

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 to certain 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.

Berwick Housing Authority

Streamlined Annual Plan for Fiscal Year 2009

Submission of:

Proposed Annual Statement: FY 2009 Capital Fund Program

Proposed 5-Year Action Plan: FY 2009 - FY 2013 Capital Fund Program

Performance and Evaluation Reports

FY 2005 Capital Fund Program [LA48P 056 50105]
Final Performance and Evaluation Report - Period Ending 12/31/07

FY 2006 Capital Fund Program [LA48P 056 50106]
Performance and Evaluation Report - Period Ending 06/30/08

FY 2007 Capital Fund Program [LA48P 056 50107]
Performance and Evaluation Report - Period Ending 06/30/08

FY 2008 Capital Fund Program [LA48P 056 50108]
Performance and Evaluation Report - Period Ending 06/30/08

FY 2008 Capital Fund Replacement Program [LA48R 056 50108]
Performance and Evaluation Report - Period Ending 06/30/08

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. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.

Streamlined Annual PHA Plan Agency Identification

PHA Name: Berwick Housing Authority

PHA Number: 056

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

PHA Programs Administered:

- Public Housing and Section 8**
 Section 8 Only
 Public Housing Only
 Number of public housing units:
 Number of S8 units:
 Number of public housing units:
 Number of S8 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:				

Public Access to Information

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

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans and attachments (if any) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the 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

PHA Fiscal Year 2009

[24 CFR Part 903.12(b)]

Table of Contents

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

A. ANNUAL STREAMLINED PHA PLAN COMPONENTS

<input type="checkbox"/>	1. Site-Based Waiting List Policies 903.7(b)(2) Policies on Eligibility, Selection, and Admissions	
<input checked="" type="checkbox"/>	2. Capital Improvement Needs 903.7(g) Statement of Capital Improvements Needed	
<input type="checkbox"/>	3. Section 8(y) Homeownership 903.7(k)(1)(i) Statement of Homeownership Programs	
<input type="checkbox"/>	4. Project-Based Voucher Programs	
<input type="checkbox"/>	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.	
<input checked="" type="checkbox"/>	6. Supporting Documents Available for Review	10
<input checked="" type="checkbox"/>	7. FY 2009 Capital Fund Program and Capital Fund Program Attachment "B" : Capital Fund Program Annual Statement	12
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<input checked="" type="checkbox"/>	9. Performance and Evaluation Reports Attachment "D" : Performance and Evaluation Report – (12/31/07) FY 2005 Capital Fund Program [File name: LA056d01] pdf	14
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<input checked="" type="checkbox"/>	9. Other Attachments Attachment "I": PHA efforts for Violence Against Women Act (VAWA)	19
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B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;

Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.

For PHAs APPLYING FOR CAPITAL FUND PROGRAM (CFP) GRANTS:

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

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

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

Executive Summary (optional)

[903.7(r)]. If desired, provide a brief overview of the contents of the streamlined Annual Plan.

Berwick is located across the Atchafalaya River from Morgan City and is considered part of the hub of the offshore oil industry. It is the oldest settlement in St. Mary Parish with a population of approx 4,375 persons. Approximately 6% of the households in the Town live in public housing. The Housing Authority (HA) has a total of 128 units in nine locations in the Town, several of which are only a few units on scattered sites. The larger of the developments contains 50 units on contiguous sites, all of which are duplexes. That development contains a horseshoe shaped street named Guzzetta Drive, which provides the most police calls of any neighborhood in the Town. The development is located on the edge of a mixed population neighborhood.

A primary objective of the 2009 Annual Plan is to continue to improve management capabilities of the Housing Authority to maintain newly regained high performer designation. To that end the BHA shall continue to provide training to its staff to improve the physical condition of its stock and improve its preventive maintenance procedures. The housing authority experienced substantial damage to some of its buildings as a result of Hurricane Gustave and is in the process of addressing that.

In recent years, the BHA has completed three modernization contracts and presently has a fourth modernization program underway which includes a portion of the work included in the phased plan for re-roofing of the agency's apartments. These projects were part of initiatives outlined in earlier Annual Plans which focused on the newly established resident's council, particularly in the constructing the long delayed resident's center at the rear of the administrative office. A significant part of the planning for physical improvements will be the need to address the roof damage situation and the continuation of the phased plan for dwelling modernization.

The 2009 Annual Plan has been developed with input and participation of the residents and is consistent with the State Consolidated Plan, and no changes were made since last years plan.

After duly advertising, the Berwick Housing Authority (BHA) held a public hearing on October 10, 2008, for the 2009 Annual Plan to fully explain the plan to those in attendance. The BHA

welcomes resident and public input on its Agency Plan.

Strategy for Addressing Needs

An analysis of the applicants currently on the BHA waiting list, indicates a 12% increase in applicants from last year. Commensurate with that, those are extremely low income families (at or below 30% AMI), also increased from 41% of applicants to 60%. Almost 37% of applicants are very low-income families (Compared to 44% last year), and families with children comprise 47% of the applicants down from 56% last year. With regard to unit size the number requesting 1 BR units is still nearly twice that for 2 BR units, of which the numbers are similar to last year. The percentage of white families on the waiting list as compared to last year increased dramatically 47% to 74% of applicants. The Town of Berwick is remote from the areas of focus of State's Consolidated Plan and other marketing studies for housing, and the PHA waiting list is a more accurate resource to evaluate housing needs for lower income families in the jurisdiction.

The BHA follows a policy to provide for de-concentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward that end, the BHA will skip families on the waiting list to reach other families with a lower or higher income. This policy is implemented in a uniform and non-discriminating manner.

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?
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

- a. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 12 and 13 of this template (Capital Fund Program tables). If no, skip to B.
- b. 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.).

See Attachments “B” and “C”: FY 2009 Capital Fund Program Annual Statement and 5-Year CFP Action Plan
Berwick Housing Authority

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:	
	<input type="checkbox"/> Revitalization Plan under development
	<input type="checkbox"/> Revitalization Plan submitted, pending approval
	<input type="checkbox"/> Revitalization Plan approved
	<input type="checkbox"/> 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:

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:

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:

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? ___

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:

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

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) State of Louisiana

There were no changes in the PHA’s program or policies since the last Annual Plan submission in 2008.

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
X	<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>	Standard 5 Year and Annual Plans; streamlined 5 Year Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan.	5 Year Plans
	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
X	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
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	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
	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
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
	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
X	Schedule of flat rents offered at each public housing development. <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
	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 type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	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
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Consortium agreement(s).	Annual Plan: Agency Identification and Operations/ Management
X	Public housing grievance procedures <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
	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
X	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
	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
	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
X	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
X	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
	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	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
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Pet Policy
X	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
	Consortium agreement(s), if a consortium administers PHA programs.	Joint PHA Plan for Consortia
	Consortia Joint PHA Plans ONLY: 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 PHA Plan for Consortia
	Other supporting documents (optional). List individually.	(Specify as needed)

7. Capital Fund Program and Capital Fund Program Replacement Housing Factor Annual Statement/Performance and Evaluation Report

**Attachment “B” : FY 2009 Capital Fund Program Annual Statement
Berwick Housing Authority**

This Attachment Submitted as a Separate File Named: LA056b01 pdf

This attachment also submitted in hard copy by mail.

8. Capital Fund Program Five-Year Action Plan

Attachment “C” : FY 2009 Capital Fund Program 5-Year Action Plan Berwick Housing Authority

This Attachment Submitted as a Separate File Named: LA056c01 pdf

This attachment also submitted in hard copy by mail.

9. Performance and Evaluation Reports

Attachment “D” :
Berwick Housing Authority

**FY 2005 Capital Fund Program [LA48P 056 50105]
Performance and Evaluation Report
Period Ending 12/31/07**

This Attachment Submitted as a Separate File Named: LA056d01 pdf

This attachment also submitted in hard copy by mail.

Attachment “E” :
Berwick Housing Authority

FY 2006 Capital Fund Program [LA48P 056 50106]
Performance and Evaluation Report
Period Ending 06/30/08

This Attachment Submitted as a Separate File Named: LA056e01 pdf

This attachment also submitted in hard copy by mail.

Attachment “F”:
Berwick Housing Authority

**FY 2007 Capital Fund Program [LA48P 056 50107]
Performance and Evaluation Report
Period Ending 06/30/08**

This Attachment Submitted as a Separate File Named: LA056f02 pdf

This attachment also submitted in hard copy by mail.

Attachment “G”:
Berwick Housing Authority

**FY 2008 Capital Fund Program [LA48P 056 50108]
Performance and Evaluation Report
Period Ending 06/30/08**

This Attachment Submitted as a Separate File Named: LA056g02 pdf
This attachment also submitted in hard copy by mail.

Attachment “H”:
Berwick Housing Authority

FY 2008 Capital Fund Program [LA48R 056 50108]
Performance and Evaluation Report
Period Ending 06/30/08

Replacement

This Attachment Submitted as a Separate File Named: LA056h01 pdf
This attachment also submitted in hard copy by mail.

Attachment “I”: PHA efforts for Violence Against Women Act (VAWA) Berwick Housing Authority

Berwick Housing Authority The Violence Against Women Act

The Violence Against Women Act (VAWA) of 2005 is an amended version of the 1994 VAWA, which provides new protections for victims of domestic violence, dating violence or stalking. These protections include provisions protecting victims who live in public housing or who are receiving housing assistance under the federal housing voucher program.

Protections provided by VAWA and the Berwick Housing Authority are:

1. The Berwick Housing Authority will not deny assistance to any victim of domestic violence, dating violence, or stalking if you are otherwise qualified to receive such assistance.
2. The Berwick Housing Authority will not terminate assistance to those who are currently receiving federal housing assistance solely on the basis of their status as a victim of domestic violence, dating violence, or stalking.

In summary, VAWA prevents housing agencies and owners from considering actual or threatened domestic violence, dating violence, or stalking as a cause for terminating the tenancy, occupancy, or program assistance of the victim. Such violence or stalking may not be considered:

1. as a serious or repeated violation of the lease by the victim,
2. as other good cause for terminating the occupancy rights of the victim, or
3. as criminal activity justifying the termination of the occupancy rights, or program assistance of the victim.

If the perpetrator is a member of the victim’s household, the Berwick Housing Authority has the authority to require the individual to leave the household as a condition of providing continued assistance to the remaining members of the family.

LIMITATIONS OF VAWA:

The Berwick Housing Authority retain the authority to terminate the occupancy, or program assistance of a victim under either of the following conditions:

1. The termination is for a lease violation premised on something other than an act of domestic violence, dating violence or stalking against the victim and the Berwick Housing Authority is holding the victim to a standard no more “demanding” than the standard to which other tenants are held.
2. The Berwick Housing Authority can demonstrate an “actual and imminent threat to other tenants or those employed at or providing service to the property” if the occupancy, or program assistance of victim is not terminated.

CERTIFICATION OF VICTIM STATUS:

VAWA gives the Berwick Housing Authority the discretion to provide benefits to an individual based solely on the individual’s statement or other corroborating evidence. However, the Act also permits the Berwick Housing Authority to request that the victims attest to their status by signing a certification form. The form must meet the following standards:

1. It must require the individual signing to certify that she/he is the victim of incidents of actual or threaten domestic violence, dating violence, or stalking, as defined and described in VAWA.
2. It must include the name of the perpetrator.
3. It must be provided within 14-business day

VAWA provides the victim the alternative of providing the Berwick Authority one of the following types of documentation:

1. A local police or court report
2. Documentation signed by a victim service provider, an attorney, or a medical professional from whom the victim has sought assistance in addressing domestic violence, dating violence or stalking. The signer must attest under penalty of perjury (a) that the abuse the victim has suffered is a bona fide incidence of domestic violence, dating violence, or stalking and (b) that the victim has signed or approved documentation. Failure on the part of the victim to provide certification within the allotted time voids the protections provided by VAWA.

Attachment “J”: PHA Community Service Requirement Berwick Housing Authority

Lease Addendum

Community Service Overview

Community Service is defined as “the Performance of voluntary work or duties that are a public benefit, and that service to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community.” Community service is not employment and may not include political activities.

The Community Service requirements mandate that each non-exempt adult household member contribute eight-hours per month of community service within their community.

Eligible Community Service Activities

Eligible community service activities that can be performed including, but are not limited to:

- Work at a local public or non-profit institution but not limited to: school, Head start, other before or after school program, child care center, hospital, clinic, hospice, nursing home, recreation center, senior center, adult daycare program, homeless shelter, feeding program, food bank (distributing either donated or commodity foods), or clothes closets (distributing donated clothing), etc.
- Work with a non-profit organization that serves PHA residents or their children, including but not limited to: Boy Scouts or Girl Scouts, Boys and Girls Club, 4-H Club, PAL, other children recreation, mentoring, or education programs, Community clean-up programs, Beautification program, etc.
- Work with any other public or non-profit youth or senior organization;
- Work as a member of the Resident Advisory Committee;
- Work at the authority to help with children programs;
- Work at the authority to help with the senior programs;
- Helping neighborhood groups with special projects;
- Caring for the children of other residents so they may volunteer.
- GED classes
- Apprenticeships (formal or informal)
- Budgeting and credit counseling; and
- Carrying out any activity required by the Dept. of Public Assistance as part of Welfare Reform.

Noncompliant Residents

The housing authority will verify annually the residents at least 30 days before the annual reexamination and/or lease expiration; the PHA must begin reviewing the exempt or non-exempt status and compliance of family members. If the housing authority finds a family member in noncompliant, the housing authority must enter into an agreement with noncompliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period. **If, at the next annual re-examination, the family member still is not compliant, the PHA is not permitted to renew the lease and the entire family will have to vacate, unless the noncompliant member agrees to move out of the unit.** The family may use the Authority’s Grievance Procedure to protest the lease termination.

Exempt Residents

The Berwick Housing Authority will identify the residents who are exempt from community service requirements, including persons who are:

- 62 years or older;
- Person with disabilities and certifies that, based on the disability, he or she cannot comply with the requirements;
- Caretakers of a person with disability who has certified that based on the disability, he or she cannot comply the requirements;
- Currently working at least 30 hours per week;
- Certified as exempt from work activities under a State Programs as stated by the Social Security Act or any other welfare state program; and
- Members of a family receiving benefits from a State Welfare Program in compliance with the program's requirements.

Resident Responsibilities

At lease execution or re-examination after the effective date of the adopted policy, all adult members (18 or older) of the Berwick Housing Authority must:

- Provide documentation that they qualify for an exemption, if they claim to be exempt from Community Service requirement; and
- Sign a certification that they have received and read the policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in non-renewal of their lease.

At each annual re-examination, non-exempt family members must present a completed documentation form of activities performed over the previous twelve (12) months. This form will include place for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed. **(See attached sample form).**

If a family member is found to be noncompliant at re-examination, the member and the Head of Household will sign an agreement with the authority to make up the deficient hours over the next twelve-month period.

Change in Exempt Status

When an adult resident's exempt status changes during the year:

- If, during the twelve-month period, a non-exempt person becomes exempt, it is his/her responsibility to report this to the authority and provide documentation.
- If, during the twelve-month period, an exempt person becomes non-exempt, it is his/her responsibility to report this to the authority.

**Annual Statement - Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

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

Part II: Supporting Pages

HA Name: BERWICK HOUSING AUTHORITY			Grant Type and Number				FFY of Grant Approval 2009
			Capital Fund Program Grant No: LA48P 056 50109				
			Replacement Housing Factor Grant No:				
Development	General Description of Major Work Categories	Development Acct. Number	Total Estimated Cost		Total Actual Cost		Status of Propose Work
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA WIDE	1406 OPERATIONS		0.00				
	1408 MANAGEMENT IMPROVEMENTS						
	STAFF/RESIDENT TRAINING		1,500.00				
	MAINT TRAINING		1,000.00				
	TUTOR PROGRAM		5,000.00				
	POLICE SECURITY PATROL		2,500.00				
	RESIDENT PROGRAMS EXPENSE		2,000.00				
	SUMMER YOUTH PROGRAM		2,000.00				
	RESIDENT PROGRAMS COORDINATOR		13,000.00				
	SUB TOTAL SOFT COSTS		27,000.00				
	COMPUTER/OFFICE EQUIP		1,500.00				
	SUB TOTAL HARD COSTS		1,500.00				
	TOTAL MGMT IMPROVEMENTS	1408	28,500.00				
	1410 ADMIN	1410	0.00				
	1430 FEES AND COSTS						
	A. A/E FEES		10,000.00				
	B. CFP GRANT REPORTING		5,000.00				
	C. CFP ANNUAL STATEMENT		2,500.00				
	D. AGENCY PLAN		1,500.00				
	E. ENVIRON REVIEW		1,000.00				
E. PRINTING OF PLANS		1,000.00					
E. ADV/RECORDATION/MISC COSTS		500.00					
	1430	21,500.00					
1465 DWELLING EQUIP							
APPLIANCES	1465	5,500.00					
1475 NON-DWELLING EQUIPMENT							
MAINT EQUIP		1,000.00					
	1475	1,000.00					
1495 RELOCATION	1495	500.00					
1502 CONTINGENCY	1502	0.00					
	PAGE TOTAL	57,000.00	#REF!				

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

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement - Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

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

Part III: Implementation Schedule

HA Name:	BERWICK HOUSING AUTHORITY						Grant Type and Number		FFY of Grant Approval 2009
							Capital Fund Program Grant No: LA48P 056 50109		
							Replacement Housing Factor Grant No:		
Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates		
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)			
LA 56-1	09/30/11			09/30/12					
LA 56-2	09/30/11			09/30/12					
LA 56-3	09/30/11			09/30/12					
PHA WIDE	09/30/11			09/30/12					
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									
Signature of Executive Director and Date						Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

**Five-Year Action Plan
Part I: Summary**

FY 2009 - FY 2013

Attachment "C"

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

BERWICK HA 2009

Capital Fund Program (CFP)

HA Name: BERWICK HOUSING AUTHORITY		Locality: (City/County & State) BERWICK, ST MARY, LOUISIANA		Original <u> X </u>	Revision No. _____
A. DEVELOPMENT NUMBER/NAME	Work Statement For Year 1 FFY: 2009	Work Statement for Year 2 FFY: 2010	Work Statement for Year 3 FFY: 2011	Work Statement for Year 4 FFY: 2012	Work Statement for Year 5 FFY: 2013
GEN SITEWORK		3,000	3,000	5,000	5,000
LA 56-1		5,000	29,000	38,500	64,500
LA 56-2		70,000	31,000	25,000	25,000
LA 56-3		40,000	60,000	30,000	30,000
SUBTOTAL DWELLING IMPROVEMENTS		118,000	123,000	98,500	124,500
APPLIANCES		3,500	3,500	3,500	3,500
NON-DWELLING EQUIP		1,000	1,000	22,000	0
RELOCATION		2,500	2,500	2,500	2,500
B. SUBTOTAL	See Annual Statement	125,000	130,000	126,500	130,500
C. MANAGEMENT IMPROVEMENTS		28,500	28,500	28,500	28,500
D. HA-WIDE NON DWELLING BUILDINGS		5,000	5,000	5,000	5,000
E. ADMINISTRATION			0	0	0
F. FEES AND COSTS		21,500	21,500	21,500	21,500
G. OPERATIONS		0	0	0	0
H. DEMOLITION		0	0	0	0
I. REPLACEMENT RESERVE		0	0	0	0
J. MOD USED FOR DEVELOPMENT		0	0	0	0
K. TOTAL CFP FUNDS		180,000	185,000	181,500	185,500
L. TOTAL NON-CFP FUNDS		0	0	0	0
M. GRAND TOTAL		180,000	185,000	181,500	185,500
Signature of Executive Director and Date			Signature of Public Housing Director/Office of Native American Programs Administrator and Date		
<hr/> CLARENCE ROBINSON JR			<hr/> August 20, 2008		

**Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
Capital Fund Program (CFP)**

OMB Approval No. 2577-0157 (Exp 7/31/98)

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

BERWICK HA 2009

Work Statement FFY: 2009	Activities for Year 2 FFY Grant: 2010 - PHA FY: 2010			Activities for Year 3 FFY Grant: 2011 - PHA FY: 2011		
	of Major Work Categories	Quantity	Estimated Cost	of Major Work Categories	Quantity	Estimated Cost
	PHA WIDE - 1450 SITE IMPROVEMENTS				PHA WIDE - 1450 SITE IMPROVEMENTS	
REPAIR/REPLACE SIDEWALKS FOR VISITABILITY			3,000	REPAIR/REPLACE SIDEWALKS FOR VISITABILITY		3,000
SITEWORK TOTAL			3,000	SITEWORK TOTAL		3,000
LA 56-1 - 1460 PHYSICAL IMPROV				LA 56-1 - 1460 PHYSICAL IMPROV		
MISC REPAIR FROM REAC INSPECTIONS			5,000	MISC REPAIR FROM REAC INSPECTIONS		5,000
1460 SUB TOTAL			5,000	INSTALL 4 CENTRAL A/C SYSTEMS		24,000
				1460 SUB TOTAL		29,000
LA 56-2 - 1460 PHYSICAL IMPROV				LA 56-2 - 1460 PHYSICAL IMPROV		
MISC REPAIR FROM REAC INSPECTIONS			5,000	MISC REPAIR FROM REAC INSPECTIONS		5,000
REPLACE ROOFING			35,000	BATH REPAIR		16,000
FASCIA AND SOFFIT REPAIR			30,000	CABINET REPAIR		10,000
1460 SUB TOTAL			70,000	1460 SUB TOTAL		31,000
LA 56-3 - 1460 PHYSICAL IMPROV				LA 56-3 - 1460 PHYSICAL IMPROV		
REAC SYSTEM REPAIRS			5,000	REAC SYSTEM REPAIRS		5,000
STABILIZATIN OF BUILDING SLABS AND WALLS			25,000	CABINET REPAIR		10,000
DOOR REPLACEMENT			10,000	REPLACE ROOFING		45,000
1460 SUB TOTAL			40,000	1460 SUB TOTAL		60,000
NON DWELLING BUILDINGS				NON DWELLING BUILDINGS		
COMMUNITY BLDG			5,000	COMMUNITY BLDG		5,000
DWELL EQUIP				DWELL EQUIP		
APPLIANCES			3,500	APPLIANCES		3,500
NON DWELL EQUIP				NON DWELL EQUIP		
LAWN/MAINT SHOP EQUIP			1,000	LAWN/MAINT SHOP EQUIP		1,000
			Col Subtotal of Estimated Cost			Col Subtotal of Estimated Cost
			\$127,500			\$132,500

**Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
Capital Fund Program (CFP)**

OMB Approval No. 2577-0157 (Exp 7/31/98)

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

BERWICK HA 2009

Work Statement FFY: 2009	Activities for Year 4			Activities for Year 5		
	FFY Grant: 2012 - PHA FY: 2012			FFY Grant: 2013 - PHA FY: 2013		
	of Major Work Categories	Quantity	Estimated Cost	of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	PHA WIDE - 1450 SITE IMPROVEMENTS			PHA WIDE - 1450 SITE IMPROVEMENTS		
	REPAIR/REPLACE SIDEWALKS FOR VISITABILITY		5,000	REPAIR/REPLACE SIDEWALKS FOR VISITABILITY		5,000
	SITWORK TOTAL		5,000	SITWORK TOTAL		5,000
	LA 56-1 - 1460 PHYSICAL IMPROV			LA 56-1 - 1460 PHYSICAL IMPROV		
	WINDOW REPLACEMENT		36,000	CONSTRUCT STORAGE BUILDINGS		16,000
	MISC REPAIR FROM REAC INSPECTIONS		2,500	WINDOW REPLACEMENT		46,000
	1460 SUB TOTAL		38,500	MISC REPAIR FROM REAC INSPECTIONS		2,500
				1460 SUB TOTAL		64,500
	LA 56-2 - 1460 PHYSICAL IMPROV			LA 56-2 - 1460 PHYSICAL IMPROV		
	BATH REPAIR		20,000	BATH REPAIR		20,000
	MISC REPAIR FROM REAC INSPECTIONS		5,000	MISC REPAIR FROM REAC INSPECTIONS		5,000
	1460 SUB TOTAL		25,000	1460 SUB TOTAL		25,000
	LA 56-3 - 1460 PHYSICAL IMPROV			LA 56-3 - 1460 PHYSICAL IMPROV		
	REAC SYSTEM REPAIRS		5,000	REAC SYSTEM REPAIRS		5,000
	BATH REPAIR		25,000	BATH REPAIR		25,000
	1460 SUB TOTAL		30,000	1460 SUB TOTAL		30,000
	NON DWELLING BUILDINGS			NON DWELLING BUILDINGS		
	COMMUNITY BLDG		5,000	COMMUNITY BLDG		5,000
	DWELL EQUIP			DWELL EQUIP		
	APPLIANCES		3,500	APPLIANCES		3,500
NON DWELL EQUIP			NON DWELL EQUIP			
REPLACE MAINTENANCE TRUCK		22,000				
	Col Subtotal of Estimated Cost		\$129,000	Col Subtotal of Estimated Cost		\$59,500

**Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
Capital Fund Program (CFP)**

OMB Approval No. 2577-0157 (Exp 7/31/98)

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

BERWICK HA 2009

Work Statement FFY: 2009	Work Statement for Year 2 FFY Grant: 2010 - PHA FY: 2010			Work Statement for Year 3 FFY Grant: 2011 - PHA FY: 2011		
	of Major Work Categories	Quantity	Estimated Cost	of Major Work Categories	Quantity	Estimated Cost
See Statement	MANAGEMENT IMPROVEMENTS			MANAGEMENT IMPROVEMENTS		
	STAFF/RESIDENT TRAINING		1,500.00	STAFF/RESIDENT TRAINING		1,500.00
	MAINT TRAINING		1,000.00	MAINT TRAINING		1,000.00
	TUTOR PROGRAM		5,000.00	TUTOR PROGRAM		5,000.00
	POLICE SECURITY PATROL		2,500.00	POLICE SECURITY PATROL		2,500.00
	RESIDENT PROGRAMS EXPENSE		2,000.00	RESIDENT PROGRAMS EXPENSE		2,000.00
	SUMMER YOUTH PROGRAM		2,000.00	SUMMER YOUTH PROGRAM		2,000.00
	RESIDENT PROGRAMS COORDINATOR		13,000.00	RESIDENT PROGRAMS COORDINATOR		13,000.00
	SUB TOTAL SOFT COSTS		27,000.00	SUB TOTAL SOFT COSTS		27,000.00
	COMPUTER/OFFICE EQUIP		1,500.00	COMPUTER/OFFICE EQUIP		1,500.00
	SUB TOTAL HARD COSTS		1,500.00	SUB TOTAL HARD COSTS		1,500.00
	TOTAL MGMT IMPROVEMENTS		28,500.00	TOTAL MGMT IMPROVEMENTS		28,500.00
	1430 FEES AND COSTS			1430 FEES AND COSTS		
	A. A/E FEES		10,000	A. A/E FEES		10,000
	B. CFP GRANT REPORTING		5,000	B. CFP GRANT REPORTING		5,000
	C. CFP ANNUAL STATEMENT		2,500	C. CFP ANNUAL STATEMENT		2,500
	D. AGENCY PLAN		1,500	D. AGENCY PLAN		1,500
	E. ENVR REVIEW		1,000	E. ENVR REVIEW		1,000
	F. PRINTING OF PLANS		1,000	F. PRINTING OF PLANS		1,000
	G. ADV/RECORDATION/MISC COSTS		500	G. ADV/RECORDATION/MISC COSTS		500
TOTAL 1430		21,500	TOTAL 1430		21,500	
Col Subtotal of Estimated Cost		\$23,000	Col Subtotal of Estimated Cost		\$23,000	

**Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
Capital Fund Program (CFP)**

OMB Approval No. 2577-0157 (Exp 7/31/98)

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

BERWICK HA 2009

Work Statement FFY: 2009	Work Statement for Year 4 FFY Grant: 2012 - PHA FY: 2012			Work Statement for Year 5 FFY Grant: 2013 - PHA FY: 2013		
	of Major Work Categories	Quantity	Estimated Cost	of Major Work Categories	Quantity	Estimated Cost
See Statement	MANAGEMENT IMPROVEMENTS			MANAGEMENT IMPROVEMENTS		
	STAFF/RESIDENT TRAINING		1,500.00	STAFF/RESIDENT TRAINING		1,500.00
	MAINT TRAINING		1,000.00	MAINT TRAINING		1,000.00
	TUTOR PROGRAM		5,000.00	TUTOR PROGRAM		5,000.00
	POLICE SECURITY PATROL		2,500.00	POLICE SECURITY PATROL		2,500.00
	RESIDENT PROGRAMS EXPENSE		2,000.00	RESIDENT PROGRAMS EXPENSE		2,000.00
	SUMMER YOUTH PROGRAM		2,000.00	SUMMER YOUTH PROGRAM		2,000.00
	RESIDENT PROGRAMS COORDINATOR		13,000.00	RESIDENT PROGRAMS COORDINATOR		13,000.00
	SUB TOTAL SOFT COSTS		27,000.00	SUB TOTAL SOFT COSTS		27,000.00
	COMPUTER/OFFICE EQUIP		1,500.00	COMPUTER/OFFICE EQUIP		1,500.00
	SUB TOTAL HARD COSTS		1,500.00	SUB TOTAL HARD COSTS		1,500.00
	TOTAL MGMT IMPROVEMENTS		28,500.00	TOTAL MGMT IMPROVEMENTS		28,500.00
	1430 FEES AND COSTS			1430 FEES AND COSTS		
	A. A/E FEES		10,000	A. A/E FEES		10,000
	B. CFP GRANT REPORTING		5,000	B. CFP GRANT REPORTING		5,000
	C. CFP ANNUAL STATEMENT		2,500	C. CFP ANNUAL STATEMENT		2,500
	D. AGENCY PLAN		1,500	D. AGENCY PLAN		1,500
	E. ENVR REVIEW		1,000	E. ENVR REVIEW		1,000
	F. PRINTING OF PLANS		1,000	F. PRINTING OF PLANS		1,000
	G. ADV/RECORDATION/MISC COSTS		500	G. ADV/RECORDATION/MISC COSTS		500
TOTAL 1430		21,500	TOTAL 1430		21,500	
Col Subtotal of Estimated Cost		\$23,000	Col Subtotal of Estimated Cost		\$23,000	

**Annual Statement - Performance and Evaluation Report
Capital Fund Program (CFP)
Part I: Summary**

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

HA Name: BERWICK HOUSING AUTHORITY	Capital Fund Grant Number LA48P 056 50105	FFY of Grant Approval 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance & Evaluation Report for Program Year Ending <u>00/00/00</u>		
<input type="checkbox"/> Revised Annual Statement (Revision Number <u> </u>) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGP Funds	0.00	0.00	0.00	0.00
2	1406 Operations	0.00	0.00	0.00	0.00
3	1408 Management Improvements Soft Costs	35,021.00	21,358.69	21,358.69	21,358.69
	Management Improvements Hard Costs	0.00	0.00	0.00	0.00
4	1410 Administration	1,200.00	0.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	21,500.00	16,129.91	16,129.91	16,129.91
8	1440 Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	3,000.00	53,000.00	53,000.00	53,000.00
10	1460 Dwelling Structures	116,000.00	81,327.15	81,327.15	81,327.15
11	1465.1 Dwelling Equipment - Nonexpendable	3,500.00	5,170.00	5,170.00	5,170.00
12	1470 Nondwelling Structures	5,000.00	5,000.00	5,000.00	5,000.00
13	1475 Nondwelling Equipment	1,500.00	5,056.05	5,056.05	5,056.05
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
17	1495.1 Relocation Costs	500.00	179.20	179.20	179.20
18	1498 Development Activities	0.00	0.00	0.00	0.00
19	Collateralization Expenses or debt Service	0.00	0.00	0.00	0.00
20	1502 Contingency (May not exceed 8% of line 20)	0.00	0.00	0.00	0.00
21	Amount of Annual Grant (Sum of Lines 2 - 19)	187,221.00	187,221.00	187,221.00	187,221.00
22	Amount of Line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security Soft Costs	0.00			
25	Amount of Line 21 Related to Security Hard Costs	0.00			
26	Amount of Line 21 Related to Energy Conservation Measures	0.00			
		0.00			

Signature of Executive Director and Date <hr style="width:100%;"/> <p style="text-align: right;"><u>December 31, 2007</u></p>	Signature of Public Housing Director/Office of Native American Programs Administrator and Date <hr style="width:100%;"/>
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CLARENCE ROBINSON JR

**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**

HA Name: BERWICK HOUSING AUTHORITY				Capital Fund Grant Number LA48P 056 50105		FFY of Grant Approval 2005			
Development	General Description of Major Work Categories	Development Acct. Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Propose Work	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
	1406 OPERATIONS			0					
PHA WIDE	1408 MANAGEMENT IMPROVEMENTS								
	STAFF/RESIDENT TRAINING			2,000.00	269.00				
	MAINT TRAINING			1,500.00	1,521.95				
	TUTOR PROGRAM			7,500.00	3,441.00				
	POLICE SECURITY PATROL			12,000.00	0.00				
	FAMILY TRAINING - EMPLOYEE REFERRAL PRG			3,500.00	829.14				
	RESIDENT PROGRAM COORDINATOR			7,000.00	14,138.63				
	SUB TOTAL SOFT COSTS			33,500.00	20,199.72	20,199.72	20,199.72		
	COMPUTER/OFFICE EQUIP			1,521.00	1,158.97	1,158.97	1,158.97		
	SUB TOTAL HARD COSTS			1,521.00	1,158.97				
	TOTAL MGMT IMPROVEMENTS	1408			35,021.00	21,358.69	21,358.69	21,358.69	
	1410 ADMIN								
	A. ADMIN	1410			1,200.00	0.00	0.00	0.00	
	1430 FEES AND COSTS								
	A. A/E FEES				12,500	8,078.00			
	B. CFP GRANT REPORTING				3,500	4,000.00			
	C. CFP ANNUAL STATEMENT				2,500	2,500.00			
	D. AGENCY PLAN				1,500	1,500.00			
	E. PRINTING OF PLANS				1,000	0.00			
	E. ADV/RECORDATION/MISC COSTS				500	51.91			
	1430			21,500.00	16,129.91	16,129.91	16,129.91		
1465 DWELLING EQUIP									
APPLIANCES	1465			3,500.00	5,170.00	5,170.00	5,170.00		
1475 NON-DWELLING EQUIPMENT									
UTILITY CART				1,500.00	1,127.50				
MAINTENANCE CART					2,845.00				
GRINDER PUMP					1,083.55				
	1475			1,500.00	5,056.05	5,056.05	5,056.05		
1495 RELOCATION									
	1495			500.00	179.20	179.20	179.20		
1502 CONTINGENCY									
A. PROGRAM CONTINGENCY	1502			0.00					
	PAGE TOTAL			63,221.00	47,893.85	47,893.85	47,893.85		

1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement
Signature of Executive Director and Date

2) To be completed for the Performance and Evaluation Report
Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement - Performance and Evaluation Report
 Capital Fund Program (CFP)
 Part III: Implementation Schedule**

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

HA Name: BERWICK HOUSING AUTHORITY				Capital Fund Grant Number LA48P 056 50105		FFY of Grant Approval 2005		
Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates	
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)		
LA 43-1	09/30/07		03/31/07	09/30/08		12/31/07		
LA 43-2	09/30/07		03/31/07	09/30/08		12/31/07		
PHA WIDE	09/30/07		03/31/07	09/30/08		12/31/07		
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								
Signature of Executive Director and Date						Signature of Public Housing Director/Office of Native American Programs Administrator and Date		

**Annual Statement - Performance and Evaluation Report
Capital Fund Program (CFP)
Part I: Summary**

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

HA Name: BERWICK HOUSING AUTHORITY	Capital Fund Grant Number LA48P 056 50106	FFY of Grant Approval 2006
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance & Evaluation Report for Program Year Ending 06/30/08	<input type="checkbox"/> Revised Annual Statement (Revision Number ___) <input type="checkbox"/> Final Performance and Evaluation Report	REV #1

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CGP Funds	0.00		0.00	0.00
2	1406 Operations	0.00		0.00	0.00
3	1408 Management Improvements	32,000.00		23,330.77	21,658.64
	Management Improvements Hard Costs \$1,500			0.00	0.00
4	1410 Administration	1,200.00		0.00	0.00
5	1411 Audit	0.00		0.00	0.00
6	1415 Liquidated Damages	0.00		0.00	0.00
7	1430 Fees and Costs	20,500.00		20,500.00	4,822.00
8	1440 Acquisition	0.00		0.00	0.00
9	1450 Site Improvement	6,000.00		5,849.89	4,203.05
10	1460 Dwelling Structures	109,668.00		87,897.39	87,897.39
11	1465.1 Dwelling Equipment - Nonexpendable	3,725.00		8,588.00	8,588.00
12	1470 Nondwelling Structures	5,000.00		0.00	0.00
13	1475 Nondwelling Equipment	1,500.00		1,441.54	669.54
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	500.00		90.50	90.50
18	1498 Development Activities	0.00		0.00	0.00
19	1501 Collateralization Expenses or debt Service	0.00		0.00	0.00
20	1502 Contingency (May not exceed 8% of line 20)	0.00		0.00	0.00
21	Amount of Annual Grant (Sum of Lines 2 - 19)	180,093.00		147,698.09	127,929.12
22	Amount of Line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security Soft Costs	2,500.00			
	Amount of Line 21 Related to Energy Conservation Measures	0.00			
		0.00			
26		0.00			
		0.00			
		0.00			

Signature of Executive Director and Date _____ CLARENCE ROBINSON JR.	August 20, 2008	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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**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 BERWICK HA 2006 CFP**

HA Name: BERWICK HOUSING AUTHORITY				Capital Fund Grant Number LA48P 056 50106		FFY of Grant Approval 2006		REV #1
Number/Name	General Description of Major Work Categories	Development Acct. Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Propose Work
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
LA 56-1, 2, 3	1450 SITE IMPROVEMENTS							
	A. MODIFY WALKS FOR VISITABILITY 3 Units	1450	3	3,000.00				
	B. INSTALL CLEANOUTS		8	3,000.00				
	TOTAL 1450	1450		6,000.00		5,849.89	4,203.05	
	1460 DWELLING IMPROVEMENTS							
	LA 56-1							
	REPLACE LAVATORY DRAINS/FITTINGS			1,000.00				
	REPAIR SPAULING OF BRICK			4,000.00				
	REPLACE BATH HARDWARE			1,000.00				
	REPLACE INTERIOR DOORS			5,000.00				
	REPLACE - REPAIR KITCHEN CABINETS			15,000.00				
	SUBTOTAL	1460		25,000.00		25,000.00	25,000.00	
	LA 56-2							
	REPLACE LAVATORY DRAINS/FITTINGS			1,000.00				
	REPAIR SPAULING OF BRICK			5,668.00				
REPLACE BATH DOOR HARDWARE			1,000.00					
REPLACE ROOFING			75,000.00					
SUBTOTAL	1460		82,668.00		60,897.39	60,897.39		
LA 56-3								
REPLACE LAVATORY DRAINS/FITTINGS			1,000.00					
REPLACE BATH DOOR HARDWARE			1,000.00					
SUBTOTAL	1460		2,000.00		2,000.00	2,000.00		
TOTAL 1460	1460		109,668.00		87,897.39	87,897.39		
1470 NON-DWELLING STRUCTURES		1470						
RESIDENTS COMMUNITY BUILDING				5,000.00				
PAGE TOTAL				120,668.00				

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

Signature of Executive Director and Date	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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**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 BERWICK HA 2006 CFP**

HA Name: BERWICK HOUSING AUTHORITY				Capital Fund Grant Number LA48P 056 50106		FFY of Grant Approval 2006		REV #1
Number/Name	General Description of Major Work Categories	Development Acct. Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Propose Work
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA WIDE	1406 OPERATIONS			0	0			
	1408 MANAGEMENT IMPROVEMENTS							
	STAFF/RESIDENT TRAINING			2,000				
	MAINT TRAINING			1,500				
	TUTOR PROGRAM			6,500				
	POLICE SECURITY PATROL			6,000				
	FAMILY TRAINING - EMPLOYEE REFERRAL PRG			2,500				
	CLIENT SERVICE COORDINATOR			12,000				
	SUB TOTAL SOFT COSTS			30,500		23,330.77	21,658.64	
	COMPUTER/OFFICE EQUIP			1,500				
	SUB TOTAL HARD COSTS			1,500				
	TOTAL MGMT IMPROVEMENTS	1408		32,000		23,330.77	21,658.64	
	1410 ADMIN							
	A. ADMIN	1410		1,200				
	1430 FEES AND COSTS							
	A. A/E FEES			10,000				
	B. CFP GRANT REPORTING			5,000				
	C. CFP ANNUAL STATEMENT			2,500				
	D. AGENCY PLAN			1,500				
	E. PRINTING OF PLANS			1,000				
E. ADV/RECORDATION/MISC COSTS			500					
SUB TOTAL	1430		20,500		20,500.00	4,822.00		
1465 DWELLING EQUIP								
APPLIANCES	1465		3,725		8,588.00	8,588.00		
1475 NON-DWELLING EQUIPMENT								
MAINT EQUIP	1475		1,500					
			1,500		1,441.54	669.54		
1495 RELOCATION								
	1495		500		90.50	90.50		
1502 CONTINGENCY								
A. PROGRAM CONTINGENCY	1502		0					
PAGE TOTAL			59,425.00					

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

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement - Performance and Evaluation Report
Capital Fund Program (CFP)
Part III: Implementation Schedule**

**U.S.Department of Housing and Urban Development
Office of Public and Indian Housing BERWICK HA 2006 CFP**

HA Name: BERWICK HOUSING AUTHORITY				Capital Fund Grant Number LA48P 056 50106		FFY of Grant Approval 2006		REV #1	
Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates		
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)			
LA 56-1	09/30/08			09/30/09					
LA 56-2	09/30/08			09/30/09					
LA 56-3	09/30/08			09/30/09					
PHA WIDE	09/30/08			09/30/09					
<p>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</p>									
Signature of Executive Director and Date					Signature of Public Housing Director/Office of Native American Programs Administrator and Date				

**Annual Statement - Performance and Evaluation Report
Capital Fund Program (CFP)
Part I: Summary**

Attachment "F"

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

HA Name: BERWICK HOUSING AUTHORITY	Capital Fund Grant Number LA48P 056 50107	FFY of Grant Approval 2007
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Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (Revision Number)
 Performance & Evaluation Report for Program Year Ending **06/30/08** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds	0.00			
2	1406 Operations	0.00			
3	1408 Management Improvements Soft Costs	35,000.00			
	Management Improvements Hard Costs	0.00			
4	1410 Administration	2,000.00			
5	1411 Audit	0.00			
6	1415 Liquidated Damages	0.00			
7	1430 Fees and Costs	20,517.00			
8	1440 Acquisition	0.00			
9	1450 Site Improvement	7,500.00			
10	1460 Dwelling Structures	105,400.00			
11	1465.1 Dwelling Equipment - Nonexpendable	3,500.00			
12	1470 Nondwelling Structures	5,000.00			
13	1475 Nondwelling Equipment	1,000.00			
14	1485 Demolition	0.00			
15	1490 Replacement Reserve	0.00			
16	1492 Moving to Work Demonstration	0.00			
17	1495.1 Relocation Costs	500.00			
18	1498 Development Activities	0.00			
19	Collateralization Expenses or debt Service	0.00			
20	1502 Contingency (May not exceed 8% of line 20)	0.00			
21	Amount of Annual Grant (Sum of Lines 2 - 19)	180,417.00			
22	Amount of Line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security Soft Costs	6,000.00			
25	Amount of Line 21 Related to Security Hard Costs	0.00			
26	Amount of Line 21 Related to Energy Conservation Measures	0.00			

Signature of Executive Director and Date CLARENCE ROBINSON JR	August 20, 2008	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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**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**

HA Name:			Capital Fund Grant Number		FFY of Grant Approval		
BERWICK HOUSING AUTHORITY			LA48P 056 50107		2007		
Number/Name	General Description of Major Work Categories	Development Acct. Number	Total Estimated Cost		Total Actual Cost		Status of Propose Work
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
LA 56-1, 2, 3	1450 SITE IMPROVEMENTS						
	A. MODIFY WALKS FOR VISITABILITY	1450	3,000				
	B. INSTALL CLEANOUTS		2,500				
	C. LANDSCAPING		2,000				
	TOTAL 1450	1450	7,500				
	1460 DWELLING IMPROVEMENTS						
	LA 56-1						
	REAC SYSTEM REPAIRS		2,500				
		SUBTOTAL	1460	2,500			
	LA 56-2						
	REAC SYSTEM REPAIRS		2,500				
	INSTALL GUTTERS AT DOORWAYS		12,900				
		SUBTOTAL	1460	15,400			
LA 56-3							
REAC SYSTEM REPAIRS		2,500					
REPLACE ROOFING	425 SQ	85,000					
	SUBTOTAL	1460	87,500				
TOTAL 1460		1460	105,400				
1470 NON-DWELLING STRUCTURES							
RESIDENTS COMMUNITY BUILDING		1470	5,000				
	PAGE TOTAL		7,500				

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

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement - Performance and Evaluation Report
 Capital Fund Program (CFP)
 Part III: Implementation Schedule**

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

HA Name: BERWICK HOUSING AUTHORITY				Capital Fund Grant Number LA48P 056 50107		FFY of Grant Approval 2007		
Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates	
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)		
LA 56-1	09/30/09			09/30/10				
LA 56-2	09/30/09			09/30/10				
LA 56-3	09/30/09			09/30/10				
PHA WIDE	09/30/09			09/30/10				
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								
Signature of Executive Director and Date						Signature of Public Housing Director/Office of Native American Programs Administrator and Date		

**Annual Statement - Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

Attachment "G"

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

Part I: Summary

HA Name: BERWICK HOUSING AUTHORITY	Grant Type and Number	FFY of Grant Approval 2008
	Capital Fund Program Grant No: LA48P 056 50108	
	Replacement Housing Factor Grant No:	

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (Revision Number)
 Performance & Evaluation Report for Program Year Ending **06/30/08** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds	0.00		0.00	
2	1406 Operations	0.00		0.00	
3	1408 Management Improvements Soft Costs	28,500.00		0.00	
	Management Improvements Hard Costs	0.00		0.00	
4	1410 Administration	1,500.00		0.00	
5	1411 Audit	0.00		0.00	
6	1415 Liquidated Damages	0.00		0.00	
7	1430 Fees and Costs	20,500.00		0.00	
8	1440 Acquisition	0.00		0.00	
9	1450 Site Improvement	3,000.00		0.00	
10	1460 Dwelling Structures	107,500.00		10,000.00	
11	1465.1 Dwelling Equipment - Nonexpendable	6,610.00		0.00	
12	1470 Nondwelling Structures	10,000.00		0.00	
13	1475 Nondwelling Equipment	1,000.00		0.00	
14	1485 Demolition	0.00		0.00	
15	1490 Replacement Reserve	0.00		0.00	
16	1492 Moving to Work Demonstration	0.00		0.00	
17	1495.1 Relocation Costs	500.00		0.00	
18	1499 Development Activities	0.00		0.00	
19	1501 Collateralization Expenses or debt Service	0.00		0.00	
20	1502 Contingency (May not exceed 8% of line 20)	0.00		0.00	
21	Amount of Annual Grant (Sum of Lines 2 - 19)	179,110.00		10,000.00	
22	Amount of Line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security Soft Costs	2,500.00			
25	Amount of Line 21 Related to Security Hard Costs	0.00			
26	Amount of Line 21 Related to Energy Conservation Measures	0.00			
		0.00			

Signature of Executive Director and Date CLARENCE ROBINSON JR August 20, 2008	Signature of Public Housing Director/Office of Native American Programs Administrator and Date
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Annual Statement - Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
Part II: Supporting Pages

HA Name: BERWICK HOUSING AUTHORITY			Grant Type and Number				FFY of Grant Approval 2008
			Capital Fund Program Grant No: LA48P 056 50108				
			Replacement Housing Factor Grant No:				
Number/Name	General Description of Major Work Categories	Development Acct. Number	Total Estimated Cost		Total Actual Cost		Status of Propose Work
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
LA 56-1, 2, 3	1450 SITE IMPROVEMENTS						
	A. REPAIR SIDEWALKS	1450	3,000.00				
	TOTAL 1450	1450	3,000.00				
	1460 DWELLING IMPROVEMENTS						
	LA 56-1						
	DOOR REPLACEMENT		2,500.00				
	REPLACE FURNACES		3,500.00				
	MISC INTERIOR REPAIR		6,000.00				
	SUBTOTAL	1460	12,000.00				
	LA 56-2						
	DOOR REPLACEMENT		5,000.00				
	REPLACE FURNACES		4,000.00				
	INSTALL TANKLESS WATER HEATERS		5,000.00				
	MISC INTERIOR REPAIR		9,000.00				
	SUBTOTAL	1460	23,000.00				
	LA 56-3						
	REAC SYSTEM REPAIRS		2,500.00				
	REPLACE ROOFING		70,000.00		10,000.00		
	SUBTOTAL	1460	72,500.00				
	TOTAL 1460	1460	107,500.00				
1470 NON-DWELLING STRUCTURES							
IMPROVEMENTS AT MAIN SHOP	1470	10,000.00					
	PAGE TOTAL		120,500.00		10,000.00		

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

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement - Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing

Part II: Supporting Pages

HA Name: BERWICK HOUSING AUTHORITY			Grant Type and Number				FFY of Grant Approval 2008
			Capital Fund Program Grant No: LA48P 056 50108				
			Replacement Housing Factor Grant No:				
Development	General Description of Major Work Categories	Development Acct. Number	Total Estimated Cost		Total Actual Cost		Status of Propose Work
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
PHA WIDE	1406 OPERATIONS		0.00				
	1408 MANAGEMENT IMPROVEMENTS						
	STAFF/RESIDENT TRAINING		1,500.00				
	MAINT TRAINING		1,000.00				
	TUTOR PROGRAM		5,000.00				
	POLICE SECURITY PATROL		2,500.00				
	RESIDENT PROGRAMS EXPENSE		2,000.00				
	SUMMER YOUTH PROGRAM		2,000.00				
	RESIDENT PROGRAMS COORDINATOR		13,000.00				
	SUB TOTAL SOFT COSTS		27,000.00				
	COMPUTER/OFFICE EQUIP		1,500.00				
	SUB TOTAL HARD COSTS		1,500.00				
	TOTAL MGMT IMPROVEMENTS	1408	28,500.00				
	1410 ADMIN	1410	1,500.00				
	1430 FEES AND COSTS						
	A. A/E FEES		10,000.00				
	B. CFP GRANT REPORTING		5,000.00				
	C. CFP ANNUAL STATEMENT		2,500.00				
	D. AGENCY PLAN		1,500.00				
	E. PRINTING OF PLANS		1,000.00				
E. ADV/RECORDATION/MISC COSTS		500.00					
	1430	20,500.00					
1465 DWELLING EQUIP APPLIANCES	1465	6,610.00					
1475 NON-DWELLING EQUIPMENT MAINT EQUIP		1,000.00					
	1475	1,000.00					
1495 RELOCATION	1495	500.00					
1502 CONTINGENCY	1502	0.00					
	PAGE TOTAL	58,610.00					

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

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

**Annual Statement - Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

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

Part III: Implementation Schedule

HA Name:	BERWICK HOUSING AUTHORITY						Grant Type and Number		FFY of Grant Approval 2008
							Capital Fund Program Grant No: LA48P 056 50108		
							Replacement Housing Factor Grant No:		
Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates		
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)			
LA 56-1	09/30/10			09/30/11					
LA 56-2	09/30/10			09/30/11					
LA 56-3	09/30/10			09/30/11					
PHA WIDE	09/30/10			09/30/11					
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									
Signature of Executive Director and Date						Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

**Annual Statement - Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

Attachment "H"

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

Part I: Summary

HA Name: BERWICK HOUSING AUTHORITY	Grant Type and Number	FFY of Grant Approval 2008
	Capital Fund Program Grant No: LA48R 056 501-08	
	Replacement Housing Factor Grant No:	

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (Revision Number)
 Performance & Evaluation Report for Program Year Ending **06/30/08** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds	0.00		0.00	
2	1406 Operations	0.00		0.00	
3	1408 Management Improvements Soft Costs	0.00		0.00	
	Management Improvements Hard Costs	0.00		0.00	
4	1410 Administration	0.00		0.00	
5	1411 Audit	0.00		0.00	
6	1415 Liquidated Damages	0.00		0.00	
7	1430 Fees and Costs	0.00		0.00	
8	1440 Acquisition	0.00		0.00	
9	1450 Site Improvement	0.00		0.00	
10	1460 Dwelling Structures	0.00		0.00	
11	1465.1 Dwelling Equipment - Nonexpendable	0.00		0.00	
12	1470 Nondwelling Structures	0.00		0.00	
13	1475 Nondwelling Equipment	0.00		0.00	
14	1485 Demolition	0.00		0.00	
15	1490 Replacement Reserve	0.00		0.00	
16	1492 Moving to Work Demonstration	0.00		0.00	
17	1495.1 Relocation Costs	0.00		0.00	
18	1499 Development Activities	2,999.00		1,000.00	
19	1501 Collateralization Expenses or debt Service	0.00		0.00	
20	1502 Contingency (May not exceed 8% of line 20)	0.00		0.00	
21	Amount of Annual Grant (Sum of Lines 2 - 19)	2,999.00		1,000.00	
22	Amount of Line 21 Related to LBP Activities	0.00			
23	Amount of Line 21 related to Section 504 Compliance	0.00			
24	Amount of Line 21 Related to Security Soft Costs	0.00			
25	Amount of Line 21 Related to Security Hard Costs	0.00			
26	Amount of Line 21 Related to Energy Conservation Measures	0.00			
		0.00			

Signature of Executive Director and Date

 CLARENCE ROBINSON JR
 November 19, 2008

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

Annual Statement - Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
 U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing

Part II: Supporting Pages

HA Name: BERWICK HOUSING AUTHORITY			Grant Type and Number				FFY of Grant Approval 2008
			Capital Fund Program Grant No: LA48R 056 501-08				
			Replacement Housing Factor Grant No:				
Number/Name	General Description of Major Work Categories	Development Acct. Number	Total Estimated Cost		Total Actual Cost		Status of Propose Work
			Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
LA 56-1, 2, 3	1499 DEVELOPMENT ACTIVITIES	1450	2,999.00		1,000.00		
PAGE TOTAL			2,999.00		1,000.00		
1) To be completed for the Performance and Evaluation Report or a Revised Annual Statement.							
Signature of Executive Director and Date				Signature of Public Housing Director/Office of Native American Programs Administrator and Date			

**Annual Statement - Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**

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

Part III: Implementation Schedule

HA Name:	BERWICK HOUSING AUTHORITY						Grant Type and Number		FFY of Grant Approval 2008
							Capital Fund Program Grant No: LA48R 056 501-08		
							Replacement Housing Factor Grant No:		
Number/Name	All Funds Obligated (Qtr Ending Date)			All Funds Expended (Qtr Ending Date)			Reasons for Revised target Dates		
	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)			
LA 56-1,2,3	09/30/10			09/30/11					
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									
Signature of Executive Director and Date						Signature of Public Housing Director/Office of Native American Programs Administrator and Date			