

# **PHA Plans**

## **Streamlined Annual Version**

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

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

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

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

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# **Streamlined Annual PHA Plan**

## **for Fiscal Year: 2009**

### **PHA Name: Housing Authority of Lincoln County – OR 005**

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

## Streamlined Annual PHA Plan Agency Identification

**PHA Name:** Housing Authority of Lincoln County      **PHA Number:** OR 005

**PHA Fiscal Year Beginning:** 01/01/2009

**PHA Programs Administered:**

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

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

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

**PHA Plan Contact Information:**

Name: Joanne Troy      Phone: (541) 265-5326  
 TYY: 800 735-1232      Email (if available): jtroy.halc@newportnet.com

**Public Access to Information**

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

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

**Display Locations For PHA Plans and Supporting Documents**

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

If yes, select all that apply:

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

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

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

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

**Table of Contents**

[24 CFR 903.7(r)]

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

**A. PHA PLAN COMPONENTS**

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

**B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE**

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

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

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

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

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

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

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

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

#### **A. Site-Based Waiting Lists-Previous Year**

1. Has the PHA operated one or more site-based waiting lists in the previous year? No If yes, complete the following table; if not skip to B.

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

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

#### **B. Site-Based Waiting Lists – Coming Year**

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

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

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

## **2. Capital Improvement Needs**

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

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

### **A. Capital Fund Program**

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

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

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

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

### HOPE VI Revitalization Grant Status

a. Development Name:

b. Development Number:

c. Status of Grant:

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

3.  Yes  No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name(s) below:

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

5.  Yes  No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below: Per our 2008 Plan, the Housing Authority of Lincoln County intends to submit a disposition plan for 22 single family homes with corresponding plan to replace the disposed of units with new public housing units. Specifically, Project Number OR5007 and Project Number OR5011.

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

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

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

2. Program Description:

a. Size of Program

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

If the answer to the question above was yes, what is the maximum number of participants this fiscal year? Maximum number of participants added each year is 5 not to exceed a total of 5% of the total vouchers allocated to the Housing Authority of Lincoln County (25).

b. PHA-established eligibility criteria

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

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

Information will be distributed to all Section 8 Families at their Recertification Dates HALC will partner with Community Services Consortium to provide access and information regarding first-time homebuyer classes.

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

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

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

*The Executive Director has over twenty-five years of experience building affordable homeownership housing. This experience includes construction, marketing, homeowner training, credit counseling and financing. The Housing Authority of Lincoln County has sufficient personnel to administer the program and assist buyers in locating appropriate potential homes.*

*The Housing Authority of Lincoln County maintains an active partnership with Community Services Consortium. This agency provides homebuyer education programs and credit counseling in Lincoln County.*

## **4. Use of the Project-Based Voucher Program**

### **Intent to Use Project-Based Assistance**

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

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

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

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

## **5. PHA Statement of Consistency with the Consolidated Plan**

[24 CFR Part 903.15]

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

1. Consolidated Plan jurisdiction: (provide name here)

Oregon Housing & Community Services – Salem, Oregon

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

- The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

Strategy One: Expand housing opportunities for the “Working Poor” through the creation and/or rehabilitation of affordable housing.

Strategy Two: Provide options for supportive social services along with affordable housing opportunities and improve the coordination between service providers and housing providers.

- Other: (list below)

The PHA has based its statement of needs for families on its PHA waiting lists on the needs expressed in the Consolidated Plan

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

Oregon Housing & Community Services provided the Certification of Consistency with the State Consolidated Plan for the 2008 plan. No changes have been made to the plan that require this certification for 2009. We have not requested the certification this year.

## **Violence Against Women Act Report**

**A goal of the Housing Authority of Lincoln County is to fully comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offenses covered by VAWA to the degree we can.**

**The Housing Authority of Lincoln County provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking.**

HALC maintains relationships with available Lincoln County agencies that provide direct services to victims of domestic violence, dating violence, sexual assault or stalking, My Sisters' Place, Victim Assistance, Legal Aid. Staff makes referrals to these agencies.

**The Housing Authority of Lincoln County provides or offers the following activities, services, or programs that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.**

The Oceanspray Family Center does provide resident services to public housing tenants on a referral basis. In addition, HALC provides several youth programs; HALC is a member agency of the Youth Development Coalition of Lincoln County and provides after-school and child care programs.

**The Housing Authority of Lincoln County provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.**

Housing Authority of Lincoln County monitors the police activity reports for PHA owned properties and works collaboratively with local law enforcement and service provider agencies to provide services for tenants.

**The Housing Authority of Lincoln County has the following procedures in place to assure applicants and residents are aware of their rights under the Violence Against Women Act.**

The Housing Authority of Lincoln County (HALC) has adopted a policy (the "HALC VAWA Policy") to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA). HALC's goals, objectives and policies to enable HALC to serve the needs of child and adult victims of domestic violence, dating violence and stalking, as defined in VAWA, are stated in the AHA VAWA Policy.

All tenants and HCV program participants have been notified of the VAWA provisions and the notification has been incorporated into new lease up, and recertification documentation that is given to tenants.

**5. Supporting Documents Available for Review for Streamlined Annual PHA Plans** - PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

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

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

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Housing Authority of Lincoln County		Grant Type and Number Capital Fund Program Grant No: OR16P005501-09 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	106,500			
3	1408 Management Improvements				
4	1410 Administration	21,359			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	56,000			
11	1465.1 Dwelling Equipment—Nonexpendable	34,999			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	218,858			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	34,999			

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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>							
PHA Name: Housing Authority of Lincoln County		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No:			Federal FY of Grant: 2009		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended
PHA - Wide	Operations	1406		106,500			
	Administration	1410		21,359			
OR 5001	Fircrest painting	1460	10 units	17,000			
Fircrest Apts	Fircrest Roofs	1460	10 units	39,000			
OR 5005							
Site A	Furnaces & duct work	1465.1	6 units	16,154			
Site C	Furnaces & duct work	1465.1	3units	8,077			
Site D	Furnaces & duct work	1465.1	4 units	10,768			
Total				218,858			

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

PHA Name: Housing Authority of Lincoln County		Grant Type and Number Capital Fund Program No: OR16P005501-09 Replacement Housing Factor No:					Federal FY of Grant: 2009	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
PHA-wide	08/17/11			08/17/13				
OR5001	08/17/11			08/17/13				
OR 5002	08/17/11			08/17/13				
OR 5005	08/17/11			08/17/13				

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

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: Housing Authority of Lincoln County			Grant Type and Number Capital Fund Program Grant No: OR16P005501-08 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 02) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 6/30/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	114,727	114,727		
3	1408 Management Improvements				
4	1410 Administration	21,330	21,330		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	67,242	69,742		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	10,000	7,500		
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	213,299	213,299		
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Housing Authority of Lincoln County			Grant Type and Number Capital Fund Program Grant No: OR16P005501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations			114,727	114,727			
	Administration			21,330	21,330			
<b>OR 5002</b>	Exterior Painting	1470	1	10,000	7,500			
Oceanspray Family Center								
<b>OR 5001</b> Fircrest Apts	Exterior painting	1460	10	17,742	17,742			
	roof structure repair & roofing replacement	1460	5	25,000	44,500			
<b>OR 5005</b>								
Site A	Replace main elec boxes	1460	2	0	0			Done in 07
Site A	Exterior painting & trim repair	1460	11	24,500	7,500			
	<b>Total</b>			213,299	213,299			

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of Lincoln County		Grant Type and Number Capital Fund Program No: OR16P005501-08 Replacement Housing Factor No:				Federal FY of Grant: 2008	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA-wide	6/12/10			06/12/12			
OR5001	6/12/10			06/12/12			
OR 5002	6/12/10			06/12/12			
OR 5005	6/12/10			06/12/12			

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

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: <b>HOUSING AUTHORITY OF LINCOLN COUNTY</b>			Grant Type and Number Capital Fund Program Grant No: OR16P005501-07 Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2007</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$115,070	\$113,070	113,070	
3	1408 Management Improvements	\$30,000	\$ 30,000		
4	1410 Administration	\$19,807	\$ 19,807	10,497	3,050
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$7,697	11310	11310	11310
10	1460 Dwelling Structures	\$3,500	0		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$22,000	\$23,887		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collectivization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$198,074	\$198,074	134,877	14,360
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs	\$0	\$ 0		
26	Amount of line 21 Related to Energy Conservation				

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

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF LINCOLN COUNTY			Grant Type and Number Capital Fund Program Grant No: OR16P005501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		\$115,070	\$113,070	113,070		
PHA-Wide	Management – New computer system , software & training PHA	1408		\$30,000	\$30,000			
PHA-Wide	Administration	1410		\$19,807	\$19,807	10,497	3,050	
OR5011	12143 Coos Window Replacement	1460	1	0	0			moved to 2010
OR5011	12214 Coos Window Replacement	1460	1	0	0			moved to 2010
OR5011	12164 Coos Window Replacement	1460	1	0	0			moved to 2010
<b>OR 5007</b>								
	South Beach House Replace Septic tank & pump (emergency) kitchen cabinets	1450	1	7,697	11,310	11,310	11,310	complete
PHA Wide	Computer Hardware PHA	1475		22,000	\$23,887	134,877	14,360	
Total								
TOTAL FUNDING AMOUNT					\$198,074	\$198,074		



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

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: <b>HOUSING AUTHORITY OF LINCOLN COUNTY</b>		Grant Type and Number Capital Fund Program Grant No: OR16P005501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2006</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	148,835	148,835	148,835	65,133
3	1408 Management Improvements				
4	1410 Administration	21,451	21,451	21,451	21,754
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	11,725	7,400		
10	1460 Dwelling Structures	32,500	36,825	14,000	24,272
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collectivization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	214,511	214,511	214,511	111,159
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation	7,820	7,820		

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

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: HOUSING AUTHORITY OF LINCOLN COUNTY			Grant Type and Number Capital Fund Program Grant No: OR16P005501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		148,835	148,835	148,835	65,133	
	Administration	1410		21,451	21,451	21,451	21,754	
<b>OR5007</b>								
Otter Rock House	Siding, Bathroom floor and porch repair	1460	1	2,000	5,669	5,669	0	Move to 2009
South Beach House	Furnace Duct, Vapor Barrier & Floor Insulation replacement, kitchen repair	1460	1	9,500	7,820	7,820	7,397	95% done
Seal Rock House	Window Replacement	1460	1	0	0	0	0	
Neotsu House	Window Replacement	1460	1	6,500	0	0	0	Moved to 2009
Kimo Lane	Front & Back porch improvement	1460	1	3,000	2,796	2,796	2,796	done
Benton Street	Replace septic sand filter (emergency)	1450	1	11,725	7,400	7,400	0	Emergency
<b>OR 5002</b>								
Oceanspray Apartments	Exterior painting & trim repair	1460	25	10,000	11,378	11,378	10,917	Moved from 2008
<b>OR 5001 - Fircrest</b>	Exterior painting & siding repair	1460	15	5,000	6,000	6,000	0	Moved from 2009
<b>OR5014</b>								
Coast/High Apts	Siding & Paint	1460	1	0		0	0	
	Fencing	1460	1	3000	3162	3162	3162	done
						0	0	
						0	0	
TOTAL FUNDING AMOUNT				214,511	214,511	214,511	111,159	

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

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
PHA Name: Housing Authority of Lincoln County			Grant Type and Number Capital Fund Program No: OR16P005501-06 Replacement Housing Factor No:				Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
OR5001	7/17/08		6/30/08	7/17/09			
OR5002	7/17/08		6/30/08	7/17/09			
OR5007	7/17/08		6/30/08	7/17/09			
OR5014	7/17/08		6/30/08	7/17/09			

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

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
PHA Name: <b>HOUSING AUTHORITY OF LINCOLN COUNTY</b>		Grant Type and Number Capital Fund Program Grant No: <b>OR16P005501-05</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>FFY 2005</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2008 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	<b>1406 Operations</b>	<b>167,167</b>		167,167	167,167
3	1408 Management Improvements				
4	1410 Administration	<b>21,750</b>		21,750	21,750
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	<b>1460 Dwelling Structures</b>	<b>23,481</b>		23,481	23,481
11	1465.1 Dwelling Equipment—Nonexpendable	<b>\$5,194</b>		5,194	5,194
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	<b>0</b>		0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$217,592</b>		217,592	217,592
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	<b>\$3,625</b>		3,625	3,625

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: <b>HOUSING AUTHORITY OF LINCOLN COUNTY</b>		Grant Type and Number Capital Fund Program Grant No: <b>OR16P005501-05</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>FFY 2005</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	OPERATIONS	1406		167,167		167,167	167,167	
	Administration	1410		21,750		21,750	21,750	
OR5005	<b>Dwelling Structures – Site D – 3 Units</b>							
	Floor covering replacement	1460	4	18,131		18,131	18,131	done
	Kitchen Renovation Counter, sink, faucet, vent	1460	4	3,000		3,000	3,000	done
	Bathroom Renovation Counter, sink, shower valve, faucet, mirror, toilet	1460	5	2,350		2,350	2,350	done
	<b>Total</b>	<b>1460</b>		23,481		23,481	23,481	done
	Appliance Replacements	1465.1	5	5,194		5,194	5,194	done
	<b>Total</b>	<b>1465.1</b>		5,194		5,194	5,194	
	<b>OR5005 Project Total</b>			28,675		28,675	28,675	
	Contingency	1502		0		0	0	
	<b>Total Funding Amount</b>			217,592		217,592	159,827	



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

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

**Part I: Summary**

PHA Name Housing Authority of Lincoln County		<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 01			
Development Number/Name/ HA-Wide	Year 1 2009	Work Statement for Year 2  FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 3  FFY Grant: 2011 PHA FY: 2011	Work Statement for Year 4  FFY Grant: 2012 PHA FY: 2012	Work Statement for Year 5  FFY Grant: 2013 PHA FY: 2013
PHA-Wide-Operation	Annual Statement	\$107,000	\$111,200	\$116,000	\$120,000
PHA-Wide Administration		\$20,500	\$21,000	\$21,500	\$21,500
Management Improvements		0	0	0	\$5,000
Non-dwelling equipment				\$25,000	0
5001		0	\$42,000		0
5002		\$17,500	\$7,800	\$42,500	\$25,500
5005		\$60,000	\$8,000	0	\$15,000
5007		0	0	0	0
5010		0	28,000	0	\$16,000
5011		0			0
5013				10,000	
5014					12,000
CFP Funds Listed for 5- year planning		\$205,000	\$210,000	\$215,000	\$215,000





PHA Name: Housing Authority of Lincoln County  
HA Code: OR - 005

Streamlined Annual Plan for Fiscal Year 2009

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the *Streamlined 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 streamlined Annual PHA Plan for PHA fiscal year beginning 01/01/2009, hereinafter referred to as the Streamlined Annual Plan, of which this document is a part and make the following certifications, agreements with, and assurances to the Department of Housing and Urban Development (HUD) in connection with the submission of the Streamlined Plan and implementation thereof:*

1. The streamlined Annual Plan is consistent with the applicable comprehensive housing affordability strategy (or any streamlined Plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, and provided this Board or Boards an opportunity to review and comment on any program and policy changes since submission of the last Annual Plan.
3. The PHA made the proposed streamlined Annual Plan, including policy and program revisions since submission of the last Annual 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 streamlined Plan and invited public comment.
4. The PHA will carry out the streamlined Annual 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.
5. 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.
6. For streamlined Annual Plans that include a policy or change in policy for site-based waiting lists:  
The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(b)(2).
7. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
8. 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.
9. 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.
10. The PHA has submitted with the streamlined Plan a certification with regard to a drug-free workplace required by 24 CFR Part 24, Subpart F.
11. The PHA has submitted with the streamlined Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.
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 HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
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.



# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of Lincoln County

Program/Activity Receiving Federal Grant Funding

Public Housing Agency Plan and Capital Fund for FY 2009

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:

- (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.

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 ---

**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.)

See attached

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

Title

Joanne Troy

Executive Director

Signature

Date

X

5/19/2009

**HOUSING AUTHORITY OF LINCOLN COUNTY  
PUBLIC HOUSING  
DRUG FREE WORKPLACE CERTIFICATION**

**PROJECT NUMBER: OR5001**

1-31 FIRCREST WAY                      TOLEDO                      97391

**PROJECT NUMBER: OR5002**

348 NW 11 <sup>TH</sup> ST	NEWPORT	97365
1118 NW LAKE	NEWPORT	97365
1126 NW LAKE	NEWPORT	97365
1136 NW LAKE	NEWPORT	97365
1150 NW LAKE	NEWPORT	97365
335 NW 12 <sup>TH</sup>	NEWPORT	97365
1135 NW LEE	NEWPORT	97365
1125 NW LEE	NEWPORT	97365
117 NW LEE	NEWPORT	97365
332 NW 11 <sup>TH</sup>	NEWPORT	97365
1118 NW LEE	NEWPORT	97365
1130 NW LEE	NEWPORT	97365
1138 NW LEE	NEWPORT	97365
321 NW 12 <sup>TH</sup>	NEWPORT	97365
305 NW 12 <sup>TH</sup>	NEWPORT	97365
1137 NW NYE	NEWPORT	97365
1129 NW NYE	NEWPORT	97365
1119 NW NYE	NEWPORT	97365
1105 NW NYE	NEWPORT	97365
318 NW 11 <sup>TH</sup>	NEWPORT	97365
1049 NW NYE	NEWPORT	97365
315 NW 11 <sup>TH</sup>	NEWPORT	97365
323 NW 11 <sup>TH</sup>	NEWPORT	97365
336 NW 11 <sup>TH</sup>	NEWPORT	97365
349 NW 11 <sup>TH</sup>	NEWPORT	97365
1038 NW LAKE	NEWPORT	97365
1030 NW LAKE	NEWPORT	97365
1018 NW LAKE	NEWPORT	97365
1014 NW LAKE	NEWPORT	97365
1004 NW LAKE	NEWPORT	97365

**PROJECT NUMBER: OR005**

142 SW HIGH #1	NEWPORT	97365
142 SW HIGH #2	NEWPORT	97365
142 SW HIGH #3	NEWPORT	97365
142 SW HIGH #4	NEWPORT	97365
142 SW HIGH #5	NEWPORT	97365
612 NW 10 <sup>TH</sup> #1	NEWPORT	97365
612 NW 10 <sup>TH</sup> #2	NEWPORT	97365
612 NW 10 <sup>TH</sup> #3	NEWPORT	97365
612 NW 10 <sup>TH</sup> #4	NEWPORT	97365
612 NW 10 <sup>TH</sup> #5	NEWPORT	97365
612 NW 10 <sup>TH</sup> #6	NEWPORT	97365
1021 NW SPRING #7	NEWPORT	97365
1021 NW SPRING#8	NEWPORT	97365
1021 NW SPRING #9	NEWPORT	97365
1021 NW SPRING#10	NEWPORT	97365
1021 NW SPRING #11	NEWPORT	97365
312 NW 10 <sup>TH</sup>	NEWPORT	97365
314 NW 10 <sup>TH</sup>	NEWPORT	97365
318 NW 10 <sup>TH</sup>	NEWPORT	97365
318 NW 10 <sup>TH</sup>	NEWPORT	97365
535 SW 10 <sup>TH</sup> #1	NEWPORT	97365
535 SW 10 <sup>TH</sup> #2	NEWPORT	97365
535 SW 10 <sup>TH</sup> #3	NEWPORT	97365
535 SW 10 <sup>TH</sup> #4	NEWPORT	97365
535 SW 10 <sup>TH</sup> #5	NEWPORT	97365

**PROJECT NUMBER: OR5007**

60 SPRUCE CT	DEPOE BAY	97341
661 MOFFIT RD	WALDPOR	97394
515 1 <sup>ST</sup> ST	OTTER ROCK	97369
3694 JOHNS LOOP	NEOTSU	97364
731 KIMO LANE	WALDPOR	97394
938 LANAI LOOP	SEAL ROCK	97376
12214 NE COOS	NEWPORT	97365
12143 NE COOS	NEWPORT	97365
12242 NE BENTON	NEWPORT	97365
12164 COOS	NEWPORT	97365
215 SE 97 <sup>TH</sup>	NEWPORT	97365
	SEAL ROCK	97378

**PROJECT NUMBER: OR5010**

45 SE COOK #1  
45 SE COOK #2  
45 SE COOK #3

DEPOE BAY 97341  
DEPOE BAY 97341  
DEPOE BAY 97341

450 SE COLLINS #1  
450 SE COLLINS#2  
450 SE COLLINS#3

DEPOE BAY 97341  
DEPOE BAY 97341  
DEPOE BAY 97341

**PROJECT NUMBER: OR5011**

626 NW COTTAGE  
636 NW COTTAGE  
159 NW 55<sup>TH</sup> ST  
181 NW 55<sup>TH</sup> ST.  
28 NW COTTAGE  
952 NW HURBERT  
115 NW COTTAGE  
919 NW NYE  
457 NE 8<sup>TH</sup> ST  
728 AVERY ST

NEWPORT 97365  
NEWPORT 97365

**PROJECT NUMBER: OR5013**

5632 NW GLADYS  
5634 NW GLADYS  
5642 NW GLADYS  
5644 NW GLADYS

NEWPORT 97365  
NEWPORT 97365  
NEWPORT 97365  
NEWPORT 97365

**PROJECT NUMBER: OR5014**

734 NW COAST ST  
735 NW HIGH ST  
736 NW COAST ST  
737 NW HIGH ST

NEWPORT 97365  
NEWPORT 97365  
NEWPORT 97365  
NEWPORT 97365

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of Lincoln County

Program/Activity Receiving Federal Grant Funding

Public Housing Annual Agency Plan and Capital Fund for FY 2009

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

Joanne Troy

Title

Executive Director

Signature

Date (mm/dd/yyyy)

5/19/2009

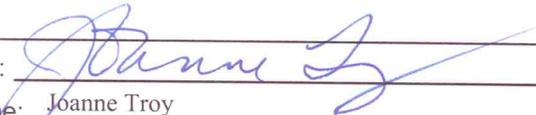
## DISCLOSURE OF LOBBYING ACTIVITIES

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"/> c. a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> b. a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year <u>2009</u> quarter <u>2</u> date of last report <u>10/14/2008</u>
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Congressional District, if known: <u>4c</u>	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  Congressional District, if known:	
<b>6. Federal Department/Agency:</b> U.S. Department of Housing & Urban Development	<b>7. Federal Program Name/Description:</b> 2009 Agency Annual Plan and Capital Fund CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b> n/a	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI): none	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI): none	
<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:  Print Name: <u>Joanne Troy</u> Title: <u>Executive Director</u> Telephone No.: <u>541 265-5326</u> Date: <u>5/19/2009</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

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>PHA Name: Housing Authority of Lincoln County</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: OR16S00550109 Replacement Housing Factor Grant No: Date of CFFP:		<b>FY of Grant: 2009</b> <b>FY of Grant Approval: 2009</b>	
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Summary by Development Account	Original	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>
				Revised <sup>2</sup>	Final Performance and Evaluation Report		
1		Total non-CFP Funds					
2		1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3		1408 Management Improvements					
4		1410 Administration (may not exceed 10% of line 21)	18,994	18,994			
5		1411 Audit					
6		1415 Liquidated Damages					
7		1430 Fees and Costs					
8		1440 Site Acquisition	8,700	6,000			
9		1450 Site Improvement					
10		1460 Dwelling Structures	15,000	18,200			
11		1465.1 Dwelling Equipment—Nonexpendable	215,300	215,800			
12		1470 Non-dwelling Structures	3,000	0			
13		1475 Non-dwelling Equipment	9,000	9,000			
14		1485 Demolition					
15		1492 Moving to Work Demonstration					
16		1495.1 Relocation Costs					
17		1499 Development Activities <sup>4</sup>					

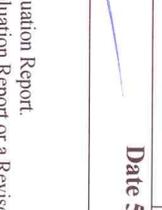
<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall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

<b>Part I: Summary</b>		PHA Name: Housing Authority of Lincoln County		Grant Type and Number Capital Fund Program Grant No: OR16S00550109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
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Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending:       Revised Annual Statement (revision no: 01 )  
 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				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)	0	2,000		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	269,994	269,994		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	28,500	28,500		
Signature of Executive Director 		Date 5/12/2009	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.

**Part II: Supporting Pages**

PHA Name: Housing Authority of Lincoln County		Grant Type and Number Capital Fund Program Grant No: OR16S00550109 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	Total Actual Cost	Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>
PHA-Wide	Administration - document prep, bidding contract mgt., construction supervision wage rate compliance	1410		18,994	18,994		
	Fees & Costs Bid Document Preparation & construction supervision	1430		8,700	6,000		
OR005000001	AMP 1						
old project OR5001 Fircrest	Replace balance of roofs, repair trim as needed (10 units included in 09 cap fund)	1460	20 units	76,000	76,000		
old project OR5002 Oceanspray	Purchase new sinks, faucets, waterlines drains and shut offs for bathrooms and new vanity wall cabinets. Install with force account labor	1460	27 units	20,000	20,000		
old project OR5005- A	Replace roof access doors	1460	3 doors	2,500	2,500		
Site B	Utilizing force account labor, paint exterior - replace trim as needed Contract for new gutters	1460	5 units	5,000	5,000		
	Contract for new gutters	1460	5 units	2,500	2,500		
Site C	Replace roof, repair trim as needed Using force account labor paint exterior Contract for new gutters	1460	4 units	22,000	22,000		
	Using force account labor paint exterior	1460	4 units	3,500	3,500		
	Contract for new gutters	1460	4 units	1,800	1,800		

<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

**Part II: Supporting Pages**

PHA Name: Housing Authority of Lincoln County		Grant Type and Number Capital Fund Program Grant No: OR16S00550109 CFPP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2009		Total Actual Cost		Status of Work
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
5005 - Site D	Using force account labor paint exterior	1460	5 units	8,000	8,000			yr 3, 09 5yr plan
	New retaining wall	1450	5 units	4,000	4,000			new item
OR005000002	AMP 2							
old project OR5007	Replace windows	1460	1	7,500	7,500			yr 5, 09 5yr plan
	Replace roof	1460	1	7,000	7,000			new item
	New furnace	1460 (ini 1465.1)	1	3,000	3,000			new item
936 Lanai Loop, Seal Rock	Using force account labor, paint exterior - repair trim as needed	1460	1 unit	3,000	3,000			new item
731 Kimo Lane, Seal Rock	Install new retaining wall (08 REAC deficiency)	1450	1 unit	5,000	5,000			new item
old project OR5010	Construct 2 new storage areas	1470	2 units	4,500	4,500			new item
	New rear fence	1450	3 units	2,500	2,500			new item
	Using force account labor paint trim	1460	3 units	1,250	0			
	Replace Electrical Boxes	1460	3 units	2,500	2,500			yr 5, 09 5yr plan
Collins Street	Construct 2 new storage areas	1470	2 units	4,500	4,500			new item
	Install two new exterior doors	1460	2 units	4,000	4,000			new item
	Install new site drainage	1450	3 units	3,500	3,500			new item

5010 - continued	Replace Electrical Boxes	1460	3 units	2,500	2,500			yr 5, 09 5yr plan
	Using force account labor paint trim	1460	3 units	1,250	0			
old project OR5011 626 NW Cottage	Purchase new kitchen cabinets, counter & sink. Install with force account labor	1460	1 unit	3,000	3,000			new item
	New flooring entire unit	1460	1 unit	5,000	5,000			new item
	New gutters	1460	1 unit	1,500	1,500			new item
	Remove cracked concrete driveway and replace	1450	1 unit	0	3,200			new item
636 NW Cottage	Using force account labor paint exterior, prep and repair as necessary	1460	1 unit	2,500	2,500			new item
159 NW 55 <sup>th</sup> Street	Using force account labor paint exterior Install new windows	1460 1460	1 unit 1 unit	2,500 6,000	2,500 6,000			new item new item
161 NW 55 <sup>th</sup> Street	Using force account labor paint exterior Install new windows	1460 1460	1 unit 1 unit	2,500 6,000	2,500 6,000			new item new item
115 NW Cottage Street	Using force account labor paint exterior	1460	1 unit	2,500	2,500			new item
457 NE 8 <sup>th</sup> Street	Using force account labor paint exterior Install new windows	1460 1460	1 unit 1 unit	2,500 6,000	2,500 6,000			new item new item
12242 NE Benton Street, Newport	Repair siding and trim as needed Using force account labor, paint exterior	1460 1460	1 unit 1 unit	2,500 2,500	2,500 2,500			new item new item
	Total Amount of Grant			\$269,994	\$269,994			

<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

**Part III: Implementation Schedule for Capital Fund Financing Program**  
 PHA Name: Housing Authority of Lincoln County

**Federal FY of Grant: 2009**

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA - wide	3/31/2010		3/31/2012		
5001 - Fircrest	3/31/2010		3/31/2011		
5002 - Oceanspray	3/31/2010		3/31/2011		
5005 - Site A	3/31/2010		3/31/2011		
5005 - Site B	3/31/2010		3/31/2011		
5005 - Site C	3/31/2010		3/31/2011		
5005 - Site D	3/31/2010		3/31/2012		
5007 - Neotsu House	3/31/2010		3/31/2012		
5007 - 936 Lanai Loop	3/31/2010		3/31/2012		
5007 - 731 Kimo Lane	3/31/2010		3/31/2012		
5010 - Cook Street	3/31/2010		3/31/2012		
5010 - Collins Street	3/31/2010		3/31/2012		
5011 - 626 NW Cottage	3/31/2010		3/31/2011		
5011 - 636 NW Cottage	3/31/2010		3/31/2011		
5011 - 159 NW 55 <sup>th</sup> Street	3/31/2010		3/31/2011		
5011 - 161 NW 55 <sup>th</sup> Street	3/31/2010		3/31/2011		
5011 - 115 NW Cottage	3/31/2010		3/31/2011		
5011 - 12242 NE Benton St.	3/31/2010		3/31/2011		
457 NE 8 <sup>th</sup> Street	3/31/2010		3/31/2011		

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