

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Ecorse Housing Commission</u> PHA Code: <u>MI007</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard-Troubled <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>6/30/2009</u>												
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>199</u> Number of HCV units: _____												
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
<b>4.0</b>	<b>PHA Consortia</b> <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"> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
PH	HCV												
PHA 1:													
PHA 2:													
PHA 3:													
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.												
<b>5.1</b>	<b>Mission.</b> 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:  <p><b>The Ecorse Housing Commission is committed to providing quality housing services in a professional, timely, respectful and cooperative customer service to all Housing Commission residents, residents of the City of Ecorse and residents of neighboring communities. The Ecorse Housing Commission is determined to develop safe and secure affordable housing communities, while promoting economic opportunities for all Commission residents. The Ecorse Housing Commission will promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</b></p>												

5.2	<p><b>Goals and Objectives.</b> 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.</p> <p><u>Goals/Objectives for 2010 - 2014</u>  <b>GOALS AND OBJECTIVES/2010 TO 2014</b></p> <p><b>A. Goal: Manage the Ecorse Housing Commission's existing housing programs in an efficient and effective manner.</b>  <b>Objectives:</b></p> <ol style="list-style-type: none"> <li>1. The Ecorse Housing Commission shall achieve to change the agency Trouble Status to a Standard performer under HUD’s Public Housing Assessment System (PHAS), achieving not less than a score of 90% for the Management Operations Component for Physical, Financial, Management and Resident satisfaction survey.</li> <li>2. The Ecorse Housing Commission shall achieve and sustain an occupancy rate of 98% throughout the next five fiscal years.</li> <li>3. The Ecorse Housing Commission shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer-friendly environment.</li> </ol> <p><b>REPORT ON PROGRESS IN MEETING GOLAS/OBJECTIVES OF 2005-2009 PLAN</b>  To continue to enhance Wayne County housing stock program to provide housing needs and markets identified for the acquisition, improvement and/or development of additional housing opportunities for the City of Ecorse.  <b>Goal:</b></p> <ol style="list-style-type: none"> <li>1. The Ecorse Housing Commission shall construct at least two new mixed-income affordable housing development, including public housing units.</li> <li>2. Enhance the marketability of the Ecorse Housing Commission's housing units.</li> <li>3. Ecorse Housing Commission did achieve and sustain an occupancy rate of 98% throughout the 2008-2009 fiscal year.</li> </ol> <p><b>Objectives:</b>  To continue to improve on our customer services initiatives to maintain great quality maintenance services to the residents of the Ecorse Housing Commission.</p> <ol style="list-style-type: none"> <li>1. Ensure work orders and repairs and done in a timely manner for approved repairs, improvements and enhancements, while obtain our gold to achieve at least a 90% PHAS Physical Condition score for each of its properties.</li> <li>2. Maintain overall appeal to the housing development by improving its exterior landscaping and proper curb appeal.</li> </ol>
6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ol style="list-style-type: none"> <li>1. <b>UPDATED EHC EMPLOYEE HANDBOOK “Drug Free Policy”.</b>  <b>Revised Ecorse Housing Commission Capitalization Policy, Investment Policy, Collection Policy, Internal Control Policy and Disposition Policy.</b></li> </ol> <p>(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.</p> <p><b>Ecorse Housing Commission</b>  <b>266 Hyacinth</b>  <b>Ecorse, Michigan 48229</b></p> <p><b>Ecorse City Hall</b>  <b>3869 West Jefferson</b>  <b>Ecorse, Michigan 48229</b></p>

7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p> <p><b>Ecorse Housing Commission has submitted the PHA Certification of Compliance Section 18 Disposition dated 06/09/2009. The application known as DDA#0003653 and DDA#003644 which is currently pending with SAC Division. The project will be develop in two phase to construct mixed income housing development, including public housing units.</b></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> 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.</p> <p><b>Refer to attachment mi007 (a) Statement of Financial Resources</b>  <b>Refer to attachment mi007(b) for 2009 CFP Annual Statement</b>  <b>Refer to attachment mi007(c) for 2009 CFP ARRA/CFP Annual Statement</b>  <b>Refer to attachment mi007(d) for 2007 CFP CFP P&amp;E Report</b>  <b>Refer to attachment mi007(e) for 2008 CFP CFP P&amp;E Report</b></p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> 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.</p> <p><b>Refer to attachment mi007(f) for 2009 CFP 5-Year Plan</b></p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p><b>Housing Needs.</b> 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><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>Refer to attachment mi007(g) for Housing Needs of Families on the Public Housing and Section 8 Tenant-Base Assist</b>  <b>Assistance Waiting List</b></p>
10.0	<p><b>Additional Information.</b> 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> <p><b>Ecorse Housing Commission Substantial deviations or significant amendments or modification are defined as discretionary changes in the plans or policies of the Ecorse Housing Commission that fundamentally change the mission, goals, objective, or plans of the agency and which require formal approval of the Board of Commissioners.</b></p>

<p><b>11.0</b></p>	<p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(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)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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.</li> </ul> <p><b>Refer to attachment mi007(h) for Narrative comments from Resident Advisory PHA Plan meeting</b></p> <ul style="list-style-type: none"> <li>(g) Challenged Elements</li> </ul> <p><b>No elements of the Plan were challenged.</b></p> <ul style="list-style-type: none"> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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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, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide 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 is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 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 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. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## Instructions form HUD-50075

**Applicability.** This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission.** A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives.** Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

**6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

**7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers**

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)  
**Note:** This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

**8.0 Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

**8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

**8.2 Capital Fund Program Five-Year Action Plan**

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**9.1 Strategy for Addressing Housing Needs.** Provide a 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: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**10.0 Additional Information.** Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

**11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

## 2009 EHC PHA PLAN ELEMENTS: (24 CFR 903.7)

### 1. ELIGIBILITY, SELECTION AND ADMISSIONS POLICIES, INCLUDING DECONCENTRATION AND WAIT LIST PROCEDURES.

EHC will ensure that all families who express an interest in housing assistance are given an equal opportunity to apply and are treated in a fair and consistent manner. This Chapter describes the policies and procedures for completing an initial application for assistance, placement and denial of placement on the waiting list and limitations on who may apply. The primary purpose of the intake function is to gather information about the Family, but EHC will also utilize this process to provide information to the Family, to ensure an accurate and timely decision of eligibility. Applicants will be placed on the waiting list in accordance to our ACOP.

- b. ACOP SECTION C Chapter 4, Preferences –
  - 1. Federally Declared National Disasters Preference:
  - 2. Working Preference (24 CFR 5.415)
  - 3. Victims of Domestic Violence Preference
  - 4. Residency
- d. ACOP SECTION 13.8, Paying Rent – No change of fee assessed for late payment of from \$30.

### 2. FINANCIAL RESOURCES

#### Statement of Financial Resources

Sources	Planned \$	Planned Uses
<b>1. Federal Grants (FY 2009 grants)</b>		
a) Public Housing Operating Fund	813,471	
b) Public Housing Capital Fund-09	298,996	Public Housing Capital Improvements
c) HOPE VI Revitalization	\$0	
d) HOPE VI Demolition	\$0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$0	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	\$0	
g) Resident Opportunity and Self-Sufficiency Grants	\$0	
h) Community Development Block Grant	\$0	
i) HOME	\$0	
Other Federal Grants (list below)		
<b>ARRA/Capital Fund</b>	380,455	Demolition/Disposition
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		

<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
a) '07 & 08 CFP funds on 8/11/2009	32,207.64	Public Housing Capital Improvements
<b>3. Public Housing Dwelling Rental Income</b>	259,336	Public Housing Operation
<b>4. Other income (list below)</b>		
Work Order Chargers	2,600	Public Housing Operation
<b>Non-federal sources (listed below)</b>		
<b>Total Resources</b>	<b>\$1,787,065.64</b>	

### **3. RENT DETERMINATION**

The accurate calculation of Annual Income and Adjusted Income will ensure that Families are not paying more or less money for rent than they are obligated to pay. Imputed welfare income will be included at annual and interim re-certifications during the term of the reduction of welfare benefits.

### **4. OPERATIONS AND MANAGEMENT**

In accordance with NOTICE PIH 2009-12 (HA), the Housing Commission has revised its Procurement Policy solely for the purposes of the American Recovery and Reinvestment Act of 2009 to allow for non-competitive proposals when required by a public exigency and to raise its small purchases procurement limit to \$100,000, both as permitted by 24 CFR 85.36 and the Notice.

### **5. GRIEVANCE PROCEDURE**

#### 1. Informal Hearing Procedures:

A grievance shall be presented in writing, signed and submitted to the Executive Director or Manager that sent the notice or who is responsible for the action or inaction upon which the Grievance is based. The Grievance must be presented within fourteen (14) calendar days after the date of the action or failure to act, which is the basis for the Grievance. It may be simply stated, but shall specify:

### **6. DESIGNATED HOUSING FOR ELDERLY AND DISABLED FAMILIES**

**Non Applicable**

### **7. COMMUNITY SERVICE AND SELF-SUFFICIENCY**

This Plan Element has not been revised since the Housing Commission's prior plan submission.

## **8. SAFETY AND CRIME PREVENTION**

This Plan Element has not been revised since the Housing Commission's prior plan submission.

## **9. PETS**

All Resident pet owners, including owners of Passive Pets, must pay a refundable Pet Deposit in the amount of one-half a month's rent or Three Hundred Dollars (\$300.00), whichever is less, to cover additional costs attributable to the pet and not otherwise covered by the non-refundable Pet Fee. The Pet Deposit will be placed in an escrow account and is refundable, in whole, in part, or not at all as may be appropriate, upon move-out or removal of the pet from the dwelling unit.

## **10. CIVIL RIGHTS CERTIFICATION**

This Plan Element has not been revised since the Housing Commission's prior plan submission.

## **11. FISCAL YEAR AUDIT**

a. The Housing Commission completed and submitted its fiscal year end 6/30/2009 Unaudited Financial Statements (FDS) to HUD via the most recently made available excel tool through the REAC/FASS web site on the deadline of April 13, 2009

## **12. ASSET MANAGEMENT-Non Applicable**

## **13. VIOLENCE AGAINST WOMEN ACT (VAWA)**

This Plan Element has not been revised since the Housing Commission's prior plan submission.

### **ECORSE CITY HOUSING COMMISSION (EHC) VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY**

#### **I. Purpose and Applicability**

The purpose of this policy (herein called "Policy") is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and more generally to set forth EHC policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by EHC of all federally subsidized public housing and Section 8 rental assistance under the United States Housing Act of 1937 (42 U.S.C. §1437 *et seq.*).

Notwithstanding its title, this policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

2009

#### **II. Goals and Objectives**

This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by EHC;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or Stalking;
- D. Creating and maintaining collaborative arrangements between EHC, law enforcement authorities, victim service providers, and others to promote the safety and well-being of victims of actual and threatened domestic violence, dating violence and stalking, who are assisted by EHC; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by EHC.

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

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

Waiting list type: (select one)

- Section 8 tenant-based assistance  
 Public Housing  
 Combined Section 8 and Public Housing  
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	115		
Extremely low income <=30% AMI	103	90%	
Very low income (>30% but <=50% AMI)	12	10%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	77	67%	
Elderly families	1	1%	
Families with Disabilities	9	8%	
African-Americans	112	97%	
Hispanic	1	1%	
Asian	1	1%	
Caucasian	1	1%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	33		
2 BR	60		
3 BR	15		
4 BR	3		
5 BR	3		
5+ BR	0		

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

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

Is the waiting list closed (select one)?  No  Yes

If yes:

How long has it been closed (# of months)? **One Months (1)**

Does the PHA expect to reopen the list in the PHA Plan year?  No  Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed?  No  Yes

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

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

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Ecoerse Housing Comm  
PHA Name

MI 007  
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2005 - 2009

Annual PHA Plan for Fiscal Years 20\_\_ - 20\_\_

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

Name of Authorized Official	Title
<u>MARK C. CARTER</u>	<u>Executive Director</u>
Signature	Date
<u>Mark C. Carter</u>	<u>March 29, 2009</u>

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Ecorse Housing Commission

Program/Activity Receiving Federal Grant Funding

Low Income Public Housing/Capital Fund Program

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

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

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

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

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

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

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

(1) Abide by the terms of the statement; and

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

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

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

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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

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

MI007-001 - Voisine Terrace

MI007-002 - Wade H. McCree

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

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

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

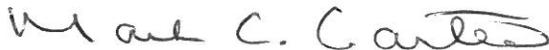
Name of Authorized Official

Mark C. Carter

Title

Executive Director

Signature

X 

Date

March 29, 2009

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Ecorse Housing Commission

Program/Activity Receiving Federal Grant Funding

Low Income Public Housing/Capital Fund Program

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

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

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

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

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

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

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

Name of Authorized Official

Mark C. Carter

Title

Executive Director

Signature

*Mark C. Carter*

Date (mm/dd/yyyy)

3/29/2009

## DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  <b>Congressional District, if known:</b> 4c 13th District	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  Ecorse Housing Commission 266 Hyacinth Ecorse, MI.48229  <b>Congressional District, if known:</b> 13th District	
<b>6. Federal Department/Agency:</b>  Department of Housing & Urban Development	<b>7. Federal Program Name/Description:</b>  Annual Plan Submission re: CFP Grant MI28P007501-09  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b>  \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):  No Lobbying Activity	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI):	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Mark C. Carter</u> Print Name: <u>Mark C. Carter</u> Title: <u>Executive Director</u> Telephone No.: <u>313-381-9393</u> Date: <u>3/29/2009</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

# ECORSE HOUSING COMMISSION

Friday, August 14, 2009

Page 1

The *PHA Plan 2009 Revision 2 Public Meeting* of the Ecorse Housing Commission was held on Friday, August 14, 2009 at 2:00 p.m. in the Community Room of the Ecorse Housing Commission, located at 266 Hyacinthe Avenue, Ecorse, MI 48229.

The purpose of the meeting was to discuss the PHA Plan 2009 Revision 2, and to receive recommendations from the public and the residents of Ecorse Housing. Everyone present at the meeting was given the opportunity to provide recommendations as required by federal regulations at 24 CFR Part 903.13.

Attending the meeting were EHC Staff: Mark C. Carter and Chanelle Stafford.

Present at the PHA Plan Revision 2 Public Meeting: Ar'nale Covington, Tinisha Fullilove, Consuelo Davis, Michelle Donald, Resident Commissioner William Randle, Quidonna Taylor, Charline Mauldin, Lareatha Reed, Arthur Steele Jr., Cornell Turner, Rashon Roshell, Rhoda Richardson, Shyla Love, Nicole Merchant, Damita Harden, Dionne Love, Joanna Redding, Delores Hill, Marie Akins, Commissioner Arnold Lackey, Katrina Carr, Derrick Love, Cassandra Williams, Iman Ali, and Virginia Smith.

The meeting was called to order by Mark C. Carter at 2:11 pm.

This meeting is to let the residents know the PHA Plan 2009 has been changed. Stimulus ARRA money will be used for the demolition disposition instead of fixing the playground and other things that need repairing. The money will be coming from the Capital Fund 2009 budget to fix the neighborhood. Capital funds will be used to also set up security cameras for safety for resident safety. The process will move faster by using CFP-09 because there is less of a process to go through. The cameras are being installed to witness and eliminate illegal activity. The sidewalk repair, security cameras, and playground equipment will be paid for out of the 2009 Capital Fund.

All elements of the plan were discussed and reviewed at length.

The meeting was adjourned at 3:24 p.m.

Ecorse Housing Commission  
 2009 PHA Plan Version 2 Meeting  
 Sign In Sheet August 14, 2009

	Name	Address	Date
1	Agnale Carington	3996 81st	8-14-09
2	Trishna Fallis	3916 81st	8-14-09
3	Consuelo Douglas	3970 7th St	8-14-09
4	Michelle Donnelly	3919 7th St	8-14-09
5	D. Ms Ann Rowell	3967-8th St	8-14-09
6	Quidona Taylor	3995 7th	8-14-09
7	Michelle Marshall	264 Sallie St	8-14-09
8	Annita Ford	3945 9th St	8-14-09
9	Frank O. Beard Jr.	222 Sallie St	8-14-09
10	Annell Turner	3990 7th	8-14-09
11	Rashon Koshell	3983 7th Street	8-14-09
12	Rhonda Richardson	3988-7th St	8-14-09
13	Sheila Cook	3925 9th	8-14-09
14	Nicole Merchant	3935 7th Street	8-14-09
15	Deante Harden	284 Huacacha	8-14-09
16	Dionelove	3977-8th St	8-14-09
17	Tanya Redburn	3953 1/2-8th	8-14-08
18	Melbae Hill	3953 7th Street	8-14-08
19	Marie Atkins	3970 8th St	8-14-09
20	Raymond	H St	8-14-09
21	Michelle	3908 8th	8-14-09
22	Michelle	3971-9th	8-14-09
23	Annabelle Williams	3969-9th	8-14-09
24	Sharon-Ann		
25	Margaret Jones	301 Sallie St	8-14-09
26			
27			
28			
29			
30			

**Civil Rights Certification**

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

**Civil Rights Certification****Annual Certification and Board Resolution**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Ecorse Housing Commission

MI007

\_\_\_\_\_  
PHA Name

\_\_\_\_\_  
PHA Number/HA Code

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

Name of Authorized Official

Mark C. Carter

Title

Executive Director

Signature

*Mark C. Carter*

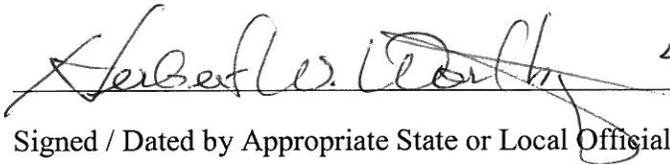
Date 03/29/2009

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

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

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

I, Herbert W. Worthy the Mayor of Ecorse, MI certify that the Five Year and  
Annual PHA Plan of the Ecorse Housing Commission is consistent with the Consolidated Plan of  
City of Ecorse prepared pursuant to 24 CFR Part 91.

 Herbert W. Worthy 4-15-09

Signed / Dated by Appropriate State or Local Official

Capital Fund 2009 Formula Grant

Capital Fund Program (CFP) Amendment

To The Consolidated Annual Contributions Contract (form HUD-53012)

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

Whereas, (Public Housing Authority) Ecorse Housing Commission (MI007) (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions

Contract(s) ACC(s) Number(s) C-3097 dated: 6/24/1996

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities at existing public housing developments in order to ensure that such developments continue to be available to serve low-income families:

\$ 298,996 for Fiscal Year to be referred to under Capital Fund Grant Number MI28P00750109

PHA Tax Identification Number (TIN) On File enter if changed since previous CFP Grant

Whereas, HUD and the PHA are entering into the CFP Amendment Number 12

Now Therefore, the ACC(s) is (are) amended as follows:

- 1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).
2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.
3. (Check one)
a. For Non-qualified PHAs:
(i) In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1). OR
(ii) If the Annual PHA Plan has not been adopted by the PHA and approved by HUD, the PHA may use its CFP assistance under this contract for work items contained in its CFP-Five-Year Action Plan (HUD-50075.2), before the Annual PHA Plan is approved.
b. For Qualified PHAs:
(i) The CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1) has been adopted by the PHA and verified by HUD. The capital and management activities shall be carried out as described therein. OR
(ii) If the CFP Annual Statement/Performance and Evaluation Report has not been adopted by the PHA and/or verified by HUD, the PHA may use its CFP assistance under this contract for work items contained in its approved CFP 5-Year Action Plan (HUD-50075.2), before the CFP Annual Statement/Performance and Evaluation Report is adopted by the PHA and verified by HUD.

Regardless of the selection above, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the United States Housing Act of 1937, as amended, (the "Act") and 48 month time period in which the PHA must expend this CFP assistance pursuant to section 9(j)(5) of the Act starts with the effective date of this CFP amendment (the date on which CFP assistance becomes available to the PHA for obligation).

4. Subject to the provisions of the ACC(s) and paragraph 3. and to assist in the capital and management activities, HUD agrees to disburse to the PHA or the designated trustee from time to time as needed up to the amount of the funding assistance specified herein.

5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modernization activities and for a period of forty years after the last distribution of CFP assistance for development activities. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, for a period of ten years following the last payment of assistance from the Operating Fund to the PHA, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. The PHA will accept the entire CFP assistance amount for this FY. If the PHA does not comply with any of its obligations under this Amendment and does not have its Annual PHA Plan approved within the period specified by HUD, HUD shall impose such penalties or take such remedial action as provided by law. HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the Annual PHA Plan. In such case, the PHA shall only incur additional costs with HUD approval.

7. Implementation or use of funding assistance provided under this Amendment is subject to the attached corrective action order(s).

(mark one): [ ] Yes [x] No

8. The PHA acknowledges its responsibility for adherence to this Amendment.

For cases where HUD has approved a Capital Fund Financing Amendment to the ACC (CFF Amendment attached), HUD will deduct the payment for amortization scheduled payments from the grant immediately on the effective date of this CFP Amendment. The payment of CFP funds due per the amortization scheduled will be made directly to a designated trustee (Trustee Agreement attached) within 3 days of the due date.

The parties have executed this Agreement, and it will be effective on 9/15/2009. This is the date on which CFP assistance becomes available to the PHA for obligation.

Table with 2 columns: U.S. Department of Housing and Urban Development (Signature: Doug C. Carter, Date: 9/15/09, Title: Acting Director) and PHA Executive Director (Signature: Mark C Carter, Date: 9/14/09, Title: Executive Director)

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

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

**Part I: Summary**  
 PHA Name: ECORSE  
 HOUSINGCOMMISSION  
 ml007b01

Grant Type and Number  
 Capital Fund Program Grant No: M28P007501-09  
 Replacement Housing Factor Grant No:  
 Date of CFPP:

FFY of Grant: 2009  
 FFY of Grant Approval:

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: <input type="checkbox"/> Performance by Development Account	Reserve for Disasters/Emergencies <input type="checkbox"/>	Original	Revised Annual Statement (revision no: ) Final Performance and Evaluation Report		Obligated	Total Actual Cost <sup>1</sup>	
				Total Estimated Cost	Revised <sup>2</sup>		Expended	
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		\$45,113.00	\$0	\$0	\$0	\$0	\$0
3	1408 Management Improvements		\$45,113.00	\$0	\$0	\$0	\$0	\$0
4	1410 Administration (may not exceed 10% of line 21)		\$29,556.50	\$0	\$0	\$0	\$0	\$0
5	1411 Audit		\$10,000.00	\$0	\$0	\$0	\$0	\$0
6	1415 Liquidated Damages		\$0	\$0	\$0	\$0	\$0	\$0
7	1430 Fees and Costs		\$0	\$0	\$0	\$0	\$0	\$0
8	1440 Site Acquisition		\$0	\$0	\$0	\$0	\$0	\$0
9	1450 Site Improvement		\$60,000.00	\$0	\$0	\$0	\$0	\$0
10	1460 Dwelling Structures		\$98,713.50	\$0	\$0	\$0	\$0	\$0
11	1465.1 Dwelling Equipment—Nonexpendable		\$0	\$0	\$0	\$0	\$0	\$0
12	1470 Non-dwelling Structures		\$0	\$0	\$0	\$0	\$0	\$0
13	1475 Non-dwelling Equipment		\$10,500.00	\$0	\$0	\$0	\$0	\$0
14	1485 Demolition		\$0	\$0	\$0	\$0	\$0	\$0
15	1492 Moving to Work Demonstration		\$0	\$0	\$0	\$0	\$0	\$0
16	1495.1 Relocation Costs		\$0	\$0	\$0	\$0	\$0	\$0
17	1499 Development Activities <sup>4</sup>		\$0	\$0	\$0	\$0	\$0	\$0

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

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

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

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: ECORSE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No: M28P007501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

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

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		\$0				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)		\$0				
20	Amount of Annual Grant: (sum of lines 2 - 19)		\$298,996.00				
21	Amount of line 20 Related to LBP Activities		\$0				
22	Amount of line 20 Related to Section 504 Activities		\$0				
23	Amount of line 20 Related to Security - Soft Costs		\$0				
24	Amount of line 20 Related to Security - Hard Costs		\$0				
25	Amount of line 20 Related to Energy Conservation Measures		\$0				

Signature of Executive Director *[Signature]* Date 9/14/2009 Signature of Public Housing Director *[Signature]* Date 9/22/09

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





**Capital Fund Program—Five-Year Action Plan**

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

**Part I: Summary**

PHA Name/Number Ecorse Housing Commission MI007		Locality (City/County & State) City of Ecorse, Wayne County Michigan			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number and Name Ecorse Housing Commission MI007	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013	
B. Physical Improvements Subtotal	\$78,401		\$94,853	\$83,401	\$88,401	
C. Management Improvements	\$60,113		\$60,113	\$60,113	\$60,113	
D. PHA-Wide Non-dwelling Structures and Equipment						
E. Administration	\$25,000		\$29,000	\$26,000	\$27,000	
F. Other						
G. Operations	\$60,113		\$40,000	\$29,452	\$22,887	
H. Demolition	\$75,339		\$75,000	\$100,000	\$100,565	
I. Development						
J. Capital Fund Financing - Debt Service						
K. Total CFP Funds	\$298,966		\$298,966	\$298,966	\$298,966	
L. Total Non-CFP Funds						
M. Grand Total	\$298,996		\$298,966	\$298,966	\$298,966	









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

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

<b>Part I: Summary</b>			
PHA Name: Escore Housing Commission m007c01	Grant Type and Number Capital Fund Program Grant No: ARRA/ Capital Fund Gmat Number: M128S007501-09 Replacement Housing Factor Grant No: Date of CFFP: 2009	FFY of Grant: 2009 FFY of Grant Approval:	

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:2 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
1	Total non-CFP Funds				Expended
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements		\$20,000		
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		\$125,000	\$195,455	
8	1440 Site Acquisition				
9	1450 Site Improvement		\$105,455		
10	1460 Dwelling Structures		\$130,000		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition			\$185,000	
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

**Part I: Summary**

<b>PHA Name:</b> EcorseHousingCommission	<b>Grant Type and Number</b> Capital Fund Program Grant No: ARRA/ Capital Fund Grant Number: M128S007501-09 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>
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Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$380,455	\$380,455		
21	Amount of line 20 Related to IBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director *[Signature]* Date 8-11-2009

Signature of Public Housing Director \_\_\_\_\_ Date \_\_\_\_\_

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





# Capital Fund 2009 Formula Grant

## Capital Fund Program (CFP) Amendment

To The Consolidated Annual Contributions  
Contract (form HUD-53012)

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

**Whereas**, (Public Housing Authority) Ecorse Housing Commission (MI007) (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions

Contract(s) ACC(s) Number(s) C-3097

dated: 6/24/1996

**Whereas**, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities at existing public housing developments in order to ensure that such developments continue to be available to serve low-income families:

\$ 298,996 for Fiscal Year to be referred to under Capital Fund Grant Number MI28P00750109

PHA Tax Identification Number (TIN), On File enter if changed since previous CFP Grant

**Whereas**, HUD and the PHA are entering into the CFP Amendment Number 12

**Now Therefore**, the ACC(s) is (are) amended as follows:

1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).

2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.

3. (Check one)

a. For Non-qualified PHAs:

(i) In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1).

OR

(ii) If the Annual PHA Plan has not been adopted by the PHA and approved by HUD, the PHA may use its CFP assistance under this contract for work items contained in its CFP-Five-Year Action Plan (HUD-50075.2), before the Annual PHA Plan is approved.

b. For Qualified PHAs:

(i) The CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1) has been adopted by the PHA and verified by HUD. The capital and management activities shall be carried out as described therein.

OR

(ii) If the CFP Annual Statement/Performance and Evaluation Report has not been adopted by the PHA and/or verified by HUD, the PHA may use its CFP assistance under this contract for work items contained in its approved CFP 5-Year Action Plan (HUD-50075.2), before the CFP Annual Statement/Performance and Evaluation Report is adopted by the PHA and verified by HUD.

Regardless of the selection above, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the United States Housing Act of 1937, as amended, (the "Act") and 48 month time period in which the PHA must expend this CFP assistance pursuant to section 9(j)(5) of the Act starts with the effective date of this CFP amendment (the date on which CFP assistance becomes available to the PHA for obligation).

4. Subject to the provisions of the ACC(s) and paragraph 3. and to assist in the capital and management activities, HUD agrees to disburse to the PHA or the designated trustee from time to time as needed up to the amount of the funding assistance specified herein.

5. The PHA shall continue to operate each development as low-income housing in compliance with the ACC(s), as amended, the Act and all HUD regulations for a period of twenty years after the last disbursement of CFP assistance for modernization activities and for a period of forty years after the last distribution of CFP assistance for development activities. However, the provisions of Section 7 of the ACC shall remain in effect for so long as HUD determines there is any outstanding indebtedness of the PHA to HUD which arose in connection with any development(s) under the ACC(s) and which is not eligible for forgiveness, and provided further that, for a period of ten years following the last payment of assistance from the Operating Fund to the PHA, no disposition of any development covered by this amendment shall occur unless approved by HUD.

6. The PHA will accept the entire CFP assistance amount for this FY. If the PHA does not comply with any of its obligations under this Amendment and does not have its Annual PHA Plan approved within the period specified by HUD, HUD shall impose such penalties or take such remedial action as provided by law. HUD may direct the PHA to terminate all work described in the Capital Fund Annual Statement of the Annual PHA Plan. In such case, the PHA shall only incur additional costs with HUD approval.

7. Implementation or use of funding assistance provided under this Amendment is subject to the attached corrective action order(s).

(mark one) :  Yes  No

8. The PHA acknowledges its responsibility for adherence to this Amendment.

The parties have executed this Agreement, and it will be effective on 9/15/2009. This is the date on which CFP assistance becomes available to the PHA for obligation.

**U.S. Department of Housing and Urban Development**

By [Signature]

Date 9/15/09

Title Acting Director

**PHA Executive Director**

By [Signature]

Date 9/14/09 Mark C. Carter

Title Executive Director

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

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2009</b>	
PHA Name: ECORSE HOUSINGCOMMISSION m1007b01		Grant Type and Number Capital Fund Program Grant No: M128P007501-09 Replacement Housing Factor Grant No: Date of CFP:	
		FFY of Grant Approval:	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		\$45,113.00	\$0	\$0	\$0
3	1408 Management Improvements		\$45,113.00	\$0	\$0	\$0
4	1410 Administration (may not exceed 10% of line 21)		\$29,556.50	\$0	\$0	\$0
5	1411 Audit		\$10,000.00	\$0	\$0	\$0
6	1415 Liquidated Damages		\$0	\$0	\$0	\$0
7	1430 Fees and Costs		\$0	\$0	\$0	\$0
8	1440 Site Acquisition		\$0	\$0	\$0	\$0
9	1450 Site Improvement		\$60,000.00	\$0	\$0	\$0
10	1460 Dwelling Structures		\$98,713.50	\$0	\$0	\$0
11	1465.1 Dwelling Equipment—Nonexpendable		\$0	\$0	\$0	\$0
12	1470 Non-dwelling Structures		\$0	\$0	\$0	\$0
13	1475 Non-dwelling Equipment		\$10,500.00	\$0	\$0	\$0
14	1485 Demolition		\$0	\$0	\$0	\$0
15	1492 Moving to Work Demonstration		\$0	\$0	\$0	\$0
16	1495.1 Relocation Costs		\$0	\$0	\$0	\$0
17	1499 Development Activities <sup>4</sup>		\$0	\$0	\$0	\$0

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

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

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

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: ECORSE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No: M28P007501-09 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		\$0		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)		\$0		
20	Amount of Annual Grant: (sum of lines 2 - 19)		\$298,996.00		
21	Amount of line 20 Related to LBP Activities		\$0		
22	Amount of line 20 Related to Section 504 Activities		\$0		
23	Amount of line 20 Related to Security - Soft Costs		\$0		
24	Amount of line 20 Related to Security - Hard Costs		\$0		
25	Amount of line 20 Related to Energy Conservation Measures		\$0		
Signature of Executive Director		Date 9/14/2009	Signature of Public Housing Director		Date

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

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

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

**Part II: Supporting Pages**

PHA Name: ECORSE HOUSING COMMISSION		Grant Type and Number Capital Fund Program Grant No: MI28P007501-09 CFPP (Yes/ No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2009				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised <sup>1</sup>	Total Actual Cost Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
Wade H. McCree Plaza and Voisine Terrace								
MI007	1406 Operations	1406		\$45,113.00				
	Vacant Unit Turnaround							
	Management Fees							
	Executive Director Payroll							
MI007	1408 Management Improvements	1408		\$45,113.00				
	Management Fees							
MI007	1410-Administration	1410		\$29,556.50				
MI007	1411-Audit	1411		\$10,000.00				

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



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

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2008</b>	
PHA Name: ECORSE HOUSINGCOMMISSION ml007b01		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: M128P007501-08 Replacement Housing Factor Grant No: Date of CFFP:			

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) Final Performance and Evaluation Report <input type="checkbox"/>	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			\$60,113.00	\$0	\$60,113.00	\$57,303.27
3	1408 Management Improvements			\$60,113.00	\$0	\$60,113.00	\$59,317.79
4	1410 Administration (may not exceed 10% of line 21)			\$30,056.50	\$0	\$30,056.50	\$30,056.50
5	1411 Audit			\$10,000.00	\$0	\$10,000.00	\$0
6	1415 Liquidated Damages			\$0	\$0	\$0	\$0
7	1430 Fees and Costs			\$0	\$0	\$0	\$0
8	1440 Site Acquisition			\$0	\$0	\$0	\$0
9	1450 Site Improvement			\$29,307.00	\$0	\$29,307.00	\$29,307.00
10	1460 Dwelling Structures			\$110,975.50	\$0	\$110,975.50	\$102,372.80
11	1465.1 Dwelling Equipment—Nonexpendable			\$0	\$0	\$0	\$0
12	1470 Non-dwelling Structures			\$0	\$0	\$0	\$0
13	1475 Non-dwelling Equipment			\$0	\$0	\$0	\$0
14	1485 Demolition			\$0	\$0	\$0	\$0
15	1492 Moving to Work Demonstration			\$0	\$0	\$0	\$0
16	1495.1 Relocation Costs			\$0	\$0	\$0	\$0
17	1499 Development Activities <sup>4</sup>			\$0	\$0	\$0	\$0

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

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

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

<b>Part I: Summary</b>		FFY of Grant: 2008	
PHA Name: ECORSE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No: M128P007501-08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	
18a	1501 Collateralization or Debt Service paid by the PHA	\$0		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment			
19	1502 Contingency (may not exceed 8% of line 20)	\$0		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$300,565.00	\$0	\$278,357.36
21	Amount of line 20 Related to LBP Activities	\$0		
22	Amount of line 20 Related to Section 504 Activities	\$0		
23	Amount of line 20 Related to Security - Soft Costs	\$0		
24	Amount of line 20 Related to Security - Hard Costs	\$0		
25	Amount of line 20 Related to Energy Conservation Measures	\$0		

Signature of Executive Director \_\_\_\_\_ Date 9/14/2009 Signature of Public Housing Director \_\_\_\_\_ Date \_\_\_\_\_

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







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

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2007</b>	
PHA Name: ECORSE HOUSINGCOMMISSION mi007b01		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: M128P007501-07 Replacement Housing Factor Grant No:			
Date of CFP:			

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:3 ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			\$25,455.00	\$25,455.00	\$25,455.00	\$25,455.00
3	1408 Management Improvements			\$25,455.00	\$25,455.00	\$25,455.00	\$25,455.00
4	1410 Administration (may not exceed 10% of line 21)			\$12,727.00	\$12,727.00	\$12,727.00	\$12,727.00
5	1411 Audit			\$10,000.00	\$10,000.00	\$10,000.00	\$0
6	1415 Liquidated Damages			\$0	\$0	\$0	\$0
7	1430 Fees and Costs			\$0	\$0	\$0	\$0
8	1440 Site Acquisition			\$0	\$0	\$0	\$0
9	1450 Site Improvement			\$10,000.00	\$11,850.00	\$11,850.00	\$11,850.00
10	1460 Dwelling Structures			\$43,640.00	\$41,790.00	\$41,790.00	\$41,790.00
11	1465.1 Dwelling Equipment—Nonexpendable			\$0	\$0	\$0	\$0
12	1470 Non-dwelling Structures			\$0	\$0	\$0	\$0
13	1475 Non-dwelling Equipment			\$0	\$0	\$0	\$0
14	1485 Demolition			\$0	\$0	\$0	\$0
15	1492 Moving to Work Demonstration			\$0	\$0	\$0	\$0
16	1495.1 Relocation Costs			\$0	\$0	\$0	\$0
17	1499 Development Activities <sup>4</sup>			\$0	\$0	\$0	\$0

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

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

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<b>Part I: Summary</b>		FFY of Grant: 2007	
PHA Name: ECORSE HOUSING COMMISSION	Grant Type and Number Capital Fund Program Grant No: M128P007501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		\$0		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)		\$0		
20	Amount of Annual Grant: (sum of lines 2 - 19)		\$127,277.00	\$127,277.00	\$117,277.00
21	Amount of line 20 Related to LBP Activities		\$0		
22	Amount of line 20 Related to Section 504 Activities		\$0		
23	Amount of line 20 Related to Security - Soft Costs		\$0		
24	Amount of line 20 Related to Security - Hard Costs		\$0		
25	Amount of line 20 Related to Energy Conservation Measures		\$0		

Signature of Executive Director *[Signature]* Date 9/14/2009

Signature of Public Housing Director \_\_\_\_\_ Date \_\_\_\_\_

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