00	5,500.00	0.00	0.00	
	TP Townhome Cleanouts	02 1450	80 units	0.00	0.00	0.00	0.00	
	CC Parking Lot Expansion	01 1450	1	100,000.00	100,000.00			
	Sub Total			107,000.00	107,000.00	0.00	0.00	
Dwelling Units	TP Townhome Roofing	02 1460	80 units	60,000.00	60,000.00	0.00	0.00	
	TP Townhome Exterior Painting	02 1460	80 units	25,000.00	25,000.00			
	Sub Total			85,000.00	85,000.00	0.00	0.00	
Dwelling Equip Non-Exp	Stoves & Refrigerators	01 1465	0	10,000.00	10,000.00	0.00	0.00	
	Sub Total			10,000.00	10,000.00	0.00	0.00	
Non Dwelling Structures		01 1470	0					
	Sub Total			0.00	0.00	0.00	0.00	
Non-Dwelling Equip	Electric Cart	01 1475	0	8,000.00	8,000.00	0.00	0.00	
	Computer Software	01 1475	1 lot	0.00	22,515.00			
	Sub Total			8,000.00	30,515.00	0.00	0.00	
Demolition	CC Development	01 1485	45 units	100,000.00	100,000.00	0.00	0.00	
	Sub Total			100,000.00	100,000.00	0.00	0.00	
Relocation Costs	CC Redevelopment Phase 2	01 1495	68 units	143,000.00	143,000.00	0.00	0.00	
	Sub Total			143,000.00	143,000.00	0.00	0.00	
Mod Used for Development (CFFP)	CC Redevelopment	01 9000	1	398,466.00	398,466.00	0.00	0.00	
	Sub Total			398,466.00	398,466.00	0.00	0.00	
Contingency	Contingency	01 1502	1	22,515.00	0.00	0.00	0.00	
	Sub Total			22,515.00	0.00	0.00	0.00	
	Total			1,207,475.00	1,207,475.00	298,494.00	131,957.72	

Signature of Executive Director

Date

Signature of Public Housing Director

Date

Capital Fund Program(CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates ²
	Original	Revised ¹	Actual ²	Original	Revised ¹	Actual ²	
IN10-1 Columbia Center	07/18/09	9/13/2009		07/18/11	9/12/2011		
IN10-2 Turner Park	07/18/09	9/13/2009		07/18/11	9/12/2011		
PHA Wide	07/18/09	9/13/2009		07/18/11	9/12/2011		

Signature of Executive Director

Date

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

2 To be completed for the Performance and Evaluation Report.

Annual Statement / Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Capital Fund Program(CFP) Part I: Summary

Office of Public and Indian Housing

PHA Name:

Comprehensive Grant Number

FF

Housing Authority of the City of Hammond of Lake County Indiana

IN36P010501-08

- Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number: **1 Dated 5/15/08**
 Performance and Evaluation Report for Program Year Ending
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual	
		Original	Revised (1)	Obligated	
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 20)	120,747.00	117,159.00	0.00	
3	1408 Management Improvements	60,000.00	60,000.00	0.00	
4	1410 Administration	0.00	0.00	0.00	
5	1411 Audit	5,000.00	5,000.00	0.00	
6	1415 Liquidated Damages	0.00	0.00	0.00	
7	1430 Professional Services	50,000.00	20,000.00	0.00	
8	1440 Site Acquisition	0.00	0.00	0.00	
9	1450 Site Improvement	30,000.00	0.00	0.00	
10	1460 Dwelling Structures	270,000.00	26,930.00	0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	10,000.00	5,499.00	0.00	
12	1470 Non-dwelling Structures	0.00	0.00	0.00	
13	1475 Non-dwelling Equipment	10,000.00	0.00	0.00	
14	1485 Demolition	100,000.00	0.00	0.00	
15	1490 Replacement Reserve	0.00	0.00	0.00	
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	
17	1495.1 Relocation Costs	100,000.00	0.00	0.00	
18	1498 Mod Used for Development	398,466.00	897,747.00	0.00	
19	1502 Contingency (may not exceed 8% of line 20)	53,262.00	39,264.00	0.00	
20	Amount of Annual Grant (Sum of lines 2-19)	1,207,475.00	1,171,599.00	0.00	
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	
22	Amount of line 20 Related to Section 504 Compliance	0.00	0.00	0.00	
23	Amount of line 20 Related to Security	55,000.00	55,000.00	0.00	
24	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	
Signature of Executive Director		Date	Signature of Public Housing Director/Office of American Programs Administrator		

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

² To be completed for the Performance and Evaluation Report.

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ²
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	01 1406	1	120,747.00	117,159.00	0.00	0.00	
	Sub Total			120,747.00	117,159.00	0.00	0.00	
Management Improvements	Security	01 1408	1	55,000.00	55,000.00	0.00	0.00	
	Staff Training	01 1408	1	5,000.00	5,000.00	0.00	0.00	
	Sub Total			60,000.00	60,000.00	0.00	0.00	
Administration	0	01 1410	1	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Audit	Audit Costs	01 1411	1	5,000.00	5,000.00	0.00	0.00	
	Sub Total			5,000.00	5,000.00	0.00	0.00	
Fees & Costs	Professional Services	01/02 1430	1	50,000.00	20,000.00	0.00	0.00	
	Sub Total			50,000.00	20,000.00	0.00	0.00	
Site Improvement	CC Landscaping		1	7,500.00	0.00	0.00		
	TP Landscaping		1	7,500.00	0.00	0.00		
	CC Utilities		1	15,000.00	0.00	0.00		
	Sub Total			30,000.00	0.00	0.00	0.00	
Dwelling Units	TP Townhome Roofing	02 1460	14 buildings	100,000.00	0.00	0.00	0.00	
	Hi-Rise Re-Roofing	02 1460	1 Bldg	170,000.00	0.00	0.00		
	Hi-Rise Power Wash Exterior	02 1460	1 Bldg	0.00	4,800.00	0.00		
	Hi-Rise Reglazing Windows	02 1460	20 units	0.00	1,905.00	0.00		
	Hi-Rise Entry and Closet Doors	02 1460	20 units	0.00	4,948.00	0.00		
	Hi-Rise Allowance for 504	02 1465		0.00	1,475.00	0.00		
	TP Townhome Entry Doors	02 1460	20	0.00	7,600.00	0.00		
	TP Townhome Window Glazing	02 1460	20	0.00	2,162.00	0.00		
	TP Townhome Hot Water Tanks	02 1460	10	0.00	3,040.00	0.00		
	TP Townhome Allowance for 504	02 1460		0.00	1,000.00	0.00		
	Sub Total			270,000.00	26,930.00	0.00	0.00	
Dwelling Equip Non-Exp	Stoves & Refrigerators	01 1465	2	6,000.00	650.00	0.00	0.00	
	Hi-Rise AC Units	02 1465	20	4,000.00	3,029.00	0.00	0.00	
	Hi-Rise Ranges	02 1465	10	0.00	1,820.00	0.00		
	Sub Total			10,000.00	5,499.00	0.00	0.00	
Non Dwelling Structures		01 1470	0	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Non-Dwelling Equip	Computers / Software	01 1475	0	10,000.00	0.00	0.00	0.00	
	Sub Total			10,000.00	0.00	0.00	0.00	
Demolition	CC Development	01 1485	45 units	100,000.00	0.00	0.00	0.00	
	Sub Total			100,000.00	0.00	0.00	0.00	
Relocation Costs	CC Redevelopment	01 1495	45 Units	100,000.00	0.00	0.00	0.00	
	Sub Total			100,000.00	0.00	0.00	0.00	
Mod Used for Development	CC Redevelopment	01 1498	1	398,466.00	897,747.00	0.00	0.00	
	Sub Total			398,466.00	897,747.00	0.00	0.00	
Contingency	Contingency	01 1502	1	53,262.00	39,264.00	0.00	0.00	
	Sub Total			53,262.00	39,264.00	0.00	0.00	
	Total			1,207,475.00	1,171,599.00	0.00	0.00	

Signature of Executive Director

Date

Signature of Public Housing Director

Date

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

Previous edition is obsolete

form HUD-52837 (9/98)
 ref Handbook 7485.3

Capital Fund Program(CFP) **Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates ²
	Original	Revised ¹	Actual ²	Original	Revised ¹	Actual ²	
IN10-1 Columbia Center	07/18/10	6/13/2010		07/18/10	6/13/2012		
IN10-2 Turner Park	07/18/10	6/13/2010		07/18/12	6/13/2012		
PHA Wide	07/18/10	6/13/2010		07/18/12	6/13/2012		

Signature of Executive Director

Date

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

2 To be completed for the Performance and Evaluation Report.

Annual Statement / Performance and Evaluation Report

U.S. Department of Housing and Urban Development

Capital Fund Program(CFP) Part I: Summary

Office of Public and Indian Housing

PHA Name:

Comprehensive Grant Number

FF

Housing Authority of the City of Hammond of Lake County Indiana

IN36P010501-09

- Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number:
 Performance and Evaluation Report for Program Year Ending
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual	
		Original	Revised (1)	Obligated	
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 20)	117,159.00	0.00	0.00	
3	1408 Management Improvements	60,000.00	0.00	0.00	
4	1410 Administration	0.00	0.00	0.00	
5	1411 Audit	5,000.00	0.00	0.00	
6	1415 Liquidated Damages	0.00	0.00	0.00	
7	1430 Professional Services	20,000.00	0.00	0.00	
8	1440 Site Acquisition	0.00	0.00	0.00	
9	1450 Site Improvement	79,933.00	0.00	0.00	
10	1460 Dwelling Structures	148,072.00	0.00	0.00	
11	1465 Dwelling Equipment-Nonexpendable	5,499.00	0.00	0.00	
12	1470 Non-dwelling Structures	0.00	0.00	0.00	
13	1475 Non-dwelling Equipment	0.00	0.00	0.00	
14	1485 Demolition	0.00	0.00	0.00	
15	1490 Replacement Reserve	0.00	0.00	0.00	
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	
17	1495 Relocation Costs	0.00	0.00	0.00	
18	1498 Mod Used for Development	696,672.00	0.00	0.00	
19	1502 Contingency (may not exceed 8% of line 20)	39,264.00	0.00	0.00	
20	Amount of Annual Grant (Sum of lines 2-19)	1,171,599.00	0.00	0.00	
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	
22	Amount of line 20 Related to Section 504 Compliance	0.00	0.00	0.00	
23	Amount of line 20 Related to Security	55,000.00	0.00	0.00	
24	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	
Signature of Executive Director		Date	Signature of Public Housing Director/Office of American Programs Administrator		

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

² To be completed for the Performance and Evaluation Report.

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

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ⁴
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	01 1406	1	117,159.00	0.00	0.00	0.00	
	Sub Total			117,159.00	0.00	0.00	0.00	
Management Improvements	Security	01 1408	1	55,000.00	0.00	0.00	0.00	
	Staff Training	01 1408	1	5,000.00	0.00	0.00	0.00	
	Sub Total			60,000.00	0.00	0.00	0.00	
Administration	0	01 1410	1	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Audit	Audit Costs	01 1411	1	5,000.00	0.00	0.00	0.00	
	Sub Total			5,000.00	0.00	0.00	0.00	
Fees & Costs	Professional Services	01/02 1430	1	20,000.00	0.00	0.00	0.00	
	Sub Total			20,000.00	0.00	0.00	0.00	
Site Improvement	CC Landscaping	01 1450	1	0.00	0.00	0.00	0.00	
	TP Landscaping	02 1450	1	10,000.00	0.00	0.00	0.00	
	Hi-rise Paving/Sidewalks	02 1450	1 lot	45,975.00				
	TP Townhome Paving/Sidewalks	02 1450	1 lot	23,958.00				
	Sub Total			79,933.00	0.00	0.00	0.00	
Dwelling Units	Hi-Rise Programmable Temp Controls	02 1460	118 Units	14,750.00	0.00	0.00	0.00	
	Hi-Rise Re-Roofing	02 1460	1 Bldg	90,152.00	0.00	0.00	0.00	
	Hi-Rise Power Wash Exterior	02 1460	1 Bldg	4,800.00	0.00	0.00	0.00	
	Hi-Rise Reglazing Windows	02 1460	20 units	1,905.00	0.00	0.00	0.00	
	Hi-Rise Entry and Closet Doors	02 1460	20 units	4,948.00	0.00	0.00	0.00	
	Hi-rise Multi Purpose Room Rehab	02 1460	1	6,240.00				
	Hi-Rise Allowance for 504	02 1465		1,475.00	0.00	0.00	0.00	
	TP Townhome Entry Doors	02 1460	20	7,600.00	0.00	0.00	0.00	
	TP Townhome Window Glazing	02 1460	20	2,162.00	0.00	0.00	0.00	
	TP Townhome Hot Water Tanks	02 1460	10	3,040.00	0.00	0.00	0.00	
	TP Townhome Programmable Temp Controls	02 1460	80	10,000.00				
	TP Townhome Allowance for 504	02 1460		1,000.00	0.00	0.00	0.00	
	Sub Total			148,072.00	0.00	0.00	0.00	
Dwelling Equip Non-Exp	Stoves & Refrigerators	01 1465	2	650.00	0.00	0.00	0.00	
	Hi-Rise AC Units	02 1465	20	3,029.00	0.00	0.00	0.00	
	Hi-Rise Ranges/Hoods	02 1465	10	1,820.00	0.00	0.00	0.00	
	Sub Total			5,499.00	0.00	0.00	0.00	
Non Dwelling Structures		01 1470	0	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Non-Dwelling Equip		01 1475	0	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Demolition	CC Development	01 1485	0	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Relocation Costs	CC Redevelopment	01 1495	0	0.00	0.00	0.00	0.00	
	Sub Total			0.00	0.00	0.00	0.00	
Mod Used for Development	CC Redevelopment	01 1498	1	696,672.00	0.00	0.00	0.00	
	Sub Total			696,672.00	0.00	0.00	0.00	
Contingency	Contingency	01 1502	1	39,264.00	0.00	0.00	0.00	
	Sub Total			39,264.00	0.00	0.00	0.00	
Total				1,171,599.00	0.00	0.00	0.00	

Signature of Executive Director

Date

Signature of Public Housing Director

Date

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

Capital Fund Program(CFP) **Part III: Implementation Schedule**

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates ²
	Original	Revised ¹	Actual ²	Original	Revised ¹	Actual ²	
IN10-1 Columbia Center	07/18/11			07/18/13			
IN10-2 Turner Park	07/18/11			07/18/13			
PHA Wide	07/18/11			07/18/13			

Signature of Executive Director

Date

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.

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages - Work Activities

Housing Authority of the City of Hammond of Lake County India
IN36P010501-09

Activities for Year 1 2009	Activities for Year: 2 FFY Grant: 2010			Activities for Year: 3 FFY Grant: 2011 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See Annual Statement	IN10-1 Columbia Center	Mod used for Development	835,225.00	IN10-1 Columbia Center	Mod used for Development	849,075.00
		Relocation	0.00		Relocation	0.00
		Demolition	0.00		Demolition	0.00
		Unit Rehab	0.00		Unit Rehab	0.00
		Stoves & Refrigerators	650.00		Stoves & Refrigerators	650.00
	Total for Columbia Center:		835,875.00	Total for Columbia Center:		849,725.00
	IN10-2 Turner Park	Hi-rise Reglazing	1,905.00	IN10-2 Turner Park	Hi-rise Reglazing	1,905.00
		Hi-Rise Common Areas Rehab	9,000.00		Hi-Rise Entry and Closet Doors	4,948.00
		Hi-Rise Security Cameras	3,850.00		Hi-Rise Rangesoods	1,829.00
		Hi-Rise Entry and Closet Doors	4,948.00		Hi-Rise Unit A/C Units	3,029.00
Hi-Rise Rangesoods		1,829.00	Hi-Rise Allowance for 504		1,475.00	
Hi-Rise Allowance for 504		1,475.00	TP Townhome Entry Doors		7,600.00	
Hi-Rise Unit A/C Units		3,029.00	TP Townhome Window Glazing		2,162.00	
TP Townhome Entry Doors		7,600.00	TP Townhome Hot Water Tanks		3,040.00	
TP Townhome Window Glazing		2,162.00	TP Townhome Allowance for 504		1,000.00	
TP Townhome Hot Water Tanks		3,040.00				
TP Townhome Allowance for 504	1,000.00					
Total for Turner Park:		39,838.00	Total for Turner Park:		25,988.00	
HHA Wide Soft Costs	Operations	117,159.00	HHA Wide Soft Costs	Operations	117,159.00	
	Management Improvements	60,000.00		Management Improvements	60,000.00	
	Administration	0.00		Administration	0.00	
	Audit	5,000.00		Audit	5,000.00	
	A&E Fees	20,000.00		A&E Fees	20,000.00	
	Contingency	93,727.00		Contingency	93,727.00	
Total for Administration:		295,886.00	Total for Administration:		295,886.00	
Total CFP Estimated Cost		1,171,599.00	Total CFP Estimated Cost		1,171,599.00	

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages - Work Activities

Housing Authority of the City of Hammond of Lake County India
IN36P010501-09

Activities for Year: 4 FFY Grant: 2012			Activities for Year: 5 FFY Grant: 2013		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
IN10-1 Columbia Center	Mod used for Development	716,809.00	IN10-1 Columbia Center	Mod used for Development	706,769.00
	Relocation	0.00		Relocation	0.00
	Demolition	0.00		Demolition	0.00
	Unit Rehab	0.00		Unit Rehab	0.00
	Stoves & Refrigerators	650.00		Stoves & Refrigerators	0.00
Total for Columbia Center:		717,459.00	Total for Columbia Center:		706,769.00
IN10-2 Turner Park	Hi-rise Reglazing	1,905.00	IN10-2 Turner Park	Hi-rise Reglazing	1,905.00
	Hi-Rise Entry and Closet Doors	4,948.00		Hi-Rise Entry and Closet Doors	4,898.00
	Hi-Rise Rangesoods	1,829.00		Hi-Rise Rangesoods	1,829.00
	Hi-Rise Unit A/C Units	3,029.00		Hi-Rise Unit A/C Units	3,029.00
	Hi-Rise Allowance for 504	1,475.00		Hi-Rise Allowance for 504	1,475.00
	Hi-Rise 4th Floor Heat/Vent	6,750.00		Hi-Rise Fire Alarm System Controls	9,250.00
	TP Townhome Entry Doors	7,600.00		TP Townhome Entry Doors	7,600.00
	TP Townhome Window Glazing	2,162.00		TP Townhome Window Glazing	2,162.00
	TP Townhome Hot Water Tanks	3,040.00		TP Townhome Hot Water Tanks	3,040.00
	TP Townhome Allowance for 504	1,000.00		TP Townhome Allowance for 504	1,000.00
	TP Townhome Landscaping	8,000.00		TP Townhome Dumpster Enclosures	4,000.00
	TP Townhome Interior Passage Doors	11,220.00		TP Townhome Interior Passage Doors	11,220.00
	TP Townhome Interior Closet Doors	13,340.00		TP Townhome Interior Closet Doors	13,340.00
	TP Townhome VCT Floors	45,826.00		TP Townhome VCT Floors	45,826.00
TP Townhome Kitchen Rehab	46,130.00	TP Townhome Kitchen Rehab	46,130.00		
TP Townhome Kitchen Rehab	46,130.00	TP Community Space	12,240.00		
Total for Turner Park:		158,254.00	Total for Turner Park:		168,944.00
HHA Wide Soft Costs	Operations	117,159.00	HHA Wide Soft Costs	Operations	117,159.00
	Management Improvements	60,000.00		Management Improvements	60,000.00
	Administration	0.00		Administration	0.00
	Audit	5,000.00		Audit	5,000.00
	A&E Fees	20,000.00		A&E Fees	20,000.00
	Contingency	93,727.00		Contingency	93,727.00
Total for Administration:		295,886.00	Total for Administration:		295,886.00
Total CFP Estimated Cost		1,171,599.00	Total CFP Estimated Cost		1,171,599.00

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name Housing Authority of the City of Hammond of Lake County Indiana				<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No.:	
Development IN36P010501-09	Year 1 2009	Work Statement for Year 2 FFY Grant: 2010 PHA FY:	Work Statement for Year 3 FFY Grant: 2011 PHA FY:	Work Statement for Year 4 FFY Grant: 2012 PHA FY:	Work Statement for Year 5 FFY Grant: 2013 PHA FY:
IN10-1 Columbia Center	See Annual Statement	835,875.00	849,725.00	717,459.00	706,769.00
IN10-2 Turner Park		39,838.00	25,988.00	158,254.00	168,944.00
PHA Wide		295,886.00	295,886.00	295,886.00	295,886.00
CFP Funds Listed for 5 year	1,171,599.00	1,171,599.00	1,171,599.00	1,171,599.00	1,171,599.00
Planning					
Replacement Housing Factor Funds	102,845.00	102,845.00	102,845.00	102,845.00	102,845.00