

*Church Point Housing
Authority
Church Point, Louisiana
2009 Plan*

Version 02

1.0	PHA Information PHA Name: <u>Church Point Housing Authority</u> PHA Code: <u>LA032</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2009</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>123</u> Number of HCV units: <u>88</u>												
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1" data-bbox="1214 598 1453 716"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
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:												
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.												
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.												
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.												
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.												
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.												

9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

Annual Statement/ Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number			FFY of Grant:
		Capital Fund Program Grant No.: <i>LA48P032501-09</i>			<i>2009</i>
		Replace Housing Factor Grant No.:			FFY of Grant Approval:
		Date of CFFP:			
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	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		\$ 17,988.00	\$ -	\$ -
3	1408 Management Improvements Soft Costs				
4	1410 Administration (May not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$ 13,978.00	\$ 12,000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 161,990.00	\$ 109,892.00		
11	1465.1 Dwelling Equipment - Non Expendable		\$ 40,000.00		
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

Annual Statement/ Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No.: <i>LA48P032501-09</i> Replace Housing Factor Grant No.: Date of CFFP:			FFY of Grant: <i>2009</i> FFY of Grant	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Amount	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18b	9000 Collateralization or Debt Service paid via System of Direct Payment					
19	1502 Contingency (May not exceed 8% of line 21)					
20	Amount of Annual Grant (Sum of Lines 2-19)	\$ 175,968.00	\$ 179,880.00	\$ -	\$ -	
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Section 504 Compliance					
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		Signature of Public Housing Director		
				Date		

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

Capital Fund Program Five-Year Action Plan						
Part I: Summary						
PHA Name/ Number: <i>Church Point Housing Authority</i>			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 4			
A.	Development Number/Name/ HA-Wide	Workstatement Year 1	Work Statement For Year 2	Work Statement For Year 2	Work Statement For Year 2	Work Statement For Year 2
			FFY Grant: 2010	FFY Grant: 2011	FFY Grant: 2012	FFY Grant: 2013
B.	Physical Improvements	Annual Statement	\$ 161,539.00	\$ 161,539.00	\$ 161,539.00	\$ 161,539.00
C.	Mgmt. Improvements		\$0.00	\$0.00	\$0.00	\$0.00
D.	PHA Wide Non-dwelling Structure and Equipment		\$0.00	\$0.00	\$0.00	\$0.00
E.	Administration		\$0.00	\$0.00	\$0.00	\$0.00
F.	Other		\$0.00	\$0.00	\$0.00	\$0.00
G.	Operations		\$18,341.00	\$18,341.00	\$18,341.00	\$18,341.00
H.	Demolition					
I.	Development					
J.	Total CFP Funds					
K.	Total NON- CFP Funds					
L.	Grand Total		\$179,880.00	\$179,880.00	\$179,880.00	\$179,880.00
	Replacement Housing Factor Funds					

Annual Statement/ Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No.: <i>LA48S032501-09</i> Replace Housing Factor Grant No.: Date of CFFP:		FFY of Grant: <i>2009-S</i> FFY of Grant	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no.:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	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 Soft Costs				
4	1410 Administration (May not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$ 15,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 213,426.00			
11	1465.1 Dwelling Equipment - Non Expendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Annual Statement/ Performance and Evaluation Report						
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary						
PHA Name: <i>New Roads Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No.: <i>LA48S113501-09</i> Replace Housing Factor Grant No.: Date of CFFP:			FFY of Grant: <i>2009-S</i> FFY of Grant	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no.:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Amount	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18b	9000 Collateralization or Debt Service paid via System of Direct Payment					
19	1502 Contingency (May not exceed 8% of line 21)					
20	Amount of Annual Grant (Sum of Lines 2-19)	\$ <i>228,426.00</i>	\$ -	\$ -	\$ -	
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Section 504 Compliance					
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		Signature of Public Housing Director		
				Date		

Annual Statement/ Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No.: <i>LA48P032501-08</i> Replace Housing Factor Grant No.: Date of CFFP:			FFY of Grant: <i>2008</i> FFY of Grant
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	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 Soft Costs				
4	1410 Administration (May not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$ 14,492.00	\$ 10,000.00	\$ 10,000.00	
8	1440 Site Acquisition	\$ 165,968.00	\$ 170,460.00	\$ 170,460.00	
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment - Non Expendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Annual Statement/ Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number		FFY of Grant:	
		Capital Fund Program Grant No.: <i>LA48P032501-08</i>		<i>2008</i>	
		Replace Housing Factor Grant No.:		FFY of Grant Approval:	
		Date of CFFP:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid via System of Direct Payment				
19	1502 Contingency (May not exceed 8% of line 21)				
20	Amount of Annual Grant (Sum of Lines 2-19)	\$ 180,460.00	\$ 180,460.00	\$ 180,460.00	\$ -
21	Amount of Line 20 Related to LBP Activities				
22	Amount of Line 20 Related to Section 504 Compliance				
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	Signature of Public Housing Director		Date

**Annual Statement/ Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

PHA Name: <i>Church Point Housing Authority</i>	Grant Type and Number Capital Fund Program Grant No.: <i>LA48P032501-07</i> Replace Housing Factor Grant No.: Date of CFFP:	FFY of Grant: <i>2007</i> FFY of Grant
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Original Annual Statement Reserve for Disaster/ Emergencies Revised Annual Statement (revision no.:)
 Performance and Evaluation Report for Period Ending: *12/31/08* Final Performance and Evaluation Report

Line No.	Summary by Development Amount	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 Soft Costs				
4	1410 Administration (May not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$ 7,098.00	\$ 7,098.00	\$ 7,098.00	\$ 5,450.50
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 128,881.00	\$ 153,881.00	\$ 153,881.00	\$ 71,023.23
11	1465.1 Dwelling Equipment - Non Expendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$ 25,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Annual Statement/ Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No.: <i>LA48P032501-07</i> Replace Housing Factor Grant No.: Date of CFFP:			FFY of Grant: <i>2007</i> FFY of Grant
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no.:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid via System of Direct Payment				
19	1502 Contingency (May not exceed 8% of line 21)				
20	Amount of Annual Grant (Sum of Lines 2-19)	<i>\$ 170,979.00</i>	<i>\$ 170,979.00</i>	<i>\$ 170,979.00</i>	<i>\$ 76,473.73</i>
21	Amount of Line 20 Related to LBP Activities				
22	Amount of Line 20 Related to Section 504 Compliance				
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		Signature of Public Housing Director	
				Date	

Annual Statement/ Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>Church Point Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No.: <i>LA48P032501-06</i> Replace Housing Factor Grant No.: Date of CFFP:			FFY of Grant: <i>2006</i> FFY of Grant
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	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 Soft Costs		\$ 1,500.00	\$ 1,500.00	\$ 1,500.00
4	1410 Administration (May not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	\$ 24,757.00	\$ 23,000.00	\$ 23,000.00	\$ 23,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 13,726.00	\$ 39,350.50	\$ 39,350.50	\$ 39,350.50
10	1460 Dwelling Structures	\$ 112,485.00	\$ 94,117.50	\$ 94,117.50	\$ 94,117.50
11	1465.1 Dwelling Equipment - Non Expendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$ 25,000.00	\$ 18,000.00	\$ 18,000.00	\$ 18,000.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Annual Statement/ Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <i>New Roads Housing Authority</i>		Grant Type and Number			FFY of Grant:
		Capital Fund Program Grant No.: <i>LA48P113501-06</i>			<i>2006</i>
		Replace Housing Factor Grant No.:			FFY of Grant Approval:
		Date of CFFP:			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disaster/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no.: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>12/31/08</i> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Amount	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid via System of Direct Payment				
19	1502 Contingency (May not exceed 8% of line 21)				
20	Amount of Annual Grant (Sum of Lines 2-19)	\$ 175,968.00	\$ 175,968.00	\$ 175,968.00	\$ 175,968.00
21	Amount of Line 20 Related to LBP Activities				
22	Amount of Line 20 Related to Section 504 Compliance				
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		Signature of Public Housing Director	

10 -B. Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

a. Substantial Deviation from the 5-Year Plan

- ✓ *Any change to Mission Statement such as:*
- ✓ *50% deletion from or addition to the goals and objectives as a whole.*
- ✓ *50% or more decrease in the quantifiable measurement of any individual goal or objective*

b. Significant Amendment or Modification to the Annual Plan

- ✓ *50% variance in the funds projected in the Capital Fund Program Annual Statement*
- ✓ *Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement*
- ✓ *Any change in a policy or procedure that requires a regulatory 30-day posting*
- ✓ *Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs*
- ✓ *Any change inconsistent with the local, approved Consolidated Plan*

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.