| PHA 5-Year and Annual Plan | U.S. Department of Housing and Urban Development<br>Office of Public and Indian Housing | OMB No. 2577-0226<br>Expires 4/30/2011 |
|---|---|---|

**1.0** **PHA Information**
PHA Name: ANNISTON HOUSING AUTHORITY PHA Code: AL004
PHA Type: ☐ Small ☐ High Performing ☒ Standard ☒ HCV (Section 8)
PHA Fiscal Year Beginning: (MM/YYYY): 04/2010

**2.0** **Inventory** (based on ACC units at time of FY beginning in 1.0 above)
Number of PH units: 748 Number of HCV units: 246

**3.0** **Submission Type**
☒ 5-Year and Annual Plan ☐ Annual Plan Only ☐ 5-Year Plan Only

**4.0** **PHA Consortia** ☐ 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 | |
|---|---|---|---|---|---|
| | | | | PH | HCV |
| PHA 1: | | | | | |
| PHA 2: | | | | | |
| PHA 3: | | | | | |

**5.0** **5-Year Plan.** Complete items 5.1 and 5.2 only at 5-Year Plan update.

**5.1** **Mission.** State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:

The basic mission of the Anniston Housing Authority is to serve the needs of low-income persons in the PHA jurisdiction as follows:

Promote adequate and affordable housing

- Promote economic opportunity
- Promote a suitable living environment free from discrimination.

The Anniston Housing Authority's mission is to provide drug free, decent, safe and sanitary housing for eligible individuals and families and to provide opportunities and promote self-sufficiency and economic independence for residents. In order to achieve this mission, we will:

- Recognize residents as our ultimate customer;
- Improve Public Housing Authority (HA) management and service delivery efforts through effective and efficient management of HA staff;
- Seek problem-solving partnerships with residents, community, and government leadership;
- Apply HA resources, to the effective and efficient management and operation of public housing programs, taking into account changes in Federal funding.
- Comply and Support the Violence Against Women and Justice Department Reauthorization Act 2005
- The HA 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.

**5.2** **Goals and Objectives.** Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

The Anniston Housing Authority is beginning a new 5-Year Plan. The following are our goals for this plan.

- Continue aggressive marketing efforts to maintain a minimum of 5% vacancies in public housing. We would further like to reduce this number to below 3%. Currently at 3.6% vacancy.
- Apply for 100-200 additional Housing Choice Vouchers if funding becomes available. Currently the HCV program is 100% leased up and has approximately 350 applicants on a waiting list.
- Explore alternative funding methods to modernized public housing properties beyond HUD Capital Fund

Programs. A most recent physical needs assessment reveals a need of almost $20 million to improve current housing stock.

- Continue to be a high performer under the SEMAP scoring criteria. Currently 100%.
- Will strive to be a high performer under the future revised PHAS system when implemented.
- Seek additional ways to make the current asset management program more profitable for the 3 AMPS. Currently, all AMPS thru year one have been self-sustaining.
- Currently working with modernization funding to improved key REAC inspection areas (i.e., windows and doors in AMP 1 and 3).
- Implement a better security plan for residents through joint efforts with the Anniston Police Department.
- Apply for Tax Credit funding to assist with modernization needs.

Previous 5-Year Plan Goals:

- Reduce vacancy rate to 5% from 8.62%. Current 3.6%
- Improve SEMAP score to above 90%. Current 100%
- Install Air Conditioning at Glen Addie Homes, Parkwin Homes and Washington Homes. Currently installed but in litigation with Mitsubishi with units at Glen Addie Homes.
- Have applied for various vouchers but have not been funded.
- Are continuing to encourage families to seek employment with HUD mandated income disregards.

**6.0**

**PHA Plan Update**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

The Anniston Housing Authority was awarded ARRA (American Recovery and Reinvestment Act) in the amount $ 1,512,258 for grant number AL09S00450109. The Anniston Housing Authority is using these funds for window replacement and roofing at Constantine Homes and roofing at Glen Addie Homes. Additional items in the 5 year action plan will be moved forward.

The Housing Authority plans to make an application for tax credit funding to assist with modernization for Glen Addie Homes and Constantine homes. Currently we are in planning phase discussions with Mercy Housing Group and Olympia Construction.

The Anniston Housing Authority is currently working on revisions to the ACOP, Section 8 Admin Plan, Pet Policy and lease as provided by our state association (AAHRA). Once these items are ready for board approval, these documents will be placed for public comment.

(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.

The Anniston Housing Authority's Central Office located at 500 Glen Addie Ave, Anniston, AL 36201.

## **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.

**PUBLIC HOUSING**

## Eligibility for Admission and Processing of Applications

### AFFIRMATIVE MARKETING:

1. The HA will conduct affirmative marketing as needed so the waiting list includes a mix of applicants with races, ethnic backgrounds, ages and disabilities proportionate to the mix of those groups in the eligible population of the area. The marketing plan will take into consideration the number and distribution of vacant units, units that can be expected to become vacant because of move-outs, and characteristics of families on the waiting list. The HA will review these factors regularly to determine the need for and scope of marketing efforts. All marketing efforts will include outreach to those least likely to apply.

   Marketing and informational materials will:

   - Comply with Fair Housing Act requirements on wording, logo, size of type, etc.;
   - Describe the housing units, application process, waiting list and preference structure accurately;
   - Use clear and easy to understand terms including any non-English media available in the area;
   - Contact agencies that serve potentially qualified applicants least likely to apply (e.g. the disabled) to ensure that accessible/adaptable units are offered to applicants who need their features;
   - Make clear who is eligible: low-income individuals and families; working and non-working people; and people with both physical and mental disabilities; and
   - Be clear about the HA's responsibility to provide reasonable accommodations to people with disabilities.

   Outreach:

   As much information, as possible about Public Housing will be disseminated through local media (newspaper, radio, television, etc.). For those who call the HA Office, the staff should be available to convey essential information, or:

   - The HA may hold meetings with local community agencies.
   - The HA may sponsor "open house" programs within the public housing community to attract potential residents to view a public housing unit.
   - The HA may make known to the public, through publications in a newspaper of general circulation as well as through minority media and other suitable means, the availability and nature of housing assistance for lower-income families. The notice shall inform such families where they may apply for Public Housing. The HA shall take affirmative action to provide opportunities to participate in the program to persons who, because of such factors as race, ethnicity, sex of household head, age, or source of income, are less likely to apply for Public Housing. When there is a Local Housing Plan, "Comprehensive Housing Affordability Strategy" (CHAS), the HA planned programs will be incorporated in the CHAS.

### QUALIFYING FOR ADMISSION:

The term “qualifying” refers to applicants who are eligible and able to meet the applicant selection standards.

1. It is the HA's policy to admit only qualified applicants.
2. An applicant is qualified if he or she meets all of the following criteria:

   A family, as defined in the appendix.
   Meets HUD requirements on citizenship or immigration status;
   Has an annual income (as defined in the appendix) at the time of admission that does not exceed the income limits (maximum incomes by family size established by HUD) posted in the HA offices.
   Provides documentation of Social Security numbers for family members age 6 or older, or certifies that they do not have Social Security numbers; and
   Meets the Applicant Selection Criteria including completing the HA approved pre-occupancy orientation session if requested.

### ESTABLISHING AND MAINTAINING THE WAITING LIST.

Administration of the Waiting List:

It is the policy of the HA to administer its waiting list as required by HUD's regulations.

Opening and Closing Waiting Lists

For any unit size or type, if the HA's waiting list has sufficient applications to fill anticipated vacancies for the coming 12 months, the HA may elect to:

- Close the waiting list completely;
- Close the list during certain times of the year; or
- Restrict intake by preference, type of project, or by size and type of dwelling.

A decision to close the waiting list will consider the number of applications for each size and type of unit, the number of applicants who qualify for a preference, and the ability of the HA to house applicants in 12 months. Decisions to close waiting lists, restrict intake, or open waiting lists will be publicly announced.

When the waiting list is closed, the HA will not maintain a list of individuals who wish to be notified when the waiting list is re-opened.

Determining if the Waiting List may be Closed.

Closing of Application Taking:

The HA will make known to the public through publication in a newspaper of general circulation, minority media, or other suitable means that applications for public housing units are being suspended. To reach persons who cannot read the newspapers, the HA will distribute fact sheets to the broadcasting media. Personal contacts with the news media and with community service personnel, as well as public service announcements, will be made.

Opening of Application Taking:

When the HA decides to start taking applications, the waiting list may be opened by bedroom size. The HA will make known to the public through publication in a newspaper of general circulation, minority media, or other suitable means the availability and nature of housing assistance for eligible families. The notice must contain the following:

- The date applications will be accepted and the location where applications can be completed. If the HA anticipates suspending the taking of applications after a period of time, the closing date must be published;
- Advise families that applications will be taken at the designated office;
- Briefly describe the public housing program;
- State that applicants for public housing must specifically apply for the public housing units and those applicants for public housing may also apply for to the Section 8 program, if applicable, and they will not lose their place on the public housing waiting list if they also apply for Section 8 assistance. For this to be applicable the HA must have a Section 8 program and be accepting applications for Section 8 assistance; and
- To reach persons who cannot read the newspapers, the HA will distribute fact sheets to the broadcasting media. Personal contacts with the news media and with community service personnel, as well as public service announcements, will be made.

**NOTE:** The application taking closing date may be determined administratively at the same time that the HA determines when to open enrollment. The open enrollment period shall be long enough to allow sufficient applicants that will be required in the next 12 months because of the projected turnover and the number of public housing vacancies.

Updating the Waiting List:

At least once a year the HA will update each waiting list by contacting all applicants in writing, or by the method designated at initial application by applicants with disabilities. Written communications will be sent by first class mail to the most current address supplied by the applicant. This is in addition to ongoing purging through the offering of units. (Offer letter must state that failure to respond will result in removal from the waiting list).

**NOTE:** If no response is received by the due date, the HA will withdraw the name of an applicant from the waiting list. Mail returned undeliverable by the post office will be retained unopened by the HA in the applicant file.

At the time of initial intake, the HA will advise families that they must notify the HA, in writing, when

their circumstances, mailing address or phone number(s) change.

Change in Preference Status While on the Waiting List:

Situations of some families who did not qualify for a preference when they applied may change so they are qualified for a preference. The family should contact the HA so their status may be certified or verified. Applicants whose preference status changes while they are on the waiting list retain their original date and time of application, or application number, as applicable.

If the HA determines that the family does now qualify for a preference, they will be moved up on the waiting list in accordance with their preference(s) and their date and time of application. They will then be informed in writing of how the change in status has affected their place on the waiting list.

**PROCESSING APPLICATIONS FOR ADMISSION:**

How to Apply:

Families wishing to apply for Public Housing shall complete an application for public housing assistance. Applications may be made in person during specified dates and business hours posted at the HA's office(s) at the following location(s): 500 Glen Addie Ave., Anniston, Alabama.

- Completed applications will be accepted for all applicants and the information will be verified by the HA.
- The application must be dated, time-stamped, and referred to the HA's office where resident selection and assignment is processed.
- Individuals who have a physical impairment which would prevent them from completing an application in person may call the HA to make special arrangements to complete their application. A Telecommunication Device for the Deaf (TDD) is no longer required as these services are available through the telephone service provider. If the applicant is visually impaired, all notices must be in a format understandable by applicant.

Interviews and Verification Process:

As applicants approach the top of the waiting list, they will be contacted by first class mail to schedule an interview to complete their applicant file. Applicants who fail to attend their scheduled interview or fail to reply to the letter will have their applications withdrawn, subject to reasonable accommodations for people with disabilities.

The following items will be verified to determine qualification for admission to the HA's housing:

Family type (elderly/disabled/near elderly /non-elderly); May be verified by examination of: birth certificate, driver's license or other government ID card with photo, marriage license, SSI verification, licensed doctor statement, or other similar document.

Verification of family composition is verification of the members who will live in the unit which meet the definition of a family defined in this policy.

Annual Income:

Income verification will be conducted in the chronological order listed below: Each step must be documented prior to proceeding to use the next option. The specified order listed below must be followed:

| Step | Action |
|---|---|
| **1st** | Compare tenant provided income information to Enterprise Income Verification (EIV) and if tenant data is within $200/month or $2400/year use the greater of tenant provided or EIV data. If the tenant disputes the EIV data or if the difference is greater than $200/month or $2400/year go to step 2. |
| **2nd** | Up front income verification (UIV) (Ex: Work Number, Credit Bureau). If desired information is NOT obtained go to next step. |
| **3rd** | Third party written verification. Send standard income verification to income source(s). May be sent by mail or fax.<br>**Note:** ***If a desirable response is not received in a timely manner a 2nd letter may be sent but not required in all cases.***<br>If desired information is NOT obtained go to next step. |
| **4th** | Third Party oral verification (documented to file). This could be via phone or interview by staff. A written record of this contact should be prepared by the HA that includes: date/time of |

| | |
|---|---|
| | contact, name and source of information, the HA staff person, summary of information provided, and the reason for using oral verification.<br>If desired information is NOT obtained go to next step. |
| **5th** | Document Review: Resident file documentation may include a record of documentation reviewed by the HA staff which supports the family's statement. If possible, original copies (not photocopies) of supporting documents should be reviewed, though the HA should photocopy the document(s) (unless prohibited by law) and place in the applicant's file. The HA staff reviewing the document(s) should prepare a summary of the information and sign/date this summary. This summary should include the reason for using document review as verification and again, if possible, the HA should follow-up with a third party to obtain written verification later.<br>If desired information is NOT obtained go to next step. |
| **6th** | Family Declaration or Certification: When all other forms of verification are impossible to obtain, the HA can obtain a notarized statement or signed affidavit from the family, attesting to the accuracy of the information provided. The applicant's file should clearly document why other forms of verification were impossible to obtain. Please note that this type of documentation should rarely be used and should not be used merely for the convenience of the applicant or the HA, or where the applicant cannot provide the necessary information.<br>Note: May require re-verification in less than 12 months. |

Assets and Asset Income;

Same as income (start with 2nd step)

Deductions from Income;

Same as income (start with 2nd step)

Preferences;

Same as income (start with 2nd step)

Social Security Numbers (SSN) of all Family Members; Families are required to provide SSN's for all family members age 6 and older prior to admission, if they have been issued SSN by the Social Security Administration. All members of the family defined above must either:

- Submit SSN documentation; or
- Sign a certification if they have not been assigned a SSN. If the individual is under 18, his or her parent or guardian must execute the certification. If the participant who has signed a certification form obtains a SSN, it must be disclosed at the next regularly scheduled reexamination, or next rent change.
- Verification will be done through the providing of a valid Social Security card issued by the Social Security Administration.

**NOTE:** If an applicant or resident cannot provide his or her Social Security card, other documents listed below showing his or her Social Security Number may be used for temporary verification. He or she may be required by the HA to provide one or more of the following alternative documents to verify his or her SSN;

These documents include:

- Drivers' license that displays the SSN.
- Identification card issued by a Federal, State or local agency,
- Identification card issued by an employer or trade union,
- Identification card issued by a medical insurance company,
- Earnings statements or payroll stubs,
- Bank statements,
- IRS Form 1099 or W-2 Form,
- Benefit award letters from government agencies,
- Medicaid Cards,
- Unemployment benefit letter,
- Retirement benefit letter,
- Life insurance policies,
- Court records such as real estate, tax notices, marriage and divorce, judgment or bankruptcy records,
- Verification of Social Security benefits with the Social Security Administration.

**NOTE:** If the HA verifies Social Security benefits with the Social Security Administration, the acceptance of the SSN by the Social Security Administration may be considered documentation of its validity.

Applicant Screening Information; and the HA documented direct knowledge or 3rd party

Citizenship or eligible immigration status. Citizens are permitted to certify to their status. Eligible Immigration status will be verified with INS.

3. Applicants reporting zero income will be asked to complete a family expense form to document how much they spend on: food, transportation, health care, child care, debts, household items, etc. and what the source of income is for these expenses.
4. The HA's applications for admission public housing shall indicate for each application the date and time of receipt; applicant's race and ethnicity; determination by the HA as to eligibility of the applicant; when eligible, the unit size(s) for which eligible; preference, if any. The date, location, identification, and circumstances of each vacancy offered and accepted or rejected must be maintained.

### THE PREFERENCE SYSTEM

An admission preference:

An admission preference does not guarantee admission. Preferences establish the order of placement on the waiting list. Every applicant must still meet the HA's Selection Criteria before being offered a unit.

Factors other than preferences:

Before applying its preference system, the HA will match the characteristics of the available unit to the applicants available on the waiting list. Unit sizes, accessibility features, or type of project limit the admission of families to households whose characteristics match the vacant unit available. By matching unit and family characteristics, families lower on the waiting list may receive an offer of housing before families with an earlier date and time of application or families with a higher preference (e.g. the next unit available is an accessible unit and the only applicant family needing such features is in the non-preference pool, i.e. having no preference). Factors other than the preference system that affect applicant selection are described below:

When selecting a family for a unit with accessible features, the HA will give a preference to families that include persons with disabilities who can benefit from the unit's features. First preference will be given to existing resident families seeking a transfer and second preference will be given to applicant families. If no family needing accessible features can be found for a unit with such features, the HA will house a family not needing the unit features, but a non-disabled family in an accessible unit will be required to move so that a family needing the unit features can take advantage of the unit.

When selecting a family for a unit in housing designated for elderly families, or disabled families, if any, the HA will give a priority to elderly, disabled or near elderly families.

When selecting a family for a unit in a property that houses elderly and disabled families, as opposed to a general occupancy development that houses non-elderly families as well, the HA will give equal priority to elderly families and disabled families.

When selecting a single person at a mixed population development, elderly, disabled, or displaced single persons have priority over other singles. Single applicants who are not elderly, disabled, or displaced can only be admitted after all elderly or disabled families or single displaced persons have been offered units.

**NOTE:** Preferences will be granted to applicants who are otherwise qualified and who, at the time of the unit offer (prior to execution of a lease); meet the definitions of the preferences described below. The HA will not hold units vacant for applicants with preferences, nor will it relax eligibility or screening criteria to admit otherwise unqualified applicants with preferences.

Verification of Preferences:

At the time of application, initial determinations of an applicant's entitlement to a preference may be made on the basis of an applicant's certification of their qualification for that preference. Before selection is made, this qualification must be verified.

Preference (up front):

The following preference(s) is available to qualifying families at this time:

- Catastrophic Involuntary Displacement, which is defined in this policy;
- Working Families

Special Circumstance Preferences:

These preferences apply only to specific units

- Near-elderly families over other families for units designated for elderly/disabled;
- For one bedroom/efficiency units; elderly, disabled families and displaced persons over single persons.

Administration of the Preferences:

Depending on the time an applicant may have to remain on the waiting list, the HA will either verify preferences at the time of application (when the waiting list is short or nonexistent) or require that applicants certify to their qualification for a preference at the time of pre-application (when the wait for admission exceeds four months). Verifying preferences is one of the earliest steps in processing applicants for admission. Preference verifications shall be no more than 120 days old at the time of certification.

The HA may use a pre-application to obtain the family's certification that it qualifies for a preference. The family will be advised to notify the HA of any change that may affect their ability to qualify for a preference.

Applicants that are otherwise eligible and self-certified as qualifying for a preference will be placed on the waiting list in the appropriate applicant pool.

Applicants that self-certify to a preference at the time of pre-application and cannot verify current preference status at the time of certification will be moved into the non-preference category, and to a lower position on the waiting list based on date and time of application, if applicable.

Notice and Opportunity for a Meeting:

If the HA determines that an applicant does not meet the criteria for a preference, the HA must promptly provide the applicant with written notice of the determination. The notice must contain a brief statement of the reasons for the determination, and state that the applicant has the right to meet with the HA's designee to review it. If requested within the time given in the notice the meeting must be conducted by a person or persons designated by the HA. The person designated by the HA to conduct the informal hearing shall be an impartial person appointed by the HA other than a person who made the approval of the HA's action under review or a subordinate of such person. The procedures specified in this section must be carried out in accordance with HUD's requirements. The applicant may exercise other rights if the applicant believes that he or she has been discriminated against on the basis of race, color, age, religion, sex, disability, familial status, and national origin.

**NOTE:** The HA grievance procedure applies only to residents. It does NOT apply to applicants.

**SCREENING APPLICANTS FOR ADMISSION.**

HUD Regulations

All applicants shall be screened in accordance with HUD's regulations and sound management practices. During screening, the HA will require applicants to demonstrate ability to comply with essential provisions of the lease. The HA will ask if the Applicant requires any special accommodations or presence of a third party to help them with the application process and tenancy.

Complying with essential lease requirements:

Applicant ability and willingness to comply with the essential lease requirements will be checked and documented in accordance with this policy. Applicant screening shall assess the conduct of the applicant and other family members listed on the application, in present and prior housing. Any costs incurred to complete the application process and screening will by paid by the HA.

The history of applicant conduct and behavior must demonstrate that the applicant family can reasonably be expected not to:

- Interfere with other residents in such a manner as to diminish their peaceful enjoyment of the premises by adversely affecting their health, safety, or welfare;
- Adversely affect the physical environment or financial stability of the project;
- Violate the terms and conditions of the lease;

- Require services from the HA staff that would alter the fundamental nature of the HA's program.

The HA will conduct a detailed interview of all applicants using an interview checklist as a part of the screening procedures. The form will ask questions based on the essential elements of tenancy. Answers will be subject to third party verification.

The HA will complete a credit check and a rental history check on all applicants.

Payment of funds owed to any HA or any other federally subsidized housing program is part of the screening evaluation. Outstanding balances will result in the rejection of the application.

**NOTE:** Applicants that owe a HA or any other federally subsidized program funds will not be processed for occupancy. The applicant must pay the funds owed prior to the application being processed. After the application is processed, the applicant must meet all other conditions for occupancy. Re-paying funds that are due, do not necessarily qualify an applicant for occupancy. Such payments will be considered along with other factors in the application process. Any money owed to a HA which has been discharged by bankruptcy shall not be considered in making this determination.

The HA will complete a criminal background check on all adult applicants or any member for whom criminal records are available. Before the HA rejects an applicant on the basis of criminal history, the HA must notify the household of the proposed rejection and proceed under the provisions of the Criminal Records Management Policy.

If any screening activity suggests that an applicant household member may be currently engaged in illegal use of drugs, the HA may seek information from a drug abuse treatment facility or local law enforcement agency to determine whether the facility or agency has reasonable cause to believe the household member is currently engaging in illegal drug use.

The HA may complete a home visit on all applicants that have passed criminal history screening and have incomplete or questionable landlord references to determine if the applicant(s) housekeeping would create health or sanitation problems. Staff completing the home visit will consider whether the conditions they observe are the result of the applicant(s) treatment of the unit or are caused by the unit's overall substandard condition.

Housekeeping criteria to be checked shall include, but not be limited to:

- Conditions in living room, kitchen (food preparation and clean-up), bathroom, bedrooms, entrance-ways, halls, and yard (if applicable);
- Cleanliness in each room; and
- General care of appliances, fixtures, windows, doors and cabinets.

Other: The HA lease compliance criteria will also be checked, such as:

- Evidence of destruction of property;
- Unauthorized occupants;
- Evidence of criminal activity; and
- Conditions inconsistent with application information.

**NOTE:** All applicants shall have at least a two-day advance written notice of home visits.

All applicants may be asked to attend and complete the HA's Pre-Occupancy Orientation.

The HA's examination of relevant information respecting past and current habits or practices will include, but is not limited to, an assessment of the applicant family's adult members:

- Past performance in meeting financial obligations, especially rent and utility bills.
- Record of disturbance of neighbors (sufficient to warrant a police call) destruction of property, or living or housekeeping habits that may adversely affect the health, safety, or welfare of other residents or neighbors.
- History of criminal activity on the part of any applicant family member involving crimes of physical violence to persons or property or other criminal acts including drug-related criminal activity that could adversely affect the health, safety, or welfare of other residents or staff or cause damage to the unit or development.

**NOTE:** The HA may require an applicant to exclude a household member in order to be admitted if that household member has participated in or been culpable for criminal actions that warrant rejection.

- A record of eviction from housing or involuntary termination from residential programs (taking into account date and circumstances).

- An applicant(s) ability and willingness to comply with the terms of the HA's lease.

The HA is required to reject the applications of certain applicants for criminal activity or drug abuse by household members:

- The HA shall reject the application of any applicant for three years from the date of eviction if any household member has been evicted from any federally assisted housing for drug-related criminal activity. However, the HA may admit the household if the HA determines that:
  - The evicted household member who engaged in drug-related criminal activity has successfully completed a supervised drug rehabilitation program approved by the HA, or
  - The circumstances leading to the eviction no longer exist (for example, the criminal household member has died or is imprisoned).
- The HA is required to reject the application of a household if the HA determines that:
  - Any household member is currently engaging in illegal use of a drug; or
  - The HA has reasonable cause to believe that a household member's illegal use or pattern of illegal use of a drug may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents;
  - Any household member has ever been convicted of manufacture or production of methamphetamine on the premises of any federally assisted housing;
  - Any member of the household is subject to a lifetime registration requirement under a state sex offender registration program; or
  - Any member of the household's abuse or pattern of abuse of alcohol may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents

**NOTE:** The above list is not intended to be all-inclusive. Applicants may be denied admission if the HA has reason to believe that the conduct of the applicant has been such as would be likely to interfere with other residents in such a manner as to diminish their enjoyment of the premises by adversely affecting their health, safety, or welfare or to affect adversely the physical environment or the financial stability of the project if the applicant were admitted to the project.

An applicant's intentional misrepresentation of information related to eligibility, preference for admission, housing history, allowances, family composition, or rent will result in rejection. In the event the misrepresentation is discovered after admission, the lease will be terminated for such misrepresentation. Unintentional mistakes that do not confer any advantage to the applicant will not be considered misrepresentations.

Applicants must be able to demonstrate the ability and willingness to comply with the terms of the HA's lease, either alone or with assistance that they can demonstrate they will have at the time of admission. Availability of assistance is subject to verification by the HA.

Have previously been evicted from public housing, including having moved from the HA as a result of their lease being terminated by the HA.

Committed acts, which would constitute fraud in connection with any federally, assisted housing program.

Did not provide information required within the time frame specified during the application process.

During the interview process, the applicant demonstrates hostile behavior that indicates that the prospective applicant may be a threat to our public housing residents.

The applicant and all adults must sign a release allowing the HA to request a copy of a police report from the National Crime Information Center, police department or other law enforcement agencies. If the HA uses the information to deny or terminate assistance the HA must provide a copy of the information used in accordance with Criminal Records Management Policy.

If the applicant is a former Public Housing or Section 8 participant who vacated the unit in violation of his lease, the applicant may be declared ineligible.

Screening applicants who claim mitigating circumstances.

If negative information is received about an applicant, the HA shall consider the time, nature, and extent of the applicant's conduct and other factors that might indicate a reasonable probability of favorable future conduct. To be considered, mitigating circumstances must be verifiable.

Mitigating circumstances are facts relating to the applicant's negative rental history or behavior, that, when verified, indicate. The reason for the unsuitable rental history and/or behavior; and that the reason for the unsuitable rental history and behavior is no longer in effect or is under control, AND applicant's prospect for lease compliance is an acceptable one, justifying admission. Mitigating circumstances would overcome or outweigh information already gathered in the screening process.

If the applicant asserts that mitigating circumstances relate to a change in disability, medical condition or treatment, the HA shall refer such information to persons qualified to evaluate the evidence and verify the mitigating circumstance. The HA shall also have the right to request further information to verify the mitigating circumstance, even if such information is of a medically confidential nature. Such inquiries will be limited to the information necessary to verify the mitigating circumstances or, in the case of a person with disabilities, to verify a reasonable accommodation.

Examples of mitigating circumstances might include:

- Evidence of successful rehabilitation;
- Evidence of the applicant family's participation in social service or other appropriate counseling service; or
- Evidence of successful and sustained modification of previous disqualifying behavior.

Consideration of mitigating circumstances does not guarantee that applicant will qualify for admission. The HA will consider such circumstances in light of:

- The applicant's ability to verify the mitigating circumstances and prospects for improved future behavior;
- The applicant's overall performance with respect to all the screening requirements; and
- The nature and seriousness of any criminal activity, especially drug related criminal activity that appears in the applicant's record.

Qualified and Unqualified Applicants:

Verified information will be analyzed and a determination made with respect to:

- Eligibility of the applicant as a family;
- Eligibility of the applicant with respect to income limits for admission;
- Eligibility of the applicant with respect to citizenship or eligible immigration status;
- Unit size required for and selected by the family;
- Preference category (if any) to which the family is entitled; and
- Qualification of the applicant with respect to the Selection Criteria.

Qualified (DETERMINED TO BE ELIGIBLE):

Families will be notified by the HA of the approximate time frame of admission insofar as that date can be determined; however the time frame stated by the HA is an estimate and does not guarantee that applicants can expect to be housed by that date.

Denied (DETERMINED TO BE INELIGIBLE):

Generally, applicants may be denied admission to Public Housing for the following time frames, which shall begin on the date of application, unless otherwise provided for herein below:

**Denied admission for *one year* for the following:**

- Past rental record,
- Bad rent paying habits,
- Bad housekeeping habits, in and outside the unit,
- Damages,
- Disturbances,
- Live-ins,
- Demonstration of hostile behavior during the interview process that indicates that the applicant may be a threat to staff or residents,
- Being evicted from a HA, including having moved from a HA as a result of their lease being terminated by the HA for reasons other than as listed below,
- Having other federally subsidized housing assistance terminated for reasons other than as listed below.

**Denied admission for *three years* for the following:**

- Persons evicted from public housing, Indian Housing, Section 8, or Section 23 programs because of drug-related criminal activity (except drug trafficking) are ineligible for admission to public housing for a ***three year period*** beginning on the date of such eviction.
- The HA can waive this requirement if the person demonstrates to the HA's satisfaction successful completion of a rehabilitation program approved by the HA, or the circumstances leading to the eviction no longer exist.
- Drug use without evidence of rehabilitation.

**Denied admission for *five years* for the following:**

- Fraud: (giving false information on the application or during an interview is considered

fraud).

- An arrest or conviction record that indicates that the applicant may be a threat and/or negative influence on other residents. The five years shall begin on the date of the last reported act, completion of sentence and/or probation period. (Whichever is later).

**Denied admission for** *10 years* **for the following:**

- Conviction for drug trafficking.

**Denied admission** *for life* **to any household that includes any individual who is subject to a lifetime registration requirement under a state sex offender registration program.**

**Denied admission** *for life* **to any applicant who has been convicted of manufacturing or producing methamphetamine (commonly referred to as "speed") on the premises of a public housing project. Premises are defined as the building or complex in which the dwelling unit is located, including common areas and grounds.**

**NOTE:** These time frames (with the exception of 5 & 6) are only guidelines and the HA may deny admission to any individual whose behavior may adversely affect the health, safety or welfare of other residents or may admit persons who exhibit evidence of rehabilitation.

Notice to Deny Applicants:

Unqualified applicants will be promptly notified by a Notice of Rejection from the HA, stating the basis for such determination and offering an opportunity for informal hearing (see Procedure for Informal Hearing for Rejected Applicants). The denial letter will allow the applicant 10 calendar days to request an informal meeting (verbal and/or in writing) with the HA. A HA representative will hear the appeal and issue a decision within 10 calendar days of the meeting. Informal hearings for applicants are different from the resident grievance process. Applicants are not entitled to use of the resident grievance process.

**OCCUPANCY GUIDELINES:**

Guidelines:

The following guidelines shall determine the number of bedrooms required to accommodate each family without overcrowding or over-housing. These guidelines may be waived only when necessary to achieve or maintain full occupancy and after every effort has been made to stimulate applications from families appropriate to the existing vacancies. Families may be assigned improper sized units, with the written agreement, that they must transfer to the appropriate size unit when instructed to do so by the HA. Otherwise, the following occupancy standards shall apply:

**Suggested Guidelines**

| Number of Bedrooms | Number of Persons | |
|---|---|---|
| | Minimum | Maximum |
| 0 Br | 1 | 1 |
| 1 Br | 1 | 2 |
| 2 Br | 2 | 4 |
| 3 Br | 3 | 6 |
| 4 Br | 4 | 8 |
| 5 Br | 5 | 10 |
| 6 Br | 6 | 12 |

The following principles govern the size of unit for which a family will qualify. Generally, two people are expected to share each bedroom, except that units will be so assigned that:

It will not be necessary for adults of different generations or opposite sex, other than husband and wife, to occupy the same bedroom, although they may do so at the request of the family.

Exceptions to the largest permissible unit size may be made in case of reasonable accommodations for a person with disabilities. In the case of chronic illness, or other physical infirmity, a deviation from the occupancy guidelines, as presented above, is permissible when justified with evidence and documentation from a licensed physician.

Two children of the opposite sex over the age of six years will not be required to share a bedroom, although they may do so at the request of the family.

An unborn child will not be counted as a person in determining unit size. At the option of the HA, an infant, up to the age of two years, may share a bedroom with its parent(s). A single pregnant woman will be assigned to a

one-bedroom unit.

The HA will count a child who is temporarily away from the home because the child has been placed in foster care for six months or less, is away at school or other situations that can be documented.

A single head of household parent shall not be required to share a bedroom with his/her child over the age of two years, although they may do so at the request of the family.

A live-in attendant may be assigned a bedroom. Single elderly or disabled residents with live-in attendants will be assigned two bedroom units.

Efficiency apartments will be occupied first by persons who prefer efficiencies to one bedroom units. Once applicants who prefer efficiencies have been housed, single individuals applying to mixed population buildings who wish to live in one bedroom units (rather than efficiencies) will be offered a unit based on their position on the waiting list to determine whether they will be offered a one bedroom or efficiency.

The general HUD standard:

Two persons per bedroom will be the standard for the smallest unit a family may be offered.

**NOTE:** Individual housing units with very small or very large bedrooms or other specific situations that inhibit or encourage lower or higher levels of occupancy may be permitted to establish lower or higher occupancy levels so long as the occupancy levels will not discriminate on the basis of familial status. The largest unit size that a family may be offered would provide no more than one bedroom per family member, taking into account family size and composition.

**NOTE:** Exceptions may be made to allow for full utilization of all bedroom sizes. Family will be required to sign an acknowledgment that they will be required to move to the proper size unit if their unit is needed to house a family requiring the larger unit.

Family Options:

If a family opts for a smaller unit size than would normally be assigned under the unit size standard (because, for example, the list is moving faster) the family will be required to sign a statement agreeing to occupy the unit assigned at their request until their family size, or circumstances (other than age of family members) change.

**NOTE:** When a family is actually offered a unit, if they no longer qualify for the unit size where they were listed, they will be moved to the appropriate waiting list, retaining their preferences and date and time of application. This may mean that they may have to wait longer for a unit offer.

## 1. Tenant Selection and Assignment Plan

| Check One | This HA maintains the checked waiting list method |
|---|---|
| ☒ | Community-wide Waiting List |
| ☐ | Site-based Waiting Lists |

### Organizing the Waiting List

Community-wide Waiting List:

It is the HA's policy that each applicant shall be assigned his/her appropriate place on a single community-wide waiting list in sequence based upon:

- Type and size of unit needed (e.g. general occupancy building, accessible or non-accessible unit, number of bedrooms);
- Applicant preference or priority, and
- Date and time the application is received.

**NOTE:** The HA will maintain its waiting list in the form that records the type and size of unit needed, each applicant's priority/preference status, the date and time of application, and the race and ethnicity of the family head.

Site-based Waiting List:

If the HA has elected to operate site-based waiting lists, the application for such lists shall be a part of the HA's Annual Plan.

- All current applicants for units of the size and type offered at developments with site-based waiting lists will be given an opportunity to be listed on all waiting lists where they would accept a unit offer.
- Once the initial site-based lists are established, all applicants will be informed of the length of each list and have an opportunity when their application is updated to change their site selection.
- Although applicants will have an opportunity to select the sites where they wish to receive offers, the waiting list and unit offers will continue to be administered centrally.
- Type and size of unit needed (e.g. general occupancy building, accessible or non-accessible unit, number of bedrooms);
- Applicant preference or priority; and
- Date and time the application is received.

**NOTE:** The HA will maintain its waiting list in the form that records the type and size of unit needed, each applicant's priority/preference status, the date and time of application, and the race and ethnicity of the family head.

### MAKING UNIT OFFERS TO APPLICANTS

**NOTE:** The **HA IS RESPONSIBLE** for keeping accurate records evidencing: eligibility status on waiting list, position on waiting list, offers made, and offers rejected (reason), and date housed. *****To meet this requirement, it is suggested that the HA keep a printed copy of the waiting list each time it is reordered, unless a historical electronic copy can be produced***** See record retention section.

1. To assure equal opportunity and nondiscrimination on grounds of race, color, sex, religion, national origin, disability, or familial status in this policy, a one offer system will be used to make unit offers.
   - The first qualified applicant in sequence on the waiting list is made one offer of a unit of appropriate size and type.
   - If the applicant refuses a unit offer without good cause the date and time of their application will be changed to the date and time of the refusal and loss of any preference. Refusal because of good cause will not result in loss of current position on waiting list. This must be documented to and verified by the HA.
2. The HA will first match the unit available to the highest ranking applicant for a unit of that size, type and special features (if any), taking into account any designated housing (if applicable). Preferences will then be used to determine the order of selection from the waiting list. If two applicants need the same type and size of unit and have the same preference status, the applicant with the earlier date and time of application will receive the offer.
3. In the selection of a family for a unit with accessible features, the HA will give preference to families that include a person with disabilities who can benefit from the unit features.
4. Vacant elderly or disabled designated units will be offered to the near elderly if there are no eligible elderly or disabled persons on the waiting list. Other families will be offered these units if no eligible near elderly are on the waiting list.
5. The applicant must accept the vacancy offered within seven working days of the date the offer is communicated by first class mail (or the method of communication designated by an applicant with disabilities) or be removed from the waiting list.
6. If more than one unit of the appropriate size and type is available, the first unit to be offered will be the unit that is anticipated to be ready for move-in first. If two units are anticipated to be ready for move-in on the same day, the first unit to be offered will be the unit that became vacant first.
7. The provisions of the deconcentration rule, contained within this policy, shall supersede the selection of applicants based on date and time and local preference points, if applicable, and allow the HA to skip families on the waiting list to accomplish this goal.

**NOTE:** For every fiscal year, each HA shall reserve a percentage of its new admissions for families whose incomes do not exceed 30% of the area median income. The goal for public housing shall be 40% of new admissions. In reaching the new admissions goals, the HA is required to avoid concentrating very low-income families in projects and must comply with the Deconcentration Policy.

**EXPLANATION:** The purpose of the Deconcentration Policy is to maintain a resident body in each development composed of families with a broad range of income and rent paying ability which is generally representative of the range of incomes of low income families in the HA's area of operation as defined by state law.

**REMOVING APPLICANT NAMES FROM THE WAITING LIST:**

To ensure vacant units are filled in a timely manner, the HA needs a waiting list that is accurate. While each applicant must keep the HA apprized of changes in address, phone number, income or other circumstances, no applicant shall be removed from the waiting list except when one of the following situations occurs:

1. The applicant receives and accepts an offer of housing;
2. The applicant requests in writing that his/her name be removed from the waiting list;
3. The applicant is rejected, either because he/she is ineligible for public housing at the time of reexamination, or because he/she fails to meet the applicant selection criteria; or
4. The application is withdrawn because the HA attempted to contact the applicant and was unable to do so. In attempting to contact an applicant, the following methods shall be undertaken before an application may be withdrawn:
   - The applicant will be sent an offer letter by first class mail to the applicant's last known address, asking the applicant to contact the HA within seven business days, or;
   - The applicant will be sent a letter of continued interest by first class mail to the applicant's last known address, asking the applicant to contact the HA within seven business days, or;

**NOTE:** If an applicant contacts the HA as required within any of the deadlines stated above, he/she shall be housed or retained on the waiting list.

5. Persons who fail to respond to the HA attempts to contact them because of verified situations related to a disability shall be entitled to a reasonable accommodation. In such circumstances the HA shall reinstate these individuals to their former waiting list positions.
6. Families whose applications are withdrawn or rejected must reapply for housing only when the waiting list is open. Families whose applications were rejected may not reapply for 12 months.

**GOOD CAUSE FOR APPLICANT REFUSAL OF UNIT OFFER:**

If an applicant is willing to accept the unit offered but is unable to move at the time of the offer and presents clear evidence ("good cause") that acceptance of the offer of a suitable vacancy will result in undue hardship not related to considerations of race, color, sex, religion or national origin, the applicant will not be dropped to the bottom of the list.

1. Examples of (good cause) for refusal of an offer of housing are:
   - The unit's location is inaccessible to source of employment, education, or job training, children's day care, or educational programs for children with disabilities, so that accepting the unit offer would require the adult household member to quit a job, drop out of an educational institution or job training program, or take a child out of day care or an educational program for children with disabilities;
   - The family demonstrates that accepting the offer will place a family member's life, health, or safety in jeopardy. The family must provide specific and compelling documentation such as restraining orders, other court orders, or risk assessments from a law enforcement agency. Reasons offered must be specific to the family. Refusals due to location alone do not qualify for this good cause exemption;
   - A health professional verifies temporary hospitalization or recovery from illness of the principal household member or other household members (each as listed on final application);

- The unit has lead paint and the family has children under the age of seven;
- The unit is inappropriate for the applicant's disabilities, or the family does not need the accessible features in the unit offered and does not want to be subject to a 30-day notice to move;
- An elderly or disabled family makes the decision not to occupy or accept occupancy in designated housing; or
- The HA has HUD-approved site-based waiting lists and the offer is not for one of the sites the applicant has selected.

2. If good cause is verified, the refusal of the offer shall not require that the applicant be dropped to the bottom of the waiting list or otherwise affect the family's position on the waiting list.

**LEASING ACCESSIBLE UNITS:**

1. Before offering a vacant accessible unit to a non-disabled applicant, the HA will offer such units:
   - First, to a current public housing resident having a disability that requires the special features of the vacant unit.
   - Second, to an eligible qualified applicant on the waiting list having a disability that requires the special features of the vacant unit.
2. When offering an accessible/adaptable unit to a non-disabled applicant, the HA will require the applicant to agree to move to an available non-accessible unit within 30-days when a current resident or an applicant with a disability needs the unit. This requirement is also reflected in the lease signed with the applicant.

2. OCCUPANCY and CONTINUED OCUPANCY

## 2. ELIGIBILITY FOR CONTINUED OCCUPANCY, ANNUAL REEXAMINATIONS, AND REMAINING FAMILY MEMBERS

**ELIGIBILITY FOR CONTINUED OCCUPANCY:**

Residents who meet the following criteria will be eligible for continued occupancy:

3. Qualify as a family as defined in the definition section of this policy. For purpose of continued occupancy, remaining family members qualify as a family so long as at least one of them is of legal age to execute a lease. Remaining family members can also include court recognized emancipated minors under age 18.
4. Are in full compliance with the resident obligations and responsibilities as described in the dwelling lease.
5. Whose family members, age six and older, each have Social Security numbers or have examinations on file indicating they have no Social Security number.
6. Who meet HUD standards on citizenship or immigration status or are paying a pro-rated rent.
7. Who comply with the HA's eight hour per month community service requirements.

**REEXAMINATIONS:**

Regular (Annual) reexaminations:

The HA shall, at least once a year, re-examine the family composition and incomes of all resident families. For families who choose flat rents, the HA must conduct a reexamination of family composition and community service requirements (WHEN APPLICABLE) at least annually, and must include a reexamination of family income at least once every three years.

Each family will be required to furnish information in Section III (A) of the Dwelling Lease and in the Community Service Policy. Verifications acceptable to the HA shall be obtained and determinations made. In the event of failure or refusal of resident to report the necessary information, the HA may terminate the Lease. This reexamination shall be done at least 30-days and not more than 120-days prior to the anniversary month. The new rent shall take effect on the anniversary month.

Records shall be maintained to insure every resident being reexamined within a 12-month period.

Upon completion of reexamination and verification, resident shall be provided reasonable advanced notice (generally assumed to be 30 days), in writing, prior to the effective date of the following: (A copy of such notification is to be retained in the resident's file.)

- Any change in rent and the date on which it becomes effective.
- Any change required in the size of dwelling unit occupied.
- Any instance of misrepresentation or noncompliance with the terms of the Dwelling Lease and the corrective action(s) to be taken.
- The amount of the resident rent and the amount of the flat rent.
- In the event of change in resident circumstances resident will be sent a notice to report to the management office at a specified date and time to execute a new first page of the lease.

If this HA determines that the size of the premises is no longer appropriate for resident's needs, the resident may be required to transfer to another unit as outlined in the Transfers Section.

Special Reexaminations:

Pre-scheduled extensions of admission or continued occupancy determinations, and will be considered for the following reasons:

If it is impossible to determine annual family income accurately due to instability of family income and/or family composition, a temporary determination of income and rent is to be made and a special reexamination shall be scheduled for 30, 60, or 90-days, depending on circumstances. The resident shall be notified, in writing, of the date of the special reexamination.

If the family income can be anticipated at the scheduled time, the reexamination shall be completed and appropriate actions taken. If a reasonable anticipation of income cannot be made, another special reexamination shall be prescribed and the same procedure followed as stipulated in the preceding paragraph until a reasonable estimate can be made.

Rents determined at special reexaminations shall be made effective as noted in the next section.

**When a family qualifies for an earned income disallowance, the date for their next regular reexamination shall be permanently adjusted to be 12 months following the date that the income disallowance began.**

Families reporting zero income will have their circumstances examined according to the special reexamination section until they have a stable income. Regular or recurring monetary or non-monetary contributions from persons not residing in the dwelling unit for any purpose shall be considered income.

Procedures:

- 90 to 120 days prior to the anniversary date of lease, the HA will mail the resident a notice and appointment date for reexamination.
- At the time of reexamination, all adult members of the household will be required to complete and sign all applicable forms required by the HA and HUD to determine family composition and income.
- Income, allowances, Social Security numbers, and such other data as is deemed necessary will be verified, and all verified findings will be filed in the resident's folder.
- An EIV report(s) will be generated prior to the reexamination interview.
- A credit check may be run on each family at reexamination to help detect any unreported income, family members not reported on the lease, etc.
- Verified information will be analyzed and a determination made with respect to:
  - Eligibility of the resident as a family or as the remaining member of a family;
  - Unit size required for the family (using the Occupancy Guidelines); and
  - Rent the family should pay.
- Residents with a history of sporadic or multiple temporary jobs whose reexamination occurs when they are not employed will have income anticipated based on past and anticipated employment when a pattern can be determined. Residents with seasonal or part-time employment of a cyclical nature will be asked for third party documentation of their employment including start and ending dates.
- Income shall be computed in accordance with the definitions and procedures set forth in Federal regulations and this policy.

Action Following Reexamination:

If there is any change in rent,

- A new lease agreement will be executed,

- A Notice of Rent Adjustment will be executed, or
- A replacement first page to lease agreement will be executed.

If any change in the unit size is required, the resident will be placed on a transfer list in accordance with the transfer criteria described in this policy and moved to an appropriate unit when one becomes available.

### 3. INTERIM RENT ADJUSTMENTS

#### ADJUSTING RENT BETWEEN REGULAR REEXAMINATIONS

8. Residents are required to report all changes in income, family composition or status to the HA in writing within 10 calendar days of the occurrence. Failure to report in writing within the 10 calendar days may result in a retroactive rent increase, but not a retroactive credit or rent reduction. Residents are also required to report interim increases in income if they have been granted interim rent reductions.
9. The HA wishes to encourage families to improve their economic circumstances, so most changes in family income between reexaminations will not result in a rent change.
10. Complete verification of the circumstances applicable to rent adjustments must be documented and approved by the HA.
11. The HA will process interim adjustments in rent as follows:

Income Change:

The HA action:

- Decrease in family income for any reason, except for decrease that lasts fewer than 30-days. The HA will process an interim reduction in rent if the income decrease will last more than 30-days. Decreases in income resulting from welfare fraud or from welfare cuts for failure to comply with economic self-sufficiency requirements are not eligible for rent reductions.
- Increase in family income following the HA granting of interim rent decrease. The HA will process an interim increase for income increases that follow interim rent reductions.
- Increase in income because a person with income (from any source) joins the household. The HA will process an interim increase.
- Increase in earned income from existing employment of a current household member. The HA will defer the increase to the next regular reexamination.
- Increase in income from any new source. The HA will process an interim increase unless the individual is eligible for an earned income disallowance. The disallowance will be granted.
- Incremental increases in family income due to pay increases or raises from existing employment. The HA will defer the increase to the next regular reexamination.
- Increase in unearned income (e.g. COLA adjustment for social security). The HA will defer the increase to the next regular reexamination.

Resident Misrepresentation:

- The HA will process an interim increase in rent if the resident has misrepresented or failed to report facts upon which rent is based, so the rent the resident is paying is less than it should have been. The HA will apply any increase in rent retroactive to the month following the month in which the misrepresentation occurred, or
- Based on circumstances the HA may evict.

#### EFFECTIVE DATE OF ADJUSTMENTS:

Residents will be notified in writing of any rent adjustment and the effective date of the action.

12. Rent decreases go into effect the first of the month following the actual date of decrease and/or the date resident reported the decrease, whichever is later. Income decreases reported or verified after the resident accounting cut-off date will be effective the first of the second month with a credit retroactive to the first month.
13. Rent increases (except those due to misrepresentation or late reporting) require reasonable advanced notice (generally assumed to be 30 days) and become effective the first of the second month following the increase in income.\

**DECONCENTRATION POLICY**

1. Objective: The objective of the Deconcentration Rule for public housing units is to ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40 percent of its public housing inventory with families that have income at or below 30% of the area median income by public housing development. Also the housing authority will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher income levels, it is the goal of the housing authority not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The housing authority will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the housing authority's computer system.

2. Actions: To accomplish the deconcentration goals, the housing authority will take the following actions:
A. At the beginning of each housing authority fiscal year, the housing authority will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous housing authority fiscal year.

B. To accomplish the goals of: (1) Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median income, and
(2) Not housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the housing authority's Tenant Selection and Assignment Plan, which is a part of this policy, provides for skipping families on the waiting list to accomplish these goals.

Component 3, (6) Deconcentration and Income Mixing

a.__X___YES _____NO Does the PHA have any general occupancy (family) housing developments covered by deconcentration. If no, this section is complete. If yes, continue to next question.

b._____YES ___X____NO Do any of these covered developments have average incomes above or below 85 % to 115% of the average of such developments. If no this section is complete

## SECTION 8

### 4. HOUSING CHOICE VOUCHER ELIGIBILITY CRITERIA

**ELIGIBILITY:**

All individuals who are admitted to the HCV Program in the HA must be individually determined eligible under the terms of this plan. In order to be determined eligible, an applicant must meet the following requirements:

The applicant family must qualify as a family as defined in Appendix "A."

The applicant family's Annual Income as defined in Appendix "A" must not exceed income limits established by HUD for the HCV Programs.

Head of Household must be:

19 years of age or older,

18 years of age and married (not common law), or

A person that has been relieved of the disability of non-age by a juvenile court.

**INELIGIBLE:**

Applicants are not automatically determined eligible to receive federal assistance. An applicant will not

be placed on a waiting list or offered HCV assistance under the following circumstances:

- If the applicant's annual family income exceeds the Income Limits established by HUD; or,
- As specified in Section VIII of this document.

**INFORMED OF INELIGIBILITY:**

If the applicant has failed to meet any outstanding requirements for eligibility and is determined ineligible, he/she will be so informed and the reasons stated in writing. The applicant will be granted ten days from the date stated on the ineligible letter to request an informal meeting. The applicant may bring any person he/she wishes to represent them at the informal meeting. The request for an informal meeting may be submitted in writing and/or the request may be verbal. However, the request must be received by the HA within the time frame established by the HA for the meeting. See Section XXXVI.

**SINGLE PERSON:**

In addition, under 24 CFR, the HA is permitted to determine as eligible, single persons living alone or intending to live alone who do not meet any of the definitions of a family. Single persons are only eligible for a one bedroom voucher.

**DECLARATION OF CITIZENSHIP:**

Section 214 of the Housing and Community Development Act of 1980 prohibits HAs from making financial assistance available to a person other than United States citizens, nationals, or certain categories of eligible Non-citizen in HUD's assisted housing programs.

**ADDING A PERSON TO THE PROGRAM:**

Once an applicant becomes a participant in the HA's HCV program, the head of household must request permission to add another person to the program (Except for birth, adoption or court-ordered custody of a child. For the purpose of the paragraph, a child is defined as a person under the age of 13). The person being added must meet all eligibility requirements before the HA will approve any addition to the HCV program.

## 5. ELIGIBILITY FOR ADMISSION AND PROCESSING OF APPLICATIONS

**QUALIFYING FOR ADMISSION:**

The term (qualifying) refers to applicants who are eligible and able to meet the applicant selection standards.

It is the HA's plan to admit only qualified applicants.

An applicant is qualified if he or she meets all of the following criteria:

A family, as defined in Appendix "A."

Meets HUD requirements on citizenship or immigration status;

Has an annual income as defined in Appendix "A"; at the time of admission that does not exceed the income limits (maximum incomes by family size established by HUD) posted in the HA offices.

Provides documentation of Social Security numbers for family members age 6 or older, or certifies that they do not have Social Security numbers;

Meets the Applicant Selection Criteria including completing the HA-approved pre-occupancy orientation session if requested; and

Meets the eligibility requirement for higher education students.

**MAINTAINING THE WAITING LIST.**

Administration of the Waiting List:

It is the plan of the HA to administer its waiting list as required by HUD's regulations.

Updating the Waiting List:

At least once a year the HA will update the waiting list by contacting all applicants in writing,

or by the method designated at initial application by applicants with disabilities. Written communications will be sent by first class mail to the most current address supplied by the applicant. This is in addition to ongoing purging through the offering of units. (Offer letter must state that failure to respond will result in removal from the waiting list).

If no response is received or if mail is returned undeliverable by the post office (retained unopened by the HA in the applicant file) the HA will withdraw the name of an applicant from the waiting list.

At the time of initial intake, the HA will advise families that they must notify the HA, in writing, when their circumstances, mailing address or phone number(s) change.

Change in Preference Status While on the Waiting List:

Situations of some families who did not qualify for a preference when they applied may change so they are qualified for a preference. The family should contact the HA so their status may be certified or verified. Applicants whose preference status changes while they are on the waiting list retain their original date and time of application, or application number, as applicable.

If the HA determines that the family does now qualify for a preference, they will be moved up on the waiting list in accordance with their preference(s) and their date and time of application. They will then be informed in writing of how the change in status has affected their place on the waiting list.

**PROCESSING APPLICATIONS FOR ADMISSION:**

Interviews:

As applicants approach the top of the waiting list, they will be contacted by first class mail to schedule an interview to complete their applicant file. Applicants who fail to attend their scheduled interview or fail to reply to the letter will have their applications withdrawn, subject to reasonable accommodations for people with disabilities.

Verification Process:

The following items will be verified to determine qualification for admission to the HA's HCV program.

Family composition

Eligibility of higher education student head of household

Annual Income:

Income verification will be conducted in the chronological order listed below: Each step must be documented prior to proceeding to use the next option. The specified order listed below must be followed:

| Step | Action |
|---|---|
| 1st | Compare tenant provided income information to EIV and if tenant data is within $200/month or $2400/year use the greater of tenant provided or EIV data. ***If the tenant disputes the EIV data or if the difference is greater than $200/month or $2400/year go to step 2.*** |
| 2nd | Up front income verification (UIV) (Ex: Work Number, Credit Bureau). ***If desired information is NOT obtained go to next step.*** |
| 3nd | Third party written verification. Send standard income verification to income source(s). May be sent by mail or fax.<br>Note: If a desirable response is not received in a timely manner a 2nd letter may be sent but not required in all cases.<br>***If desired information is NOT obtained go to next step.*** |
| 4rd | Third Party oral verification (documented to file). This could be via phone or interview by staff. A written record of this contact should be prepared by the HA that includes: date/time of contact, name and source of information, the HA staff person, summary of information provided, and the reason for using oral verification. ***If desired information is NOT obtained go to next step.*** |
| 5th | |

| | |
|---|---|
| | Document Review: Resident file documentation may include a record of documentation reviewed by the HA staff which supports the family's statement. If possible, original copies (not photocopies) of supporting documents should be reviewed, though the HA should photocopy the document(s) (unless prohibited by law) and place in the applicant's file. The HA staff reviewing the document(s) should prepare a summary of the information and sign/date this summary. This summary should include the reason for using document review as verification and again, if possible, the HA should follow-up with a third party to obtain written verification later. ***If desired information is NOT obtained go to next step.*** |
| 6th | Family Declaration or Certification: When all other forms of verification are impossible to obtain, the HA can obtain a notarized statement or signed affidavit from the family, attesting to the accuracy of the information provided. The applicant's file should clearly document why other forms of verification were impossible to obtain. Please note that this type of documentation should rarely be used and should not be used merely for the convenience of the applicant or the HA, or where the applicant cannot provide the necessary information.<br>Note: Use to verify required information; however, may require reverification in three months. |

Assets and Asset Income;
Same as income (start with 2nd step)

Deductions from Income;
Same as income (start with 2nd step)

Preferences;
Same as income (start with 2nd step)

Social Security Numbers (SSN) of all Family Members; Families are required to provide SSN's for all family members age 6 and older prior to admission, if they have been issued SSN by the Social Security Administration. All members of the family defined above must either:

- Submit SSN documentation; or
- Sign a certification if they have not been assigned a SSN. If the individual is under 18, his or her parent or guardian must execute the certification. If the participant who has signed a certification form obtains a SSN, it must be disclosed at the next regularly scheduled reexamination, or next rent change.
- Verification will be done through the providing of a valid Social Security card issued by the Social Security Administration.

If an applicant or resident cannot provide his or her Social Security card, other documents listed below showing his or her Social Security Number may be used for temporary verification. He or she may be required by the HA to provide one or more of the following alternative documents to verify his or her SSN;

These documents include:

- Drivers' license that displays the SSN.
- Identification card issued by a Federal, State or local agency,
- Identification card issued by an employer or trade union,
- Identification card issued by a medical insurance company,
- Earnings statements or payroll stubs,
- Bank statements,
- IRS Form 1099 or W-2 Form,
- Benefit award letters from government agencies,
- Medicaid Cards,
- Unemployment benefit letter,
- Retirement benefit letter,
- Life insurance policies,
- Court records such as real estate, tax notices, marriage and divorce, judgment or bankruptcy records,
- Verification of Social Security benefits with the Social Security Administration.

If the HA verifies Social Security benefits with the Social Security Administration, the acceptance of the SSN by the Social Security Administration may be considered documentation of its validity.

Applicant Screening Information; and the HA documented direct knowledge or 3rd party.

Citizenship or eligible immigration status: Citizens are permitted to certify to their status. Eligible Immigration status will be verified with INS.

Applicants reporting zero income will be asked to complete a family expense form to document how much they spend on: food, transportation, health care, child care, debts, household items, etc. and what the source of income is for these expenses.

The HA's applications for admission HCV shall indicate for each application the date and time of receipt; applicant's race and ethnicity; determination by the HA as to eligibility of the applicant; when eligible, the bedroom size(s) for which eligible; preference, if any. The date, location, identification, and circumstances of each vacancy offered and accepted or rejected must be maintained.

### THE PREFERENCE SYSTEM

An admission preference:

An admission preference does not guarantee admission. Preferences establish the order of placement on the waiting list. Every applicant must still meet the HA's Selection Criteria before being offered a voucher.

Verification of Preferences:

At the time of application, initial determinations of an applicant's entitlement to a preference may be made on the basis of an applicant's certification of their qualification for that preference. Before selection is made, this qualification must be verified.

Preference (up front):

The following preference is available to qualifying families at this time:

- Catastrophic Involuntary Displacement, which is defined in this plan;
- The Working Family Preference 24 CFR982.207 (b)(2).
-
- Single Persons who are elderly, displaced, homeless, or persons with disabilities over other single persons.

A family that consists only of a pregnant woman must be treated as a two person family.

Administration of the Preferences:

Depending on the time an applicant may have to remain on the waiting list, the HA will either verify preferences at the time of application (when the waiting list is short or nonexistent) or require that applicants certify to their qualification for a preference at the time of pre-application (when the wait for admission exceeds four months). Verifying preferences is one of the earliest steps in processing applicants for admission. Preference verifications shall be no more than 120 days old at the time of certification.

The HA may use a pre-application to obtain the family's certification that it qualifies for a preference. The family will be advised to notify the HA of any change that may affect their ability to qualify for a preference.

Applicants that are otherwise eligible and self-certified as qualifying for a preference will be placed on the waiting list.

Applicants that self-certify to a preference at the time of pre-application and cannot verify current preference status at the time of certification will be moved into the non-preference category, and to a lower position on the waiting list based on date and time of application, if applicable.

Notice and Opportunity for a Meeting:

If the HA determines that an applicant does not meet the criteria for a preference, the HA must promptly provide the applicant with written notice of the determination. The notice must contain a brief statement of the reasons for the determination, and state that the applicant has the right to meet with the HA's designee to review it. If a meeting is requested within the time specified in the notice, it must be conducted by a person or persons designated by the HA. The person designated by the HA to conduct the informal hearing shall be an impartial person appointed by the HA other than a person who made the approval of the HA's action under

review or a subordinate of such person. The procedures specified in this section must be carried out in accordance with HUD's requirements. The applicant may exercise other rights if the applicant believes that he or she has been discriminated against on the basis of race, color, age, religion, sex, disability, familial status, or national origin.

**SCREENING APPLICANTS FOR ADMISSION.**

The HA will conduct a detailed interview of all applicants using an interview checklist as a part of the screening procedures. The form will ask questions based on the essential elements participation. Answers will be subject to third party verification.

All applicants must complete an application interview.

The applicant and all adults must sign a release allowing the HA to request a copy of a police report from the National Crime Information Center, police department or other law enforcement agencies.

**SCREENING REASONS FOR DENIAL OF ADMISSION.**

Outstanding balances owed to any HA or any other federally subsidized housing program is part of the screening evaluation. Outstanding balances will result in the rejection of the application.

Applicants that owe a HA or any other federally subsidized program funds will not be processed for occupancy. The applicant must pay the funds owed prior to the application being processed. After the application is processed, the applicant must meet all other conditions for occupancy. ***Re-paying funds that are due, do not necessarily qualify an applicant for occupancy.*** Such payments will be considered along with other factors in the application process. Any money owed to a HA which has been discharged by bankruptcy shall not be considered in making this determination.

The HA will complete a criminal background check on all adult applicants or any member for whom criminal records are available. Before the HA rejects an applicant on the basis of criminal history, the HA must notify the household of the proposed rejection and proceed under the provisions of the Criminal Records Management Policy.

If any screening activity suggests that an applicant household member may be currently engaged in illegal use of drugs, the HA may seek information from a drug abuse treatment facility or local law enforcement agency to determine whether the facility or agency has reasonable cause to believe the household member is currently engaging in illegal drug use.

The HA may require an applicant to exclude a household member in order to be admitted if that household member has participated in or been culpable for criminal actions that warrant rejection.

Record of eviction from housing or involuntary termination from residential programs (taking into account date and circumstances).

The HA is required to reject the applications of certain applicants for criminal activity or drug abuse by household members if the HA determines that:

- Any household member is currently engaging in illegal use of a drug; or
- The HA has reasonable cause to believe that a household member's illegal use or pattern of illegal use of a drug may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents;
- Any household member has ever been convicted of manufacture or production of methamphetamine on the premises of any federally assisted housing;
- Any member of the household is subject to a lifetime registration requirement under a state sex offender registration program; or
- Any member of the household's abuse or pattern of abuse of alcohol may threaten the health, safety, or right to peaceful enjoyment of the premises by other residents.

The HA shall reject the application of any applicant if, within the last ***three years***, any household member has been evicted from any federally assisted housing for drug-related criminal activity. However, the HA may admit the household if the HA determines that:

The evicted household member who engaged in drug-related criminal activity has successfully completed a supervised drug rehabilitation program approved by the HA, or

The circumstances leading to the eviction no longer exist (for example, the criminal household member has died or is imprisoned).

An applicant's intentional misrepresentation of information related to eligibility, preference for admission, housing history, allowances, family composition, or rent will result in rejection. In the event the misrepresentation is discovered after admission, the assistance will be terminated for such misrepresentation. Unintentional mistakes that do not confer any advantage to the applicant will not be considered misrepresentations.

Applicant or family member has previously been evicted from public housing, including having moved from the HA as a result of their lease being terminated by the HA.

Applicant or family member has committed acts, which would constitute fraud in connection with any federally, assisted housing program.

Applicant or family member did not provide information required within the time frame specified during the application process.

During the interview process, the applicant or a family member demonstrates hostile behavior that indicates that the prospective applicant or family member may be a threat.

If the HA uses the criminal information history to deny or terminate assistance the HA must provide a copy of the information used in accordance with Criminal Records Management Policy.

If the applicant is enrolled as a student at an institute of higher education (as defined under Section 102 of the higher education act of 1965) and;

- Is not a veteran
- Is not married
- Is under 24 years of age
- Doesn't have a dependant child
- Is not otherwise individually eligible, or has parents who, individually or jointly, are not eligible to receive HCV.

If the applicant is a former Public Housing or HCV participant who vacated the unit in violation of his lease, the applicant may be declared ineligible.

If the applicant doesn't certify U.S. Citizenship or legal immigration status can't be verified, the applicant must be declared ineligible.

**QUALIFIED APPLICANTS:**

Verified information will be analyzed and a determination made with respect to:

- Eligibility of the applicant as a family;
- Eligibility of the applicant with respect to income limits for admission;
- Eligibility of the applicant with respect to citizenship or eligible immigration status;
- Preference category (if any) to which the family is entitled; and
- Qualification of the applicant with respect to the Selection Criteria.

Qualified (DETERMINED TO BE ELIGIBLE):

Families will be notified by the HA of the approximate time frame for issuance of the voucher insofar as that date can be determined; however the time frame stated by the HA is an estimate and does not guarantee that applicants can expect to be assisted by that date.

**UNQUALIFIED APPLICANTS (TIME FRAMES):**

As a rule applicants may be denied admission to HCV Housing for the following time frames, which shall begin on the date of application, unless otherwise provided for herein below:

Denied admission for ***one year*** for the following:

- Violation of family obligation under the voucher,
- Illegal use or possession for personal use of a controlled substance,
- Abuse of alcohol,
- Demonstration of hostile behavior during the interview process that indicates that the applicant may be a threat,

- Being evicted from a HA, including having moved from a HA as a result of their lease being terminated by the HA for reasons other than as listed below,
- Having other federally subsidized housing assistance terminated for reasons other than as listed below.

Denied admission for ***three years*** for the following:

- Persons evicted from public housing, Indian Housing, HCV, or Section 23 programs because of drug-related criminal activity (except drug trafficking) are ineligible for admission to HCV housing for a ***three-year*** period beginning on the date of such eviction.
- The HA can waive this requirement if the person demonstrates to the HA's satisfaction successful completion of a rehabilitation program approved by the HA, or the circumstances leading to the eviction no longer exist.
- Drug use without evidence of rehabilitation.

Denied admission for ***five years*** for the following:

- Fraud: (giving false information on the application or during an interview is considered fraud).
- An arrest or conviction record that indicates that the applicant may be a threat and/or negative influence on other persons residing in the immediate vicinity of the premises. The five years shall begin on the date of the last reported act, completion of sentence and/or probation period. (Whichever is later).

Denied admission for ***10-years*** for the following:

- Conviction for drug trafficking.

Denied admission ***for life*** to any household that includes any individual who is subject to a lifetime registration requirement under a State sex offender registration program.

Denied admission ***for life*** to any applicant who has been convicted of manufacturing or producing methamphetamine (commonly referred to as "speed") on the premises of an assisted housing project. Premises are defined as the building or complex in which the dwelling unit is located, including common areas and grounds.

These time frames (with the exception of 5 and 6 which are HUD mandated) are only guidelines and the HA may deny admission to any individual whose behavior may adversely affect the health, safety, welfare, or right to peaceful enjoyment of the residences by persons residing in the immediate vicinity of the premises or may admit persons who exhibit evidence of rehabilitation.

Notice to Denied Applicants:

Unqualified applicants will be promptly notified by a Notice of Rejection from the HA, stating the basis for such determination and offering an opportunity for informal hearing (see Procedure for Informal Hearing for Rejected Applicants). The denial letter will allow the applicant 10 calendar days to request an informal meeting (verbal and/or in writing) with the HA. An HA representative will hear the appeal and issue a decision within 10 calendar days of the meeting.

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
3. funds supporting each Federal program, and state the planned use for the resources.

# PHA Plan Element: No. 2 - Financial Resources

| Financial Resources: Planned Sources and Uses | | |
|---|---|---|
| **Sources** | **Planned $** | **Planned Uses** |
| 1. **Federal Grants (FY 2008 grants)** | | |
| a) Public Housing Operating Fund | $3,580,000 | Day to Day Operations |
| b) Public Housing Capital Fund | $ 1,890,835 | Capital & Management Improvements |
| c) Annual Contributions for Section 8 Tenant-Based Assistance –Section 8 Vouchers | $772,632 | Housing Assistance |
| | | |
| **3. Public Housing Dwelling Rental Income** | $ 56,000 | Day to Day Operations |
| | | |
| **4. Other income** (list below) | | Day to Day Operations |
| **Details of Other Income**<br>Interest Income<br>Main. Charges & late fees<br>Capital Fund operations<br>Total | <br>$6,946<br>$46,950<br>$150,000 | |
| ARRA FUNDS | $1,512,258 | Capital Improvements |
| **5. Non-federal sources** (list below) | | |
| **Community Foundation Grant** | $25,000 | Youth Services |
| **Total resources** | $8,041,621 | |
| | | |

# PHA PLAN ELEMENT 3
# Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.

**PUBLIC HOUSING**

## INCOME BASED RENTS- PROCEDURES TO BE USED IN DETERMINING INCOME AND RENT

### ANNUAL INCOME:

Annual income is the anticipated total income from all sources, including net income derived from assets, received by the family head and spouse (even if temporarily absent) and by each additional family member including all net income from assets for the 12-month period following the effective date of initial determination or reexamination of income, exclusive of income that is temporary, non-recurring, or sporadic as defined below, or is specifically excluded from income by other federal statute. Annual income includes but is not limited to:

14. The full amount, before any payroll deductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services;
15. The net income from operation of a business or profession, including any withdrawal of cash or assets from the operation of the business. Expenditures for business expansion or amortization of capital indebtedness shall not be used as deductions in determining the net income from a business. An allowance for the straight line depreciation of assets used in a business or profession may be deducted as provided in IRS regulations. Withdrawals of cash or assets will not be considered income when used to reimburse the family for cash or assets invested in the business;
16. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness shall not be used as deductions in determining net income. An

allowance for the straight line depreciation of real or personal property is permitted. Withdrawals of cash or assets will not be considered income when used to reimburse the family for cash or assets invested in the property Name of resident, race, ethnicity, and unit number;

**NOTE:** If the family has net family assets in excess of $5,000, annual income shall include the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbook savings rate as determined by HUD;

17. The full amount of periodic payments received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts (See below for treatment of delayed or deferred periodic payment of social security or supplemental security income benefits.);
18. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay (See below concerning treatment of lump-sum additions as family assets.);
19. All welfare assistance payments (Temporary Assistance for Needy Families, General Assistance) received by or on behalf of any family member;
20. Periodic and determinable allowances, such as alimony and child support payments, and regular cash and non-cash contributions or gifts received from agencies or persons not residing in the dwelling made to or on behalf of family members; and

**NOTE:** Regular contributions (including non-cash contributions) to the household must be considered income if they are not for medical expenses. For example, if someone who is not a household member pays the telephone bill or car payment every month, or buys gas, tires and insurance for the car, these contributions would be considered income for the purposes of the public housing program.

21. All regular pay, special pay, and allowances of a family member in the Armed Forces. (See below concerning pay for exposure to hostile fire.)

**ITEMS NOT INCLUDED IN ANNUAL INCOME:**

22. Income from the employment of children (including foster children) under the age of 18 years;
23. Payments received for the care of foster children or foster adults (usually individuals with disabilities, unrelated to the resident family, who are unable to live alone);
24. Lump sum additions to family assets, such as inheritances, insurance payments (including payments under health and accident insurance, and worker's compensation), capital gains, one-time lottery winnings, and settlement for personal property losses (but see above if the payments are or will be periodic in nature);
25. Amounts received by the family that are specifically for, or in reimbursement of, the cost of medical expenses for any family member;
26. Income of a live-in aide provided the person meets the definition of a live-in aide;
27. The full amount of student financial assistance paid directly to the student or the educational institution;
28. The special pay to a family member serving in the Armed Forces who is exposed to hostile fire;
29. Certain amounts received that are related to participation in the following programs:

    Amounts received under HUD funded training programs (e.g. Step-up program: excludes stipends, wages, transportation payments, child care vouchers, etc. for the duration of the training);

    Amounts received by a person with disabilities that are disregarded for a limited time for purposes of SSI and benefits that are set aside for use under a Plan to Attain Self-sufficiency (PASS);

    Amounts received by a participant in other publicly assisted programs that are specifically for, or in reimbursement of, out-of-pocket expenses incurred (special equipment, clothing, transportation, child care, etc.) to allow participation in a specific program;

    A resident services stipend. A resident services stipend is a modest amount (not to exceed $200/month) received by a public housing resident for performing a service for the HA, on a part-time basis, that enhances the quality

of life in public housing. Such services may include but are not limited to, fire patrol, hall monitoring, lawn maintenance, and resident initiatives coordination. No resident may receive more than one such stipend during the same period of time; and

Incremental earnings and/or benefits resulting to any family member from participation in qualifying state of local employment training program (including training programs not affiliated with the local government), and training of family members as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives, and are excluded only for a limited period as determined in advance by the HA;

30. Temporary, non-recurring, or sporadic income (including gifts);

31. Reparation payments paid by foreign governments pursuant to claims filed under the laws of that government by persons who were persecuted during the Nazi era;

32. Earnings in excess of $480 for each full-time student 18 years old or older (excluding the head of the household and spouse);

33. Adoption assistance payments in excess of $480 per adopted child;

34. The incremental earnings and benefits to any resident:

    - Whose annual income increases due to employment of a family member who was unemployed for one or more years previous to employment;
    - Whose annual income increases as the result of increased earnings by a family member during participation in any economic self sufficiency or other job training program; or
    - Who's annual income increases due to new employment or increased earnings of a family member during or within six months of receiving state funded assistance, benefits or services, will not be increased during the exclusion period.

**For purposes of this paragraph, the following definitions apply:**

State funded assistance, benefits or services means any state program for temporary assistance for needy families funded under Part A of Title IV of the Social Security Act, as determined by the HA in consultation with the local agencies administering Temporary Assistance for Needy Families (TANF) and Welfare-to-Work programs. The TANF program is not limited to monthly income maintenance, but also includes such benefits and services as one-time payments, wage subsidies, and transportation assistance: provided that the total amount over a six-month period is at least $500.

During the 12-month period beginning when the member first qualifies for a disallowance, the HA must exclude from Annual Income any increase in income as a result of employment. For the 12 months following the exclusion period, 50% of the income increase shall be excluded.

Regardless of how long it takes a resident to work for 12 months (to qualify for the first exclusion) or the second 12 months (to qualify for the second exclusion), the maximum period for the disallowance (exclusion) is 48 months.

The disallowance of increased income under this section is only applicable to current residents and will not apply to applicants who have begun working prior to admission (unless their earnings are less than would be earned working ten hours per week at minimum wage, under which they qualify as unemployed).

35. Deferred periodic payments of SSI and Social Security (SS) benefits that are received in a lump sum payment;

36. Amounts received by the family in the form of refunds or rebates under state or local law for property taxes paid on the dwelling unit;

37. Amounts paid by a state agency to a family with a developmentally disabled family member living at home to offset the cost of services and equipment needed to keep the developmentally disabled family member at home;

38. Amounts specifically excluded by any other Federal Statute from consideration as income for purposes of determining eligibility or benefits under a category of assistance programs that includes assistance under the United States Housing Act of 1937. (A notice will be published by HUD in the Federal Register identifying the benefits that qualify for this exclusion. Updates will be published and distributed when necessary.)

**The following is a list of benefits excluded by other Federal Statute:**

- The value of the allotment provided to an eligible household for coupons under the Food Stamp Act of 1977 [7 USC 2017 (h)];
- Payments to volunteers under the Domestic Volunteer Service Act of 1973 [42 USC 5044 (g), 5088];

  **Examples of programs under this Act include but are not limited to:**
  - The Retired Senior Volunteer Program (RSVP), Foster Grandparent Program (FGP), Senior Companion Program (SCP), and the Older American Committee Service Program;
  - National Volunteer Antipoverty Programs such as VISTA, Peace Corps, Service Learning Program, and Special Volunteer Programs;
  - Small Business Administration Programs such as the National Volunteer Program to Assist Small Business and Promote Volunteer Service to Persons with Business Experience, Service Corps of Retired Executives (SCORE), and Active Corps of Executives (ACE).
- Payments received under the Alaska Native Claims Settlement Act [43 USC.1626 (a)];
- Income derived from certain sub marginal land of the United States that is held in trust for certain Indian tribes [25 USC. 459(e)];
- Payments or allowances made under the Department of Health and Human Services' Low-income Home Energy Assistance Program [42 USC 8624 (f)];
- Payments received under programs funded in whole or in part under the Job Training Partnership Act [29 USC 1552 (b)];
- Income derived from the disposition of funds of the Grand River Band of Ottawa Indians [Pub. L. 94-540, 90 State 2503-04];
- The first $2,000 of per capita shares received from judgment funds awarded by the Indian Claims Commission or the Court of Claims (25 USC 1407-08), or from funds held in trust for an Indian Tribe by the Secretary of Interior [25 USC 117b, 1407]; and
- Amounts of scholarships funded under Title IV of the Higher Education Act of 1965 including awards under the Federal work-study program or under the Bureau of Indian Affairs student assistance programs [20 USC 1087].

**Examples of Title IV programs include but are not limited to:**
- Basic Educational Opportunity Grants (Pell Grants),
- Supplemental Opportunity Grants,
- State Student Incentive Grants,
- College Work Study, and
- Byrd Scholarships.

- Payments received from programs funded under Title V of the Older Americans Act of 1965 [42 USC 3056 (f)]:

**Examples of programs under this act include but are not limited to:**
- Senior Community Services Employment Program (CSEP),
- National Caucus Center on the Black Aged,
- National Urban League,
- Association National Pro Personas Mayors,
- National Council on Aging,
- American Association of Retired Persons,
- National Council on Senior Citizens, and
- Green Thumb.

- Payments received after January 1, 1989 from the Agent Orange Settlement Fund or any other fund established in the Agent Orange product liability litigation;
- Payments received under the Maine Indian Claims Settlement Act of 1980 (Pub. L. 96-420, 94 Stat. 1785);
- The value of any childcare provided or arranged (or any amount received as payment for such care or reimbursement for costs incurred for such care) under the Child Care and Development Block Grant Act of 1990 [42 USC 9858(q)];
- Earned income tax credit refund payments received on or after January 1, 1991 [26 USC 32 (j)].
  - Payments by the Indian Claims Commission to the Confederated Tribes and Bands of Yakima Indian Nation or the Apache Tribe of Mescalero Reservation;

- Allowances, earnings and payments to AmeriCorps participants under the National and Community Service Act of 1990;

**ANTICIPATING ANNUAL INCOME:**

If it is not feasible to anticipate income for a 12-month period, the HA may use the annualized income anticipated for a shorter period, subject to an interim adjustment at the end of the shorter period. (This method would be used for teachers who are only paid for nine months, or for residents receiving unemployment compensation.)

**ADJUSTED INCOME:**

Adjusted income (the income upon which rent is based) means annual income less the following deductions and exemptions:

For All Families:

Child Care Expenses:

A deduction of amounts anticipated to be paid by the family for the care of children under 13 years of age for the period for which Annual Income is computed, BUT ONLY when such care is necessary to enable a family member to be gainfully employed, to seek employment or to further his/her education. Amounts deducted must be un-reimbursed expenses and shall not exceed: (a) the amount of income earned by the family member released to work; or (b) an amount determined to be reasonable by the HA when the expense is incurred to permit education or to seek employment.

Dependent Deduction:

An exemption of $480 for each member of the family residing in the household (other than the head of household, or spouse, Live-in Aide, foster adult or foster child) who is under 18 years of age or who is 18 years of age or older and disabled, or a full-time student.

Work related Disability Expenses:

A deduction of un-reimbursed amounts paid for attendant care or auxiliary apparatus expenses for family members with disabilities where such expenses are necessary to permit a family member(s), including the disabled member, to be employed. In no event may the amount of the deduction exceed the employment income earned by the family member(s) freed to work.

**NOTE:** Equipment and auxiliary apparatus may include but are not limited to: wheelchairs, lifts, reading devices for the visually impaired, and equipment added to cars and vans to permit their use by the disabled family member. Also included would be the annualized cost differential between a car and the cost of a van required by the family member with disabilities.

**For families without medical expenses: the amount of the deduction equals the cost of all un-reimbursed expenses for work related disability expense less three percent of Annual Income, provided the amount so calculated does not exceed the employment income earned.**

**For elderly or disabled families with medical expenses: the amount of the deduction equals the cost of all un-reimbursed expenses for work related disability that do not exceed the employment income earned. If this amount is less than three percent of annual income, the remainder of the three percent will be taken from medical expenses. If disability expenses are greater than three percent of annual income, all un-reimbursed medical expenses as defined below will be deducted.**

Elderly and Disabled Families Only:

Medical Expense Deduction:

A deduction of un-reimbursed medical expenses, including insurance premiums, anticipated for the period for which annual income is computed. Medical expenses include but are not limited to: services of physicians and other health care professionals, services of health care facilities, health insurance premiums (including the cost of Medicare), prescription and non-prescription medicines, transportation to and from treatment, dental expenses, eyeglasses, hearing aids and batteries, attendant care (unrelated to employment of family members), and payments on accumulated medical bills. To be considered by the HA for determining a deduction from income, the expenses claimed must be verifiable.

**For elderly or disabled families without work related disability expenses: The amount of the deduction shall equal total medical expenses less three percent of annual income.**

**For elderly or disabled families with both work related disability expenses and medical expenses: the amount of the deduction is calculated as described above.**

Elderly/Disabled Household Exemption:

An exemption of $400 per household. (See appendix.)

**NOTE:** Optional Deductions/Exemptions: The HA may amend this policy and grant further deductions. Any such deduction will be noted here.

**COMPUTING RENT:**

The TTP.

The first step in computing rent is to determine each family's Total Tenant Payment (TTP). Then, if the family is occupying a unit that has resident paid utilities, the Utility Allowance is subtracted from the TTP. The result of this computation, if a positive number, is the tenant rent. If the TTP less the utility allowance is a negative number, the result is the utility reimbursement, which may be paid to the resident or, directly to the utility company by the HA.

TTP is the highest of:

- 30% of adjusted monthly income; or
- 10% of monthly income; but never less than the...
- $50.00 minimum rent; and never more than the...
- Flat rent/ceiling rent, if chosen by the family.

**NOTE:** It is possible for public housing residents to qualify for a utility reimbursement despite the requirement of a minimum rent. For example, if a public housing family's TTP is the minimum rent of $25 and the HA's utility allowance for the size and type unit the family has selected is $60, the family would receive a utility reimbursement of $35 ($60 less $25) for resident purchased utilities.

Tenant Rent:

Tenant rent is computed by subtracting the utility allowance for resident supplied utilities (if applicable) from the TTP. In developments where the HA pays all utility bills directly to the utility supplier, tenant rent equals TTP.

Minimum Rent:

The minimum rent shall be $50.00 per month, but a hardship exemption shall be granted to residents who can document that they are unable to pay the $50.00 because of a long-term hardship (over 90 days). Examples under which residents would qualify for the hardship exemption to the minimum rent would be limited to the following:

- The family has lost eligibility for or is applying for an eligibility determination for a Federal, State or local assistance program;
- The family would be evicted as result of the imposition of the minimum rent requirements;
- The income of the family has decreased because of changed circumstances, including loss of employment;
- A death in the family has occurred; or
- Other circumstances as determined by the HA

Rent Choice:

At initial certification and at each subsequent annual reexamination the resident shall be offered a choice of paying either the income based rent or the flat rent applicable to the unit they will be occupying.

## FLAT RENTS/CEILING RENTS PUBLIC HOUSING

**INTENT AND PURPOSE:**

Ceiling rents provide an incentive to remain in public housing to families whose flat rents were reduced to income based rents because of a hardship and whose incomes then increased so that an income based rent is unreasonable for the housing being provided. The ceiling rent is thus in effect only for the portion of the year between the family's interim increase in rent and their next annual reexamination (when they can elect the flat rent).

ESTABLISHING CEILING RENTS:

The HA has established ceiling rents for all dwelling units inventory wide. Ceiling rents for a class of units are based on the size, location or other characteristic that are unit based. The HA may revoke or raise ceiling rents at any time after giving reasonable notice to the affected residents.

CALCULATING CEILING RENTS:

The HA will determine the minimum ceiling rents that can be charged for a unit. Ceiling rents are based on the flat rent plus any applicable utility allowance but never less than 75% of the average operating cost for units at the development.

WHAT THE RESIDENT PAYS:

Residents in units where ceiling rents are in effect pay the lower of the ceiling rent or income based rent.

CEILING RENT ADJUSTMENTS:

Ceiling rents will be adjusted annually to the level of the “flat” rents plus the utility allowance.

FLAT RENTS:

NOTE: The family must be offered the opportunity to go on “flat” or “income based” rent and the HA must maintain documentation of the offer and selection.

Flat rents are market based rents. They vary by unit size and type and by development location. Once each year, only at admission or at the annual reexamination, all residents are offered the choice of paying an income based rent or the flat rent. Flat rents represent the actual market value of the HA's housing units. The HA will generally consider the following information in developing its flat rent schedule:

- Rents of non-assisted rental units in the immediate neighborhood;
- Size of the HA's units compared to non-assisted rental units from the neighborhood;
- Age, type of unit and condition of the HA's units compared to non-assisted rental units from the neighborhood;
- Land use in the surrounding neighborhood;
- Amenities (childcare, laundry facilities, playgrounds, community rooms, social services, education/job training programs, etc.) at the HA's properties and in the surrounding neighborhood;
- Crime in the HA's developments and the surrounding neighborhood;
- Quality of local schools serving the HA development;
- Availability of public transportation at the HA development; and
- Availability of accessible units for persons with mobility impairments.

ANNUAL UPDATE OF FLAT RENTS:

The HA shall review the Flat Rent structure annually and adjust the rents as needed. Residents on flat rent will not be affected by flat rent updates until their next regular reexamination.

REEXAMINATION OF FAMILIES ON FLAT RENTS:

Families paying flat rents are required to recertify income only every three years, rather than annually, although they are still required to participate in an Annual Reexamination in order to ensure that unit size is still appropriate and Community Service requirements are met.

SECTION 8
**Section 8 Tenant-Based Assistance**

**(1) Payment Standards**

a. The HA's payment standard are set at 110% of FMR The payment standard has remained at 110% of the FMR since October 1, 2002, and they are reviewed annually.

b. The HA reevaluates the payment standards annually. The factors used by the HA in its assessment of the adequacy of its payment standard are 1) success rates of assisted families and 2) rent burdens of assisted families.

**(2) Minimum Rent**

a. The HA's minimum rent is currently $50.00

b. The HA's Section 8 Administrative Plan outlines the policy of the HA as it relates to minimum rent hardship exemptions.

## PHA PLAN ELEMENT 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.**

**The following programs are under AHA Management:**

| Program Type | Units or families served currently | Expected turnover |
|---|---|---|
| Public Housing | 734 | 200 |
| Sec 8 Vouchers | 201 | 30 |

**Management and Maintenance Policies**

Listed below are the public housing management and maintenance policy documents, manuals and handbooks that contain Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of prevention or eradication of pest infestation (which includes cockroach infestation) and policies governing Section 8 management.

- Public Housing Maintenance and Management:
  Ref: Public Housing Management Manual, Maintenance Operations Manual, Admissions and Continue Occupancy Policy, Dwelling Lease and Grievance Procedure
- Section 8 Management:
  Ref: Section 8 Administrative Plan Manual

Note: The manual's listed above are filed and are available for review as backup for the Annual and Five-Year Plan at the main office of the HA at 500 Glen Addie Ave, Anniston, AL 36201.

## PHA PLAN ELEMENT 5

**Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.**

**A. Public Housing**

The HA has an established written grievance procedure that complies with 24 CFR Part 966, Subpart B for residents of public housing. Also, the HA has added to the federal requirements as follows: The HA has defined promptly to mean within five business days from the date of mailing (Reference Section II G of the Grievance Procedure, which is filed and are available for review as backup for the Annual and Five-Year Plan at the main office of the HA at 500 Glen Addie Ave, Anniston, AL.

Applicants for public housing are entitled to an informal hearing and the initial contact is the Occupancy Specialist for initiating the grievance process. The Occupancy Specialist is located in the main administrative office of the HA, which is 500 Glen Addie Ave, Anniston, AL.

Existing Residents contact the Housing Manager within each development for initiating the grievance process.

**B. Section 8 Tenant-Based Assistance**

The HA has established an informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982. Also, the HA has added to the federal requirements as follows: The HA specified the number of days an applicant has to request an Informal Review and the number of days a participant has to request an Informal Hearing (Reference Section 8 -Applicant Denied Assistance and Provided Opportunity for Informal Review and Section 8 - Participant provided Opportunity for Informal Hearing).

The Section 8 Coordinator is the initial contact for all Section 8 applicants and participants for initiating the grievance process.

## PHA PLAN ELEMENT 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.

Currently, there are not any developments designated elderly only and there are no future plans to do so at this time.

# PHA PLAN ELEMENT 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).**

**A. HA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

The HA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937). The agreement was signed on July 31, 2001.

2. The HA also coordinates with the TANF Agency on:

- Client referrals;
- Information sharing regarding mutual clients; and,
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families

**B. Services and programs offered to residents and participants**

1. Self-Sufficiency Policies

The HA strives to enhance the economic and social self-sufficiency of assisted families by adopting policies that promote economic and social self0sufficiency. The policies are as follows:

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies

2. Economic and Social self-sufficiency programs

The HA coordinates, promotes and provides programs to enhance the economic and social self-sufficiency of residents as follows:

| **Services and Programs** | | | | |
|---|---|---|---|---|
| Program Name & Description (including location, if appropriate) | Estimated Size | Allocation Method (waiting list/random selection/specific criteria/other) | Access (development office / HA main office / other provider name) | Eligibility (public housing or section 8 participants or both) |
| Boys and Girls Clubs | 240 | All PHA Children | Constantine Homes and Norwood Homes | Both |
| Computer Training Centers | 40 | All low-income individuals | Constantine, Norwood and Glen Addie | Both |
| ASAP (Agency for Substance Abuse) | 50 | All low-income individuals | Cooper Homes | Both |
| | | | | |

**C. Welfare Benefit Reductions**

The HA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to

the treatment of income changes resulting from welfare program requirements) by:

- Adopting appropriate changes to the HA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies

**D. Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937- NOTE: HUD reinstated the requirements of Community Service and Self-Sufficiency Requirements with the publication of NOTICE PIH 2003-17, and issued June 20, 2003**

The HA reinstated the requirements of Community Service and Self-Sufficiency with the publication of HUD NOTICE PIH 2003-17, issued June 20, 2003. The HA amended its Dwelling Lease, Admissions and Continued Occupancy Policy and Community Service Policy at the August 24, 2004, Board meeting to comply with Section 12 of the United States Housing Act of 1937, as amended and outlined in Title 24 of the Code of Federal Regulations part 960 and Section 605. The HA issued a notice to all residents on August 1, 2003, informing all residents of Public Housing that HUD has reinstated the community service requirements. The HA requires all residents to comply with community service requirements.

# PHA PLAN ELEMENT 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.

**A. To ensure the safety of public housing residents**

1. The HA analyzes the following to ensure the safety of public housing residents:

- Incidences of violent and/or drug-related crime in some or all of the HA's developments
- Incidences of violent and/or drug-related crime in the areas surrounding or adjacent to the HA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived levels of violent and/or drug-related crime

2. The utilizes to following data to determine the need for HA actions to improve safety of residents:

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- HA employee reports
- Police reports

- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs

3. The developments that are affected the most are: Glen Addie Homes 164 units, Cooper Homes 10 units, Norwood Homes 101 units, Constantine Homes 173 units, Barber Terrace 60 units, Parkwin/Washington Homes 100 units, Fairview/Tinsley Homes 50 units, total 748 units.

**B. Crime and Drug Prevention activities the HA has undertaken and plans to continue in the HA's next fiscal year:**

1. The crime prevention activities the HA has undertaken are as follows:
   - Contracting with the City of Anniston Police Department for the services of five police officers to work exclusive within public housing. The program is called the Community Policing Program (COP). The COP program focus is on crime prevention and drug/gang prevention activities.
   - Works with non-profit organization to work with at-risk youth, adults, or seniors anti-drug and gang activity programs
   - The HA also has Decorative Security fencing in Cooper Homes and extra security lighting in all seven communities to help improve safety and security.

2. The developments that are affected the most are: Glen Addie Homes 164 units, Cooper Homes 10 units, Norwood Homes 101 units, Constantine Homes 173 units, Barber Terrace 60 units, Parkwin/Washington Homes 100 units, Fairview/Tinsley Homes 50 units, total 748 units.

**C. Coordination between HA and the police**

1. The HA coordinates with the City of Anniston Police to carrying out crime prevention measures and activities as follows:
   - COP Officers are involved in the development, implementation, and/or ongoing evaluation of drug-elimination plan
   - COP Officers provide crime data to housing authority staff for analysis and action
   - COP Officers have established a physical presence on housing authority property by working exclusively in Anniston's public housing.
   - COP Officers regularly testify in and otherwise support eviction cases
   - COP Officers regularly meet with the HA management and residents
   - The HA executes an annual agreement with the City of Anniston for policing services that are over and above the baseline law enforcement services required by the Cooperation Agreement.

2. The developments that are affected the most are: Glen Addie Homes 164 units, Cooper Homes 10 units, Norwood Homes 101 units, Constantine Homes 173 units, Barber Terrace 60 units, Parkwin/Washington Homes 100 units, Fairview/Tinsley Homes 50 units, total 748 units.

# PHA PLAN ELEMENT 9

## Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.

The final rule concerning Pet Ownership in Public Housing was published in the federal register on July 10, 2000. The Birmingham HUD office had approved a Pet Policy governing the ownership of pets in public housing for Public Housing Authorities. This policy was posted for resident comment and presented to the Resident Advisory Board for review and comment. After modifying the Pet Policy to reflect comments made during the comment period the Pet Policy was adopted on July 25, 2000 to be effective January 1, 2001.. The Admissions and Continued Occupancy Policy was amended to incorporate the pet policy. Also, approved was a Lease addendum for residents to execute that are approved for pet ownership. The HA Pet policy has been revised based on the model developed by the Policy Task Force. The primary revisions delete the requirements of having cats declawed and increase the weight limit of a cat to 20 pounds. The revised pet policy will be approved by the Board of Commissioners at the December 2009 meeting.

## PHA PLAN ELEMENT 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. (see al004f01)

The HA 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. The Admissions and Continued Occupancy Policy and the Section 8 Administrative Plan have civil rights statements for compliance. The HA also conducts and annual self-evaluation for Section 504 compliance and has annual goals for meeting Section 3 objectives. It is the intent and practice of the HA to comply with all applicable Civil Rights laws and regulations. Discrimination of any type will not be tolerated by the HA. Required HA certification is attached (**See attachment**

## PHA PLAN ELEMENT 11

### Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.

The HA is required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))

The most recent fiscal audit for the HA was for the period ending March 31, 2008, and this was reported in the Annual and Five Year plan submitted to HUD on January 16, 2009. The audit for the period ending March 31, 2009, has not been completed. The field work for the Annual Audit of the GGHA has been completed by Yeager & Boyd, from Birmingham, Alabama for the period ending March 31, 2009. We are not aware of any finding or recommendations at this time but the report cannot be finalized until the audited financials can be submitted to HUD. HUD is in the process of updating its data bases to accept Public Housing Data due to the conversion to project based accounting. Once HUD allows PHAs to submit financial statements the audit can be completed. At the time we do not know when the HUD data base will allow us to submit our financial data to HUD. As soon as the audit is completed it will be transmitted to HUD.

## PHA PLAN ELEMENT 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.**

The HA is engaging in activities that will contribute to the long-term asset management of its public housing stock , including how the Agency plans for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this HA Plan.

The HA has implemented project-based accounting and was fully operational for the period ending March 31, 2009.

The HA submitted its plan and rational for the assignment of the Asset Management (AMP) identification numbers to the Birmingham HUD office in April 2006 for asset management. The HA decided to group developments into groups of 3's (3 properties per AMP based on geographic location. All employees, except the Executive Director, Director of Finance and Administration and the Director of Technical Support, keep their time based on which community they are doing work and the expense charged to that particular development. The Executive Director, Director of Finance, Personnel Manager and Director of Operations are charged to the Central Office. The HA has implement development-based or project based accounting for each of its three developments, the Central Management Office and the Central Maintenance Office. The HA was fully operational with development-based or project based accounting for all developments, central management and central maintenance effective April1, 2007. Also, Mr. Gregory A. Byrne, Director, Financial Management Division, has informed the HA, via e-mail on July 12, 2006, as required under PIH Notice 2006-10, that the Identification of Projects for Asset Management for the Anniston Housing Authority was assigned new Asset Management Property (AMP) Grouping numbers. The correspondence also indicated that the, "new project identification are deemed to be reasonable and were approved."

## PHA PLAN ELEMENT 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.

With the publication of HUD Notice 2006-23 and HUD Notice 2006-42 the HA established a goal that no individual covered under the VAWA that completes the certification to the alleged abuse and complies with the conditions of the certification will be evicted from public housing or have their Section 8 assistance terminated. This goal was added to the HA 5 Year Plan for the Fiscal Year beginning April 1, 2007 and any activity related to the eviction of victims covered under VAWA will be reported as updates to each 5 Year Plan submitted by the HA. The Board of Commissioners of the HA certified that the HA intends to comply with the implementing requirements of VAWA at the January 9, 2006 (approval of ACOP) and the November 27, 2006 Approval of the Section 8 Admin plan.

The VAWA prohibits the eviction of, and removal of assistance from certain persons living in public or Section 8-assisted housing if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual

| | |
|---|---|
| | assault, or stalking as those terms are defined in Section 3 of the United States Housing Act of 1937 as amended by VAWA (42 U. S. C. 13925). The HA distributed a notice on July 31, 2006, to all Public Housing Households and a notice was mailed to all Section 8 participant households on July 31, 2006, informing them that the HA would not evict or terminate Section 8 assistance to victims of criminal domestic violence, dating violence, sexual assault, or staking, as well as members of the victims' family listed on the dwelling lease and/or Section 8 voucher. The HA would only take action to have the person committing the violence removed from the dwelling lease and/or Section 8 voucher for the protection of the family. Based on the requirements contained in HUD Notice 2006-23, the HA developed a certification form for victims to certify that the alleged incident of abuse is bona fide and agrees to have the alleged abuser removed from the dwelling lease and/or the Section 8 Voucher. The HA will also allow the victim and remaining family members to relocate for safety reasons to another public housing development managed by the HA and/or issue the Section 8 participant family a Voucher, which will allow for relocation. To inform new public housing households and Section 8 participant households of the requirements of VAWA, the HA developed a notice that is covered with the Public Housing household and the Section 8 participant household during the leasing session effective January 1, 2007. To ensure that Section 8 Landlords are aware of the requirements of the VAWA, the HA mailed a notice to each Section 8 Landlord on July 31, 2006, which explained the requirements of VAWA. Also, for Housing Assistance Payment Contracts executed on or after July 31, 2006, the Landlord is provided a notice explaining the requirements of the VAWA and must sign the notice documenting that the HA has informed the Section 8 Landlord of the requirements of VAWA. The VAWA Act of 2005 allows Housing Authorities to require additional information in addition to the certification and the attachments details what additional information the HA is requesting and the information being requested is in accordance with the VAWA Act of 2005. Also, the attachment is completed at the time the certification is completed.<br><br>On November 28, 2008, HUD published an interim rule on VAWA in the Federal Register. The interim rule amends 24 CFR 91.205(b) and 91.305(b) to state that the jurisdiction must include an estimate of the housing assistance needs of "victims of domestic violence, dating violence, sexual assault and stalking". The HA works with the Salvation Army, which is a shelter for domestic violence and based on information for this agency the HA estimates the housing assistance needs for the period ending March 31, 2010 for this jurisdiction will be approximately 20 individuals/families. Based on occupancy trends of the HA the HA anticipates that any individuals that needs housing assistance that is a victim of domestic violence, dating violence, sexual assault and stalking will be housed if all other eligibility requirements are meet. Processing applications takes approximately two weeks to complete and the shelters in the area works with the HA to provide temporary housing while the application is being processed. Also, the interim rule includes a "special portability provision for victims of domestic violence dating violence, and stalking. The HA will comply with the special portability provisions contained in the interim rule of November 28, 2008, for the VAWA (See section 5.2 Goals and Objectives for update on meeting goals for VAWA). |
| **7.0** | **Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.** *Include statements related to these programs as applicable.*<br><br>The Anniston Housing Authority is currently in discussions with developers to establish a plan on a tax credit application.<br><br>The HA is not currently involved with any mixed finance modernization, demo/dispo or conversion.<br><br>Homeownership programs are in discussion phase for the future. |
| **8.0** | **Capital Improvements.** Please complete Parts 8.1 through 8.3, as applicable. |
| **8.1** | **Capital Fund Program Annual Statement/Performance and Evaluation Report.** As part of the PHA 5-Year and Annual Plan, annually complete and submit **t**he *Capital Fund Program Annual Statement/Performance and Evaluation Report*, form HUD-50075.1, for each current and open CFP grant and CFFP financing.<br><br>**ATTACHMENTS** |
| **8.2** | **Capital Fund Program Five-Year Action Plan.** As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan*, 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. **ATTACHMENTS 5 Year al004g01, 501-05 al004h01, 501-06 al004i01, 501-07 al004j01, 501-08 al004k01, 501-09 al004l01, 501-09S al004m01, 501-10 al004n01**

**8.3**

**Capital Fund Financing Program (CFFP).**

☒ 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.

The HA participated in a Bond Sale approved by HUD and was issued a $3,650,000 revenue bond in 2003. The revenue bond has a 20 year pay back schedule. The following amounts are due and will be paid from future the Capital Funds allocation as follows: FFY 2009 $313,821.08, FFY 2010 $313,821.08, FFY 2011 $313,821.08, FFY 2012 $313,821.08, FFY 2013 $313,821.08, FFY 2014 $313,821.08, FFY 2015 $313,821.08, FFY 2016 $313,821.08, FFY 2017 $313,821.08, FFY 2018 $313,821.08, FFY 2019 $313,821.08, FFY 2020 $313,821.08, FFY 2021 $313,821.08 and FFY 2022 $313,821.08.

**9.0**

**Housing Needs**. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

**A. Housing Needs of Families in the Jurisdiction Served by the HA**

Based upon the information contained in the Consolidated Plan's for the HA' jurisdiction, the housing needs are contained in the following table. In the "Overall" Needs column, the estimated number of renter families that have housing needs. For the remaining characteristics in the table the HA does not have information available to rate these characteristics; therefore, N/A (not applicable) in noted since the HA cannot make this assessment.

**Housing Needs of Families in the HA Jurisdiction by Family Type**

| Family Type | Overall | Afford-ability | Supply | Quality | Access-ibility | **Size** | Loca-tion |
|---|---|---|---|---|---|---|---|
| Income <= 30% of AMI | 1,306 | N/A | N/A | N/A | N/A | N/A | N/A |
| Income >30% but <=50% of AMI | 674 | N/A | N/A | N/A | N/A | N/A | N/A |
| Income >50% but <80% of AMI | 784 | N/A | N/A | N/A | N/A | N/A | N/A |
| Elderly | 606 | N/A | N/A | N/A | N/A | N/A | N/A |
| Families with Disabilities | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Race/Ethnicity – White | 948 | N/A | N/A | N/A | N/A | N/A | N/A |
| Race/Ethnicity – Black | 1,812 | N/A | N/A | N/A | N/A | N/A | N/A |
| Race/Ethnicity – Hispanic | 62 | N/A | N/A | N/A | N/A | N/A | N/A |
| Race/Ethnicity- Other | 0 | N/A | N/A | N/A | N/A | N/A | N/A |

The source of information used by the HA was the U. S. Census data, the Comprehensive Housing Affordability Strategy, CHAS data set 2000.

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

**Housing Needs of Families on the HA's Waiting List is as follows:**

Listed below are the totals for the Public Housing and Section 8 Waiting list Combined

| | # of families | % of total families – 994 units leased | Annual Turnover |
|---|---|---|---|
| Waiting list total | 318 | 32% | 260 |
| Extremely low income <=30% AMI | 260 | 26% | |
| Very low income (>30% but <=50% AMI) | 46 | 46% | |
| Low income (>50% but <80% AMI) | 12 | 1.2% | |
| Families with children | 193 | 19.3% | |
| Elderly families | 3 | .3% | |
| Families with Disabilities | 28 | 2.8% | |
| Race/ethnicity | 282 | 28.2 % | Black |
| Race/ethnicity | 36 | 3.6 % | White |
| Race/ethnicity | 0 | 0% | Other |

| | | | |
|---|---|---|---|
| Race/ethnicity | | | |
| | | | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | 104 | 10.4% | |
| 2 BR | 128 | 12.8% | |
| 3 BR | 68 | 6.8% | |
| 4 BR | 17 | 1.7% | |
| 5 BR | 1 | .1% | |
| 5+ BR | 0 | 0% | |
| | | | |

The waiting list for Public Housing is currently open. The section 8 waiting list is currently closed.

| | |
|---|---|
| 9.1 | **Strategy for Addressing Housing Needs**. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year.<br><br>**Strategy for Addressing Needs**<br>The HA's strategy for addressing the housing needs of families in the HA's jurisdiction and on the waiting list for the upcoming year is as follows:<br><br>**(1) Strategies**<br>**Strategy 1. The HA will maximize the number of affordable units available within its current resources by:**<br><br>• Employ effective maintenance and management policies to minimize the number of public housing units off-line<br>• Reduce turnover time for vacated public housing units<br>• Reduce time to renovate public housing units<br>• Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction<br>• Undertake measures to ensure access to affordable housing among families assisted by the HA, regardless of unit size required<br>• Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration<br>• Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program<br>• Participate in the Consolidated Plan development process to ensure coordination with broader community strategies<br><br>**Strategy 2: The HA will seek to increase the number of affordable housing units by:**<br><br>• Leverage affordable housing resources in the community through the creation of mixed - finance housing<br>• Pursue housing resources other than public housing or Section 8 tenant-based assistance.<br><br>**Strategy 3: The HA will also take the following actions to ensure that all individuals and families have access to affordable housing that complies with all fair housing laws units by:**<br><br>• Exceeding HUD federal targeting requirements for families at or below 30% of AMI in public housing<br>• Adopting rent policies to support and encourage work<br>• Affirmatively market to local non-profit agencies that assist families with disabilities<br>• Affirmatively market to races/ethnicities shown to have disproportionate housing needs<br>• Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units<br>• Market the section 8 program to owners outside of areas of poverty /minority concentrations<br><br>**(2) Reasons for Selecting Strategies**<br>**The HA's reasons for selecting strategies is influenced by:**<br><br>• Funding constraints<br>• Staffing constraints<br>• Limited availability of sites for assisted housing<br>• Extent to which particular housing needs are met by other organizations in the community<br>• Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the HA<br>• Influence of the housing market on HA programs<br>• Community priorities regarding housing assistance<br>• Results of consultation with local or state government<br>• Results of consultation with residents and the Resident Advisory Board |

**Additional Information**. Describe the following, as well as any additional information HUD has requested.

(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.
(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

(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. The HA is on schedule to meet and exceed the mission and twelve goals described above (see Section 5.1 and 5.2 for detailed description of mission and status of each goal).

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" The HA's definitions are as follows:

Significant Amendment:
A "significant amendment or modification" to the Annual Plan would be a change to a statuary or regulatory HA requirement that requires prior approval from HUD. For example, a change in the "Tenant Selection and Assignment Plan" of the HA.

Substantial Deviation/Modification:
A "substantial deviation" to the 5-Year Plan is an overall change in the direction of the Authority pertaining to the Authority's mission and goals. For example, deleting an existing mission/goal or adding a new mission/goal for the HA would constitute a substantial deviation.

**10.0**

2. Criteria for Substantial Deviation and Significant Amendments:
a. Amendment and Deviation Definitions:
(1) Substantial Deviation from the 5-Year Plan: This Authority defines a "Substantial Deviation" to the 5-Year and Annual Plan as any changes to rent or admissions policies or organization of the waiting list. In the event of a substantial decrease in funds in the Capital Fund Program that would eliminate or modify modernization work items that have already been approved, items dropped or moved to later years would be based-on the original priorities established for the items, with a revised budget containing these items approved by the Board of Commissioners.
(2) Significant Amendment or Modification to the Annual Plan: A "Significant Amendment" or "Significant Deviation" would be additions of non-emergency items not included in the current Annual Statement or 5-Year Action Plan, changes in use of replacement reserve funds under the Capital Fund, and any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. These would have to be commented upon by the RAB and receive Board of Commissioners approval. Additions of nonemergency items already included in the current Annual Statement or 5-Year Action Plan or items added that reflect changes in HUD regulatory requirements would not be considered a "Signification Amendment" or Significant Deviation" and would not have to have RAB approval, but these items must be approved by the Board of Commissioners in a Budget revision.

**The Anniston Housing Authority defines significant amendment and substantial deviation as and changes or modifications to the annual or agency plan in relation to 70% or more of capital funds. Amending the plan would require approval of the Resident Advisory Board.**

| | |
|---|---|
| **11.0** | **Required Submission for HUD Field Office Review**. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.<br><br>(a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) **(al004f01)**<br>(b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only) **(al004f01)**<br>(c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only) **(al004f01)**<br>(d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only) **(al004f01)**<br>(e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only) **(al004f01)**<br>(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. **(al004e01)**<br>(g) Challenged Elements **(al004e01)**<br>(h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) **(al004h01 through al004n01)**<br>(i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only) **(al004g01)**<br>**Deconcentration Policy (al004a01), RASS Improvements (al004b01), RAB Members (al004c01), ORG Chart (al004d01).** |

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 off ice 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
**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. P**HAs 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) F**orm 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.

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09S00450109 ARRA<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant: 2009<br>FFY of Grant Approval: 2009 |
|---|---|---|

**Type of Grant**
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: )
☒ Performance and Evaluation Report for Period Ending: 09/30/2009 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 15,000.00 | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | 105,000.00 | | 105,000.00 | 52,500.00 |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 1,392,258.00 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

Kevin T. Fall
12-10-2009



form **HUD-50075.1** (4/2008)

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: ANNISTON HOUSING AUTHORITY** | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09S00450109 ARRA<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | **FFY of Grant:2009**<br>**FFY of Grant Approval: 2009** |
|---|---|---|

**Type of Grant**

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: )**

☒ **Performance and Evaluation Report for Period Ending: 09/30/2009** ☐ **Final Performance and Evaluation Report**

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | 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) | 1,512,258.00 | | 105,000.00 | 52,500.00 |
| 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 | 188,370.00 | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | 266,662.00 | | | |

| **Signature of Executive Director** | **Date** | **Signature of Public Housing Director** | **Date** |
|---|---|---|---|
| | | | |

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



form **HUD-50075.1** (4/2008)

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09S00450109 ARRA<br>CFFP (Yes/ No):<br>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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| | | | | | | | | |
| AL 4-1 & 4-4 | ADMINISTRATIVE FEES | 1410.1 | | 15,000.00 | | | | |
| | | | | | | | | |
| AL 4-1 & 4-4 | A & E FEES | 1430.1 | | 105,000.00 | | 105,000.00 | 52,500.00 | |
| | | | | | | | | |
| AL 4-1 | REROOF 14 BUILDINGS @ 4-1 | 1460.1 | 14 Blgs | 336,000.00 | | | | |
| AL 4-1 | Replace Deteriorated Roof Decking | 1460.11 | | 43,008.00 | | | | |
| AL 4-1 | Replace Deteriorated Roof Trusses | 1460.12 | | 15,000.00 | | | | |
| | Total 1460 AL04-01 | Subtotal 1460 | | 394,008.00 | | | | |
| | | | | | | | | |
| AL 4-4 | Install Primary Doors, Frames & Sc Door | 1460.4 | | 175,000.00 | | | | |
| | Replace Windows w/Thermal Windows | 1460.41 | | 266,662.00 | | | | |
| | Install Security Screens | 1460.42 | | 188,370.00 | | | | |
| | Reroof to include fascia,soffit & flashing | 1460.43 | | 348,250.00 | | | | |
| | Replace deteriorated roof decking | 1460.44 | | 19,968.00 | | | | |
| | Total 1460 AL04-04 | Subtotal 1460 | | 998,250.00 | | | | |
| | | | | | | | | |
| | | Total 1460 | | 1,392,258.00 | | | | |
| | | Total Grant | | 1,512,258.00 | | 105,000.00 | 52,500.00 | |

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

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: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09S00450109 ARRA<br>CFFP (Yes/ No):<br>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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: ANNISTON HOUSING AUTHORITY

**Federal FFY 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 [1] |
|---|---|---|---|---|---|
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| Administrative Fees | 12/31/2009 | 12/31/2009 | 03/17/2012 | | |
| | | | | | |
| A & E Fees | 09/30/2009 | 09/30/2009 | 03/17/2012 | | |
| | | | | | |
| AL04-01 | 12/31/2009 | | 03/17/2012 | | |
| | | | | | |
| AL04-04 | 12/31/2009 | | 03/17/2011 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P004501-09<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant: 2009<br>FFY of Grant Approval: 2009 |
|---|---|---|

**Type of Grant**
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: )
☒ Performance and Evaluation Report for Period Ending: 09/30/2009 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | 228,000.00 | | | |
| 3 | 1408 Management Improvements | 237,200.00 | | 229,200.00 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 116,254.30 | | | |
| 5 | 1411 Audit | 800.00 | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 77,000.00 | | 77,000.00 | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 166,061.54 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 35,000.00 | | 35,000.00 | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | 15,000.00 | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

12-10-09



form **HUD-50075.1** (4/2008)

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: ANNISTON HOUSING AUTHORITY** | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-09<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | **FFY of Grant:2009**<br>**FFY of Grant Approval: 2009** |
|---|---|---|

**Type of Grant**

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: )**

☒ **Performance and Evaluation Report for Period Ending: 09/30/2009** ☐ **Final Performance and Evaluation Report**

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 311,535.16 | | 311,535.16 | |
| 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) | 1,186,851.00 | | 652,735.16 | 0.00 |
| 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 | 143,000.00 | | 143,000.00 | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| **Signature of Executive Director** | **Date** | **Signature of Public Housing Director** | **Date** |
|---|---|---|---|
| | | | |

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



form **HUD-50075.1** (4/2008)

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-09<br>CFFP (Yes/ No):<br>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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | OPERATIONS | 1406 | | 228,000.00 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. RESIDENT INTIATIVE SALARY | 1408.1 | | 58,200.00 | | 58,200.00 | | |
| | 2. YOUTH PROGRAM (Boys & Girls) | 1408.2 | | 20,000.00 | | 20,000.00 | | |
| | 3. RESIDENT INTIATIVE PROGRAM | 1408.3 | | 8,000.00 | | 8,000.00 | | |
| | 4. MANAGEMENT CONSULTANT | 1408.4 | | 8,000.00 | | | | |
| | 5. SECURITY Hiring Off-Duty Officers | 1408.5 | | 143,000.00 | | 143,000.00 | | |
| | | Total 1408 | | 237,200.00 | | 229,200.00 | | |
| | | | | | | | | |
| HA-WIDE | CFP ADMINISTRATIVE MGMT FEES | 1410 | | 116,254.30 | | | | |
| | | Total 1410 | | 116,254.30 | | | | |
| | | | | | | | | |
| HA-WIDE | AUDIT FEES | 1411 | | 800.00 | | | | |
| | | Total 1411 | | 800.00 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. A & E FEES | 1430.1 | | 7,000.00 | | 7,000.00 | | |
| | 2. TECHNICAL ASSTNCE ADVISOR | 1430.7 | | 70,000.00 | | 70,000.00 | | |
| | | Total 1430 | | 77,000.00 | | 77,000.00 | | |
| | | | | | | | | |

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

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-09<br>CFFP (Yes/ No):<br>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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | RANGES & REFRIGERATORS | 1465.1 | | 35,000.00 | | 35,000.00 | | |
| | | Total 1465 | | 35,000.00 | | 35,000.00 | | |
| | | | | | | | | |
| HA-WIDE | 1. MAINTENANCE EQUIPMENT | 1475.2 | | 7,500.00 | | | | |
| | 2. COMPUTER EQUIPMENT | 1475.4 | | 7,500.00 | | | | |
| | | Total 1475 | | 15,000.00 | | | | |
| | | | | | | | | |
| HA-WIDE | BOND FINANCE | 1501 | | 311,535.16 | | 311,535.16 | | |
| | | Total 1501 | | 311,535.16 | | 311,535.16 | | |
| | | | | | | | | |
| 4-4 | DOORS & WINDOWS @ 4-4 | 1460 | | 166,061.54 | | | | |
| | | Total 1460 | | 166,061.54 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | TOTAL GRANT | Total Grant | | 1,186,851.00 | | 652,735.16 | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: ANNISTON HOUSING AUTHORITY

**Federal FFY 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 [1] |
|---|---|---|---|---|---|
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| Resident Intiative Sal/Frg | 09/30/2011 | | 09/30/2013 | | |
| Youth Programs | 09/30/2011 | | 09/30/2013 | | |
| Resident Intiative Program | 09/30/2011 | | 09/30/2013 | | |
| Management Consultant | 09/30/2011 | | 09/30/2013 | | |
| Security Hiring Off-Duty Officers | 09/30/2011 | | | | |
| | | | | | |
| Modernization 4-4 | 09/30/2011 | | 09/30/2013 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P004501-08<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant: 2008<br>FFY of Grant Approval: 2008 |
|---|---|---|

**Type of Grant**
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: )
☒ Performance and Evaluation Report for Period Ending: 09/30/2009 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | 235,000.00 | | | |
| 3 | 1408 Management Improvements | 237,200.00 | | 229,200.00 | 1,406.92 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 116,254.30 | | | |
| 5 | 1411 Audit | 800.00 | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 77,000.00 | | 77,000.00 | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 165,350.14 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 35,000.00 | | 35,000.00 | 26,312.00 |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | 15,000.00 | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

12-10-09



form **HUD-50075.1** (4/2008)

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: ANNISTON HOUSING AUTHORITY** | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-08<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | **FFY of Grant:2008**<br>**FFY of Grant Approval: 2008** |
|---|---|---|

**Type of Grant**

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: )**

☒ **Performance and Evaluation Report for Period Ending: 09/30/2009** ☐ **Final Performance and Evaluation Report**

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 313,098.56 | | 313,098.56 | |
| 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) | 1,194,703.00 | | 654,298.56 | 27,718.92 |
| 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 | 143,000.00 | | 143,000.00 | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| **Signature of Executive Director** | **Date** | **Signature of Public Housing Director** | **Date** |
|---|---|---|---|
| | | | |

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

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-08<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2008** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | OPERATIONS | 1406 | | 235,000.00 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. RESIDENT INITIATIVE SAL/FRG | 1408.2 | | 58,200.00 | | 58,200.00 | | |
| MANAGEMENT | 2. YOUTH PROGRAM (Boys & Girls) | 1408.4 | | 20,000.00 | | 20,000.00 | | |
| IMPROVEMENTS | 3. RESIDENT INITIATIVE Program | 1408.5 | | 8,000.00 | | 8,000.00 | 1,406.92 | |
| | 4. MANAGEMENT CONSULTANT | 1408.6 | | 8,000.00 | | | | |
| | 5. SECURITY Hiring Off Duty Officers | 1408.7 | | 143,000.00 | | 143,000.00 | | |
| | | Total 1408 | | 237,200.00 | | 229,200.00 | 1,406.92 | |
| | | | | | | | | |
| HA-WIDE | 1. CFP MANAGEMENT FEES | 1410.1 | | 116,254.30 | | | | |
| | | Total 1410 | | 116,254.30 | | | | |
| | | | | | | | | |
| HA-WIDE | AUDIT COSTS | 1411 | | 800.00 | | | | |
| | | Total 1411 | | 800.00 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. A & E FEES | 1430.1 | | 7,000.00 | | 7,000.00 | | |
| | 2. TECHNICAL Assistance ADVISOR | 1430.7 | | 70,000.00 | | 70,000.00 | | |
| | | Total 1430 | | 77,000.00 | | 77,000.00 | | |
| | | | | | | | | |

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

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-08<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2008** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | 1. RANGES & REFRIGERATORS | 1465.1 | | 35,000.00 | | 35,000.00 | 26,312.00 | |
| | | TOTAL 1465 | | 35,000.00 | | 35,000.00 | 26,312.00 | |
| | | | | | | | | |
| HA-WIDE | 1. MAINTENANCE EQUIPMENT | 1475.2 | | 7,500.00 | | | | |
| | 2. COMPUTER EQUIPMENT | 1475.4 | | 7,500.00 | | | | |
| | | TOTAL 1475 | | 15,000.00 | | | | |
| | | | | | | | | |
| AL 4-4 | STRUCTURE IMPROVEMENTS | 1460 | | 165,350.14 | | | | |
| | | TOTAL 1460 | | 165,350.14 | | | | |
| | | | | | | | | |
| HA-WIDE | BOND FINANCE | 1501 | | 313,098.56 | | 313,098.56 | | |
| | | TOTAL 1501 | | 313,098.56 | | 313,098.56 | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | TOTAL GRANT | | 1,194,703.00 | | 654,298.56 | 27,718.92 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

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: ANNISTON HOUSING AUTHORITY

**Federal FFY of Grant: 2008**

| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
|---|---|---|---|---|---|
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| RESIDENT INIT.SAL | 09/30/2010 | | 09/30/2011 | | |
| YOUTH PROGRAM | 09/30/2010 | | 09/30/2011 | | |
| RESIDENT PROGRAM | 09/30/2010 | 09/30/2009 | 09/30/2011 | | |
| MGMT CONSULTANT | 09/30/2010 | | 09/30/2011 | | |
| SECURITY | 09/30/2010 | | 09/30/2011 | | |
| 4-4 CONSTANTINE | 09/30/2010 | | 09/30/2011 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: ANNISTON HOUSING AUTHORITY** | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-07<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | **FFY of Grant: 2007**<br>**FFY of Grant Approval: 2007** |
|---|---|---|

**Type of Grant**
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: )**
☒ **Performance and Evaluation Report for Period Ending: 09/30/2009** ☐ **Final Performance and Evaluation Report**

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | 225,000.00 | | 225,000.00 | 25,168.09 |
| 3 | 1408 Management Improvements | 227,200.00 | | 227,200.00 | 64,081.58 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 116,254.30 | | 116,254.30 | |
| 5 | 1411 Audit | 800.00 | | 800.00 | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 77,000.00 | | 77,000.00 | 69,970.90 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 130,822.62 | | 130,822.62 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 35,000.00 | | 35,000.00 | 34,880.33 |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | 15,000.00 | | 15,000.00 | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

12-10-09



form **HUD-50075.1** (4/2008)

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P004501-07<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant:2007<br>FFY of Grant Approval: 2007 |
|---|---|---|

**Type of Grant**

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: )

☒ Performance and Evaluation Report for Period Ending: 09/30/2009 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 313,821.08 | | 313,821.08 | 313,821.08 |
| 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) | 1,140,898.00 | | 1,140,898.00 | 507,921.98 |
| 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 | 133,000.00 | | 133,000.00 | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| Signature of Executive Director | Date | Signature of Public Housing Director | Date |
|---|---|---|---|
| | | | |

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



form **HUD-50075.1** (4/2008)

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-07<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2007** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | Operations | 1406 | | 225,000.00 | | 225,000.00 | 25,168.09 | |
| | | | | | | | | |
| HA-WIDE | 1. RESIDENT INITIATIVE SAL/FRG | 1408.2 | 1 | 54,200.00 | 50,173.96 | 50,173.96 | 30,055.54 | |
| MANAGEMENT | 2. Youth Program - Boys & Girls Club | 1408.4 | | 20,000.00 | | 20,000.00 | 20,000.00 | |
| IMPROVEMENTS | 3. Resident Initiative Programs | 1408.5 | | 10,000.00 | 14,026.04 | 14,026.04 | 14,026.04 | |
| | 4. Management Consultant | 1408.6 | | 10,000.00 | | 10,000.00 | | |
| | 5. Security Hiring Off-Duty Officers | 1408.7 | | 133,000.00 | | 133,000.00 | | |
| | | Total 1408 | | 227,200.00 | 227,200.00 | 227,200.00 | 64,081.58 | |
| | | | | | | | | |
| HA-WIDE | 1. CFP Management Fees | 1410.1 | | 116,254.30 | | 116,254.30 | | |
| | | Total 1410 | | 116,254.30 | | 116,254.30 | | |
| | | | | | | | | |
| HA-WIDE | Audit Costs | 1411 | | 800.00 | | 800.00 | | |
| | | Total 1411 | | 800.00 | | 800.00 | | |
| | | | | | | | | |
| HA-WIDE | 1. Architect & Engineering Fee | 1430.1 | | 7,000.00 | | 7,000.00 | | |
| | 2. Technical Assistance Advisor | 1430.7 | | 70,000.00 | | 70,000.00 | 69,970.90 | |
| | | Total 1430 | | 77,000.00 | | 77,000.00 | 69,970.90 | |
| | | | | | | | | |

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

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P004501-07<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2007** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | 1. Ranges & Refrigerators | 1465.1 | | 35,000.00 | | 35,000.00 | 34,880.33 | |
| | | Total 1465 | | 35,000.00 | | 35,000.00 | 34,880.33 | |
| | | | | | | | | |
| HA-WIDE | 1. Maintenance Equipment | 1475.2 | | 7,500.00 | | 7,500.00 | | |
| | 2. Computer Equipment | 1475.4 | | 7,500.00 | | 7,500.00 | | |
| | | Total 1475 | | 15,000.00 | | 15,000.00 | | |
| | | | | | | | | |
| AL 4-4 | Structure Improvements @ 4-4 | 1460 | | 130,822.62 | | 130,822.62 | | |
| | | Total 1460 | | 130,822.62 | | 130,822.62 | | |
| | | | | | | | | |
| HA-WIDE | Bond Finance | 1501 | | 313,821.08 | | 313,821.08 | 313,821.08 | |
| | | Total 1501 | | 313,821.08 | | 313,821.08 | 313,821.08 | |
| | | | | | | | | |
| | | | | | | | | |
| | Total Grant | Total Grant | | 1,140,898.00 | | 1,140,898.00 | 507,921.98 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: ANNISTON HOUSING AUTHORITY

**Federal FFY of Grant: 2007**

| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
|---|---|---|---|---|---|
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| Resident Initative Sal/Frg | 12/31/2008 | 12/31/2008 | 09/30/2011 | | |
| Youth Program | 09/30/2009 | 12/31/2008 | 09/30/2011 | 09/30/2009 | |
| Resident Initative Program | 09/30/2009 | 12/31/2008 | 09/30/2011 | 09/30/2009 | |
| Management Consultant | 09/30/2009 | 12/31/2008 | 09/30/2011 | | |
| Security | 09/30/2009 | 09/30/2009 | 09/30/2011 | | |
| 4-4 Constantine Structure Improvements | 09/30/2009 | 09/30/2009 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

**Part III: Implementation Schedule for Capital Fund Financing Program**

| PHA Name: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P00450106<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant: 2006<br>FFY of Grant Approval: 2006 |
|---|---|---|

**Type of Grant**
☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: )
☒ Performance and Evaluation Report for Period Ending: 09/30/2009 ☐ Final Performance and Evaluation Report

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | 224,831.91 | | 224,831.91 | 224,831.91 |
| 3 | 1408 Management Improvements | 225,074.00 | 224,134.90 | 224,134.90 | 176,294.93 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 95,300.00 | | 95,300.00 | 59,562.51 |
| 5 | 1411 Audit | 800.00 | 1,739.10 | 1,739.10 | 1,739.10 |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 77,000.00 | | 77,000.00 | 74,725.00 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 175,843.18 | | 175,843.18 | 117,020.54 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 35,000.00 | | 35,000.00 | 34,954.36 |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | 15,000.00 | | 15,000.00 | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

12-10-09



form **HUD-50075.1** (4/2008)

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:** ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450106<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | **FFY of Grant:2006**<br>**FFY of Grant Approval: 2006** |
|---|---|---|

**Type of Grant**

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: )**

☒ **Performance and Evaluation Report for Period Ending: 09/30/2009** ☐ **Final Performance and Evaluation Report**

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 313,693.91 | | 313,693.91 | 313,693.91 |
| 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) | 1,162,543.00 | 1,162,543.00 | 1,162,543.00 | 1,002,822.26 |
| 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 | | | | |

| **Signature of Executive Director** | **Date** | **Signature of Public Housing Director** | **Date** |
|---|---|---|---|
| | | | |

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



form **HUD-50075.1** (4/2008)

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450106<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2006** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA Wide | OPERATIONS | 1406 | | 224,831.91 | | 224,831.91 | 224,831.91 | |
| | | | | | | | | |
| HA Wide | 1. Resident Init. Coord. Salary/Fringe | 1408.2 | | 53,074.00 | 54,810.80 | 54,810.80 | 54,810.80 | |
| Management | 2. Youth Program-Boys & Girls Club | 1408.4 | | 20,000.00 | | 20,000.00 | 20,000.00 | |
| Improvements | 3. Resident Initiative Programs | 1408.5 | | 10,000.00 | 11,349.00 | 11,349.00 | 11,349.00 | |
| | 4. Management Consultant Contracts | 1408.6 | | 10,000.00 | 5,975.10 | 5,975.10 | 997.00 | |
| | 5. Security Hiring Off-Duty Officers | 1408.7 | | 132,000.00 | | 132,000.00 | 89,138.13 | |
| | | Total 1408 | | 225,074.00 | 224,134.90 | 224,134.90 | 176,294.93 | |
| | | | | | | | | |
| HA Wide | 1. Administrative Fees-formerly Salaries | 1.1410.1 | | 70,000.00 | 95,300.00 | 95,300.00 | 59,562.51 | |
| Administration | 2. Sundry Expenses | 1.1410.5 | | 1,650.00 | 0.00 | 0.00 | 0.00 | |
| | 3. Travel | 1.1410.6 | | 1,650.00 | 0.00 | 0.00 | 0.00 | |
| | 4. Fringe Benefits | 1.1410.9 | | 22,000.00 | 0.00 | 0.00 | 0.00 | |
| | | Total 1410 | | 95,300.00 | 95,300.00 | 95,300.00 | 59,562.51 | |
| | | | | | | | | |
| HA Wide | Audit Costs (CFP Grants) | 1411 | | 800.00 | 1,739.10 | 1,739.10 | 1,739.10 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

**Part II: Supporting Pages**

| PHA Name: | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450106<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant:** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA Wide | 1. Architect & Engineering Fees | 1430.1 | | 7,000.00 | | 7,000.00 | 4,725.00 | |
| | 2. Technical Assistance Advisor | 1430.7 | | 70,000.00 | | 70,000.00 | 70,000.00 | |
| | | Total 1430 | | 77,000.00 | | 77,000.00 | 74,725.00 | |
| | | | | | | | | |
| HA Wide | 1. Ranges & Refrigerators | 1465.1 | | 35,000.00 | | 35,000.00 | 34,954.36 | |
| | | Total 1465 | | 35,000.00 | | 35,000.00 | 34,954.36 | |
| | | | | | | | | |
| HA Wide | 1. Maintenance Equipment | 1475.2 | | 7,500.00 | | 7,500.00 | | |
| | 2. Computer Equipment | 1475.4 | | 7,500.00 | | 7,500.00 | | |
| | | Total 1475 | | 15,000.00 | | 15,000.00 | | |
| | | | | | | | | |
| AL 04-4 | Replace Prime Doors | 1460 | | 175,843.18 | | 175,843.18 | 117,020.54 | |
| | | Total 1460 | | 175,843.18 | | 175,843.18 | 117,020.54 | |
| | | | | | | | | |
| HA Wide | Bond Finance | 1501 | | 313,693.91 | | 313,693.91 | 313,693.91 | |
| | | Total 1501 | | 313,693.91 | | 313,693.91 | 313,693.91 | |
| | | | | | | | | |
| | | | | | | | | |
| | | Total Grant | | 1,162,543.00 | 1,162,543.00 | 1,162,543.00 | 1,002,822.26 | |

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: ANNISTON HOUSING AUTHORITY

**Federal FFY of Grant: 2006**

| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
|---|---|---|---|---|---|
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| Resident Init. Salary/Fringe | 09/30/2008 | 12/30/2007 | 09/30/2010 | 09/30/2009 | Earlier funding requirements |
| Youth Program | 09/30/2008 | 12/30/2007 | 09/30/2010 | 12/31/2008 | Earlier completion of prior year funding |
| Resident Program | 09/30/2008 | 12/30/2007 | 09/30/2010 | 03/31/2009 | Earlier completion of prior year funding |
| Management Consultant | 09/30/2008 | 09/30/2008 | 09/30/2010 | | |
| Security-Off Duty Officers | 09/30/2008 | 12/30/2007 | 09/30/2010 | | Earlier completion of prior year funding |
| | | | | | |
| 4-4 Constantine | 09/30/2008 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P00450105<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant: 2005<br>FFY of Grant Approval: 205 |
|---|---|---|

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

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | 236,673.00 | | 236,673.00 | 236,673.00 |
| 3 | 1408 Management Improvements | 236,673.00 | 239,212.47 | 239,212.47 | 239,212.47 |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 118,173.30 | 13,967.89 | 13,967.89 | 13,967.89 |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | 77,650.00 | 77,247.44 | 77,247.44 | 77,247.44 |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | 107,863.74 | 107,863.74 | 107,863.74 |
| 10 | 1460 Dwelling Structures | 140,679.94 | 125,689.01 | 125,689.01 | 125,689.01 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 37,083.50 | | 37,083.50 | 37,083.50 |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | 14,500.00 | 32,787.69 | 32,787.69 | 32,787.69 |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

12-10-09



form **HUD-50075.1** (4/2008)

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: ANNISTON HOUSING AUTHORITY** | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450105<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | **FFY of Grant:2005**<br>**FFY of Grant Approval: 2005** |
|---|---|---|

**Type of Grant**

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: )**

☐ **Performance and Evaluation Report for Period Ending:** ☒ **Final Performance and Evaluation Report**

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 312,843.26 | | 312,843.26 | 312,843.26 |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | 9,092.00 | 0.00 | 0.00 | 0.00 |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 1,183,368.00 | 1,183,368.00 | 1,183,368.00 | 1,183,368.00 |
| 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 | 133,600.00 | 133.793.50 | 133.793.50 | 133.793.50 |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| **Signature of Executive Director** | **Date 08/14/2009** | **Signature of Public Housing Director** | **Date** |
|---|---|---|---|

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



form **HUD-50075.1** (4/2008)

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450105<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2005** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA WIDE | OPERATIONS | 1406 | | 236,673.00 | | 236,673.00 | 236,673.00 | |
| | | | | | | | | |
| HA WIDE MGMT | 1. Resident Init.Coord. Salary/Fringe | 1408.1 | 1 Ea | 50,495.37 | | 50,495.37 | 50,495.37 | |
| IMPROVEMENTS | 2. Youth (Boys & Girls Club) | 1408.2 | 1 Ea | 20,000.00 | | 20,000.00 | 20,000.00 | |
| | 3. Resident Initiative Programs | 1408.3 | 1 LS | 21,283.60 | | 21,283.60 | 21,283.60 | |
| | 4. Management Consultants | 1408.4 | 12 mos | 11,294.03 | 13,640.00 | 13,640.00 | 13,640.00 | |
| | 5. Hiring Secuirty (Off-Duty Officers) | 1408.5 | 12 mos | 133,600.00 | 133,793.50 | 133,793.50 | 133,793.50 | |
| | | Total 1408 | | 236,673.00 | 239,212.47 | 239,212.47 | 239,212.47 | |
| | | | | | | | | |
| HA WIDE ADMIN. | 1. Prorated Staff Salaries | 1410.1 | 15 ea | 87,033.40 | 6,416.45 | 6,416.45 | 6,416.45 | |
| | 2. Sundry (ex: Adv., Adm) | 1410.19 | 1 LS | 5,000.00 | 3,764.14 | 3,764.14 | 3,764.14 | |
| | 3. Travel | 1410.10 | 6 ea | 1,486.50 | 3,034.18 | 3,034.18 | 3,034.18 | |
| | 4. Fringe Benefits | 1410.9 | 15 ea | 24,653.40 | 753.12 | 753.12 | 753.12 | |
| | | Total 1410 | | 118,173.30 | 13,967.89 | 13,967.89 | 13,967.89 | |
| | | | | | | | | |
| HA WIDE | 1. A & E Fees | 1430.1 | 1 Ea. | 8,250.00 | 8,217.78 | 8,217.78 | 8,217.78 | |
| | 2. Technical Assistant/Advisor | 1430.7 | 1 Ea. | 69,400.00 | 69,029.66 | 69,029.66 | 69,029.66 | |
| | | Total 1430 | | 77,650.00 | 77,247.44 | 77,247.44 | 77,247.44 | |
| | | | | | | | | |

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

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: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450105<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2005** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA WIDE Dwelling | 1. Stoves / Refrigerators | 1465.1 | 104 | 37,083.50 | | 37,083.50 | 37,083.50 | |
| | | Total 1465 | | 37,083.50 | | 37,083.50 | 37,083.50 | |
| | | | | | | | | |
| AL4-4 Constantine | New Prime Doors | 1460 | 161 DU | 137,354.11 | 125,689.01 | 125,689.01 | 125,689.01 | |
| | | Total 1460 | | 137,354.11 | 125,689.01 | 125,689.01 | 125,689.01 | |
| AL 4-1 & 4-2 | Sidewalk Removal & Replacement | 1450<br>Total 1450 | | 0.00<br>0.00 | 107,863.74<br>107,863.74 | 107,863.74<br>107,863.74 | 107,863.74<br>107,863.74 | |
| | | | | | | | | |
| HA Wide Non-Dwelling Equip. | 1. Office Equipment | 1475.1 | 1 LS | 2,500.00 | 25,649.85 | 25,649.85 | 25,649.85 | |
| | 2. Maintenance Equipment | 1475.2 | 1 LS | 3,500.00 | 1,303.00 | 1,303.00 | 1,303.00 | |
| | 3. Computer Equipment | 1475.4 | 6 Ea | 8,500.00 | 5,834.84 | 5,834.84 | 5,834.84 | |
| | | Total 1475 | | 14,500.00 | 32,787.69 | 32,787.69 | 32,787.69 | |
| | | | | | | | | |
| HA WIDE | BOND FINANCE | 1501 | 1 EA | 316,169.09 | 312,843.26 | 312,843.26 | 312,843.26 | |
| | | Total 1501 | | 316,169.09 | 312,843.26 | 312,843.26 | 312,843.26 | |
| | | | | | | | | |
| | CONTINGENCY | 1502 | | 9,092.00 | 0.00 | 0.00 | 0.00 | |
| | | Total 1502 | | 9,092.00 | 0.00 | 0.00 | 0.00 | |
| | | | | | | | | |
| | | Total Project | | 1,183,368.00 | 1,183,368.00 | 1,183,368.00 | 1,183,368.00 | |

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

| PHA Name: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| Resident Init. Coord Salary | 09/27/2005 | | 09/16/2007 | 03/31/2008 | |
| Youth Program | 09/27/2005 | | 09/16/2007 | 03/31/2008 | |
| Resident Program | 09/27/2005 | | 09/16/2007 | 03/31/2008 | |
| Mgmt Consultant | 09/27/2005 | | 09/16/2007 | 03/31/2009 | |
| Hiring Security | 09/27/2005 | | | 12/31/2008 | |
| | | | | | |
| | | | | | |
| 4-4 Constantine | 09/27/2005 | | 09/16/2007 | 06/30/2009 | Problems getting doors in from mfgr |
| | | | | | |
| 4-1 Glen Addie | | | | 08/14/2009 | Pulled items up in five year plan |
| 4-2 Cooper Homes | | | | 08/14/2009 | Pulled items up in five year plan |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

## Part I: Summary

| PHA Name/Number Anniston Housing Authority AL004 | | | Locality (City/County & State) Anniston, Alabama | | ☒Original 5-Year Plan ☐Revision No: | |
|---|---|---|---|---|---|---|
| A. | Development Number and Name | Work Statement for Year 1 FFY 2010 | Work Statement for Year 2 FFY 2011 | Work Statement for Year 3 FFY 2012 | Work Statement for Year 4 FFY 2013 | Work Statement for Year 5 FFY 2014 |
| B. | Physical Improvements Subtotal AL004000003 Site improvements HA-Wide Contingency | Annual Statement | $164,627.62 | $164,627.62 | $164,627.62 | $164,627.62 |
| C. | Management Improvements | | $237,200.00 | $237,200.00 | $237,200.00 | $237,200.00 |
| D. | PHA-Wide Non-dwelling Structures and Equipment | | $50,000.00 | $50,000.00 | $50,000.00 | $50,000.00 |
| E. | Administration | | $116,254.30 | $116,254.30 | $116,254.30 | $116,254.30 |
| F. | Other (fees, costs, technical, audit) | | $77,800.00 | $77,800.00 | $77,800.00 | $77,800.00 |
| G. | Operations | | $235,000.00 | $235,000.00 | $235,000.00 | $235,000.00 |
| H. | Demolition | | | | | |
| I. | Development | | | | | |
| J. | Capital Fund Financing – Debt Service | | $313,821.08 | $313,821.08 | $313,821.08 | $313,821.08 |
| K. | Total CFP Funds | | $1,194,703.00 | $1,194,703.00 | $1,194,703.00 | $1,194,703.00 |
| L. | Total Non-CFP Funds | | | | | |
| M. | Grand Total | | $1,194,703.00 | $1,194,703.00 | $1,194,703.00 | $1,194,703.00 |

12-10-2009

## Part I: Summary (Continuation)

| PHA Name/Number | | | Locality (City/county & State) | | ☐ **Original 5-Year Plan** | ☐ **Revision No:** |
|---|---|---|---|---|---|---|
| A. | Development Number and Name | Work Statement for Year 1 FFY _____ | Work Statement for Year 2 FFY _____ | Work Statement for Year 3 FFY _____ | Work Statement for Year 4 FFY _____ | Work Statement for Year 5 FFY _____ |
| | | Annual Statement | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

## Part II: Supporting Pages – Physical Needs Work Statement(s)

| Work Statement for Year 1 FFY 2009 | Work Statement for Year 2011 FFY 2011 | | | Work Statement for Year: 2012 FFY 2012 | | |
|---|---|---|---|---|---|---|
| | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost |
| See Annual Statement | AL004000003 | 75DU | $164,627.62 | AL004000003 | 171DU | $100,00.00 |
| | Constantine Homes | | | Constantine Homes | | |
| | Replace Doors/Security Screens | | | Roofing | | |
| | Replace Windows w/ thermal windows | 966 openings | ($266,662) Stimulus | Replace Windows w/ thermal windows | 966 openings | Stimulus |
| | Install Security Screens | 966 openings | ($188,370) Stimulus | Install Security Screens | 966 openings | Stimulus |
| | | | | Tinsley Manor | Parking Lot | 64,627.62 |
| | Subtotal of Estimated Cost | | $164,627.62 | Subtotal of Estimated Cost | | $164,627.62 |

## Part II: Supporting Pages – Physical Needs Work Statement(s)

| Work Statement for Year 1 FFY 2009 | Work Statement for Year 2013 FFY 2013 | | | Work Statement for Year: 2014 FFY 2014 | | |
|---|---|---|---|---|---|---|
| | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost |
| See Annual Statement | AL004000002 | 102DU | $164,627.62 | AL004000003 | | |
| | Norwood Homes | | | Constantine Homes | | |
| | Roofing | | | Baber Terrace (roofing) | 60DU | $125,000.00 |
| | AL004000003 | | | Retaining Wall | | $39,627.62 |
| | Replace Windows w/ thermal windows | 966 openings | Stimulus | | | |
| | Install Security Screens | 966 openings | Stimulus | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Subtotal of Estimated Cost | | $164,627.62 | Subtotal of Estimated Cost | | $164,627.62 |

## Part III: Supporting Pages – Management Needs Work Statement(s)

| Work Statement for Year 1 FFY 2009 | Work Statement for Year 2011 FFY 2011 | | Work Statement for Year: 2012 FFY 2012 | |
|---|---|---|---|---|
| | Development Number/Name General Description of Major Work Categories | Estimated Cost | Development Number/Name General Description of Major Work Categories | Estimated Cost |
| See | HA-WIDE AL004000001-000003 | | HA-WIDE AL004000001-000003 | |
| Annual | 1. Resident Salary | $58,200.00 | 1. Resident Salary | $58,200.00 |
| Statement | 2. Boys and Girls Club | $20,000.00 | 2. Boys and Girls Club | $20,000.00 |
| | 3. Resident Programs | $8,000.00 | 3. Resident Programs | $8,000.00 |
| | 4. Management Consultant | $8,000.00 | 4. Management Consultant | $8,000.00 |
| | 5. Security-Police | $143,000.00 | 5. Security-Police | $143,000.00 |
| | Subtotal of Estimated Cost | $164,627.62 | Subtotal of Estimated Cost | $164,627.62 |

## Part III: Supporting Pages – Management Needs Work Statement(s)

| Work Statement for Year 1 FFY 2009 | Work Statement for Year 2013 FFY 2013 | | Work Statement for Year: 2014 FFY 2014 | |
|---|---|---|---|---|
| | Development Number/Name General Description of Major Work Categories | Estimated Cost | Development Number/Name General Description of Major Work Categories | Estimated Cost |
| See Annual Statement | HA-WIDE Al004000001-000003 | | HA-WIDE Al004000001-000003 | |
| | 1. Resident Salary | $58,200.00 | 1. Resident Salary | $58,200.00 |
| | 2. Boys and Girls Club | $20,000.00 | 2. Boys and Girls Club | $20,000.00 |
| | 3. Resident Programs | $8,000.00 | 3. Resident Programs | $8,000.00 |
| | 4. Management Consultant | $8,000.00 | 4. Management Consultant | $8,000.00 |
| | 5. Security-Police | $143,000.00 | 5. Security-Police | $143,000.00 |
| | Subtotal of Estimated Cost | $164,627.6 | Subtotal of Estimated Cost | $164,627.62 |

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

I, Don Hoyt the City Manager certify that the Five Year and Annual PHA Plan of the Anniston Housing Authority is consistent with the Consolidated Plan of the City of Anniston prepared pursuant to 24 CFR Part 91.

Signed / Dated by Appropriate State or Local Official

# Certification for a Drug-Free Workplace

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

Applicant Name

Anniston Housing Authority

Program/Activity Receiving Federal Grant Funding

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 Federalagency 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.)

AL004000001 Glenn Addie Homes
AL004000002 Cooper Homes
AL004000003 Constantine Homes

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 |
|---|---|
| Kevin T. Fowler | Executive Director |
| Signature | Date |
| X Kevin T. Fowler | 1-13-2010 |

form **HUD-50070** (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

# DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

**1. Type of Federal Action:**
[b] a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

**2. Status of Federal Action:**
[a] a. bid/offer/application
b. initial award
c. post-award

**3. Report Type:**
[a] a. initial filing
b. material change
**For Material Change Only:**
year _____ quarter _____
date of last report _____

**4. Name and Address of Reporting Entity:**
[x] Prime [ ] Subawardee
Tier _____, *if known*:

Anniston Housing Authority
P.O. Box 2225
Anniston, AL 36202

**Congressional District**, *if known*: 4c

**5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:**

**Congressional District**, *if known*:

**6. Federal Department/Agency:**

U.S. Dept of HUD

**7. Federal Program Name/Description:**

CFDA Number, *if applicable*: _____

**8. Federal Action Number**, *if known*:

**9. Award Amount**, *if known*:
$

**10. a. Name and Address of Lobbying Registrant**
(*if individual, last name, first name, MI*):

**b. Individuals Performing Services** (*including address if different from No. 10a*)
(*last name, first name, MI*):

**11.** Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature: Kevin T. Fowler
Print Name: Kevin T. Fowler
Title: Executive Director
Telephone No.: (256) 236-1575 Date: 12/8/2009

**Federal Use Only:**

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

OMB Approval No. 2577-0157 (Exp. 3/31/2010)

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Anniston Housing Authority

Program/Activity Receiving Federal Grant Funding

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 | Title |
|---|---|
| Kevin T. Fowler | Executive Director |
| **Signature** | **Date (mm/dd/yyyy)** |
| Kevin T. Fowler | 1-13-2010 |

## INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.

2. Identify the status of the covered Federal action.

3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.

4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.

5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.

6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.

7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.

8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."

9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.

10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

    (b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).

11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

| **Civil Rights Certification** | **U.S. Department of Housing and Urban Development**<br>Office of Public and Indian Housing<br>**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.

| Anniston Housing Authority | AL004 |
|---|---|
| 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: Penny Williams | Title: Board Chair |
| Signature: Penelope F. Williams | Date: 12-17-09 |

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.

Anniston Housing Authority
PHA Name

AL0004
PHA Number/HA Code

X 5-Year PHA Plan for Fiscal Years 2010 - 2014

X Annual PHA Plan for Fiscal Years 2010 - 2010

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 |
|---|---|
| Penny Williams | Board Chairwoman |
| Signature: Penny Williams | Date: 12-17-09 |

THE STATE OF ALABAMA
CALHOUN COUNTY )

Personally appeared before me, a Notary Public in and for said County Carrie Hutto who being duly sworn according to law, deposes and says that she is a clerk of The Anniston Star, a newspaper published in said County, and that the publication of a certain notice, a true copy of which is hereto affixed, has been made in said newspaper for 1 ~~weeks~~ time consecutively, towit, in the issues here of dated as follows:

_____ 2009 _____ 2009

NOV 17, 2009 2009 _____ 2009

Subscribed and sworn to before me this 30th day of November 2009.

Alta Bolding

Carrie Hutto
CLERK

NOTARY PUBLIC

PRINTERS FEE $ 104.04

195538

**Notice Of Public Hearing**

Notice is hereby given that The Anniston Housing Authority will conduct a public hearing at the Glen Addie Homes Community Center located at 500 Glen Addie Avenue, Anniston, Alabama at 4:00 PM on Tuesday, January 5, 2010. This site is accessible for the handicapped and disabled. The purpose of the hearing is to discuss the Housing Authority's Five Year and Annual Agency Plan.

The Five Year Plan describes the mission of the Housing Authority, and the long range goals and objectives for achieving its mission over the subsequent five years.

The Annual Agency Plan provides details about the Housing Authority's immediate operations, program participants and programs and services. Also providing its strategy for handling operations concerns, resident needs and concerns, and programs and services for the upcoming year.

A draft copy of the Agency Plan is available for review and inspection at the main office of the Housing Authority located at 500 Glen Addie Avenue, Anniston, Alabama.

For additional information concerning this public hearing, please telephone Kevin Fowler at (256)236-1575, extension 34. Should any member of the Housing Authority communities require transportation or special accommodations in order to attend this meeting please contact Carolyn Swain at (256)236-1575. extension 35.

The Anniston Star
Calhoun Co., AL
November 29, 2009

**ANNISTON HOUSING AUTHORITY**
**PUBLIC HEARING**
**January 5, 2010**

**The Anniston Housing Authority held a public hearing for the purpose of discussing the AHA's five-year and Agency Plan.**

**Present:** **Ms. Penelope Williams, Board Chair**
**Mr. Kevin Fowler, Executive Director**
**Ms. Chirlee Brown, Administrative Assistant**

**We had no one from the public in attendance, so the meeting was adjourned.**

**Signed**

**Kevin Fowler, Executive Fowler**

Anniston Housing Authority

Advisory Board

January 5, 2010

At this time, there were no challenges or comments from the RAB concerning the 2010 Agency Plan.

AHA Organizational Chart

* Billed to AMPS

**Board of Commissioners**

**Central Office Cost Center**
Kevin Fowler, Executive Director
Brenda Smith, Director of Finance
Charles Houston, Mod Coord.*
Faye Robertson, Acct. Clerk
Carolyn Swain, RIC*
Lisa Willingham, Occupancy*
Linda Callahan, Rent Collection*
Mark Lloyd, Inventory/Inspection*
Chirlee Brown, Admin. Asst.
Chantrese Martin, PT Apps*

**AMP 1**
Geraldine Allen, Sr. Prop Mgr.
Stacy Fagan, Prop. Mgr.
Doug Brooks, Sr. Maint.
Curtis McGhee, Maint.
Anthony Tyus, Maint.

**AMP 2**
Clarence Copeland, Prop. Mgr
Lamar Lee, Maint.
M.J. Grammer, Maint
Danny Woods, Maint
Dan Weber, Maint

**AMP 3**
Sharon Dunson, Prop. Mgr.
Darryl Adkinson, Maint.
Tony Stoval, Maint.
Terri Goggins, Maint.
O.C. Miles, Maint

**HCV Program**
Terri Odom, Mgr.

# ANNISTON HOUSING AUTHORITY

## RESIDENT ADVISORY BOARD MEMBERS

**As of 01-01-2010**

Fannie Leonard

Mae Thomas Hall

Sarah Borrell

Willie Pearl Fomby

Bobbie Jean Wright

Margaret Cook

Amma Welch

Debra Tarrant

Larry Ware

Jacqueline Keith

Cathy Hood

Brenda Gholston

Tanya Sayers

Beverly Willis

## RASS IMPROVEMENTS

### Communication

The Anniston Housing Authority will continue to provide residents information concerning maintenance and repair, modernization, meetings, and events through the bi-monthly newsletter, *The Informer*. We will also post flyers in the administrative offices of each housing complex and on mailbox clusters. Residents will be notified of emergency situations such as water shut off by receiving a flyer on their door, information posted on mailbox clusters or by calling the office.

We will continue to investigate all verbal and written questions and concerns from residents and we will reply to their questions and concerns in writing within seven (7) working days of receiving the transaction.

Anniston Housing Authority's staff goal is to recognize residents as our ultimate customer; therefore, we pledge to be courteous and professional with the residents at all times.

Management will be asked to attend 25% of the residents organization meetings.

### Safety

The Anniston Housing Authority has provided the residents with off duty police officers to patrol the housing authority's property and surrounding community and cellular telephones so residents can speak directly to the police officers. At the end of each week, AHA receives a police report of different violations that took place on housing property during the week.

Within the next six (6) months, each resident will receive a visit from the Resident Initiative Coordinator so together we can examine the safety in the community. Once the information is compiled, we will target a technical assistant to provide us with a tool to work with so the residents can feel safe in their homes and enjoy a drug free, decent, safe, and sanitary community.

### Neighborhood Appearance

The Anniston Housing Authority's Maintenance Department will continue to provide the Residents of the Anniston Housing Authority with free lawn care. Extra residents are hired during summer months for grass cutting and for the up-keep of common areas including the playground and parking lots.

Most of the exteriors of the housing complex are between 50 to 60 years old. We will continue to keep the exteriors of the housing complex free of graffiti.

Each resident is responsible for his/her yard. Trash/litter, broken glass in the yard is the responsibility of the resident and residents will be charged a fine if AHA Maintenance Department has to clean it up.

Residents that are experiencing the presence of rodents and insects inside the apartment must make arrangements with the AHA Maintenance Department for treatment.

The Anniston Housing Authority adhere and abide by the City of Anniston ORDINANCE NO. 99-0-15 AN ORDINANCE DECLARING CERTAIN ACTS AND NOISES UNLAWFUL; PROVIDING PENALTIES FOR VIOLATION THEREOF.

Community Policing has been effective continuously in the Anniston Housing Authority since receiving the PHDEP Grant in 1997. AHA will introduce other crime prevention programs such as Neighborhood Watch, Block Watch, Tenant Patrol, or Street Patrol to the residents within the next 12 months. Residents will have the opportunity to decide what crime prevention program they want in the community and AHA will provide the residents with the necessary training and material to implement the program.

**DECONCENTRATION POLICY**

1. Objective: The objective of the Deconcentration Rule for public housing units is to ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the housing authority is to house no less than 40 percent of its public housing inventory with families that have income at or below 30% of the area median income by public housing development. Also the housing authority will take actions to insure that no individual development has a concentration of higher income families in one or more of the developments. To insure that the housing authority does not concentrate families with higher income levels, it is the goal of the housing authority not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The housing authority will track the status of family income, by development, on a monthly basis by utilizing income reports generated by the housing authority's computer system.

2. Actions: To accomplish the deconcentration goals, the housing authority will take the following actions:
   A. At the beginning of each housing authority fiscal year, the housing authority will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous housing authority fiscal year.

   B. To accomplish the goals of: (1) Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median income, and
   (2) Not housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, the housing authority's Tenant Selection and Assignment Plan, which is a part of this policy, provides for skipping families on the waiting list to accomplish these goals.

Component 3, (6) Deconcentration and Income Mixing

a.__X___YES _____NO Does the PHA have any general occupancy (family) housing developments covered by deconcentration. If no, this section is complete. If yes, continue to next question.

b._____YES ___X____NO Do any of these covered developments have average incomes above or below 85 % to 115% of the average of such developments. If no this section is complete.

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P004501-10<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant: 2010<br>FFY of Grant Approval: |
|---|---|---|

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

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised[2] | Obligated | Expended |
| 1 | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) [3] | 225,165.50 | | | |
| 3 | 1408 Management Improvements | 237,200.00 | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 116,254.30 | | | |
| 5 | 1411 Audit | 800.00 | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 77,000.00 | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 166,061.54 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 35,000.00 | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | 15,000.00 | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities [4] | | | | |

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

12-10-09



form **HUD-50075.1** (4/2008)

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: ANNISTON HOUSING AUTHORITY | Grant Type and Number<br>Capital Fund Program Grant No: AL09P00450110<br>Replacement Housing Factor Grant No:<br>Date of CFFP: | FFY of Grant:2010<br>FFY of Grant Approval: |
|---|---|---|

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

| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost [1] | |
|---|---|---|---|---|---|
| | | Original | Revised [2] | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | 314,369.66 | | | |
| 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) | 1,186,851.00 | | | 0.00 |
| 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 | 143,000.00 | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| Signature of Executive Director | Date | Signature of Public Housing Director | Date |
|---|---|---|---|
| | | | |

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



form **HUD-50075.1** (4/2008)

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450110<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2010** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | OPERATIONS | 1406 | | 225,165.50 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. RESIDENT INTIATIVE SALARY | 1408.1 | | 58,200.00 | | | | |
| | 2. YOUTH PROGRAM (Boys & Girls) | 1408.2 | | 20,000.00 | | | | |
| | 3. RESIDENT INTIATIVE PROGRAM | 1408.3 | | 8,000.00 | | | | |
| | 4. MANAGEMENT CONSULTANT | 1408.4 | | 8,000.00 | | | | |
| | 5. SECURITY Hiring Off-Duty Officers | 1408.5 | | 143,000.00 | | | | |
| | | Total 1408 | | 237,200.00 | | | | |
| | | | | | | | | |
| HA-WIDE | CFP ADMINISTRATIVE MGMT FEES | 1410 | | 116,254.30 | | | | |
| | | Total 1410 | | 116,254.30 | | | | |
| | | | | | | | | |
| HA-WIDE | AUDIT FEES | 1411 | | 800.00 | | | | |
| | | Total 1411 | | 800.00 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. A & E FEES | 1430.1 | | 7,000.00 | | | | |
| | 2. TECHNICAL ASSTNCE ADVISOR | 1430.7 | | 70,000.00 | | | | |
| | | Total 1430 | | 77,000.00 | | | | |
| | | | | | | | | |

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

**Part II: Supporting Pages**

| PHA Name: ANNISTON HOUSING AUTHORITY | **Grant Type and Number**<br>Capital Fund Program Grant No: AL09P00450110<br>CFFP (Yes/ No):<br>Replacement Housing Factor Grant No: | **Federal FFY of Grant: 2010** |
|---|---|---|

| 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 [1] | Funds Obligated[2] | Funds Expended[2] | |
| HA-WIDE | RANGES & REFRIGERATORS | 1465.1 | | 35,000.00 | | | | |
| | | Total 1465 | | 35,000.00 | | | | |
| | | | | | | | | |
| HA-WIDE | 1. MAINTENANCE EQUIPMENT | 1475.2 | | 7,500.00 | | | | |
| | 2. COMPUTER EQUIPMENT | 1475.4 | | 7,500.00 | | | | |
| | | Total 1475 | | 15,000.00 | | | | |
| | | | | | | | | |
| HA-WIDE | BOND FINANCE | 1501 | | 314,369.66 | | | | |
| | | Total 1501 | | 314,369.66 | | | | |
| | | | | | | | | |
| 4-4 | DOORS & WINDOWS @ 4-4 | 1460 | | 166,061.54 | | | | |
| | | Total 1460 | | 166,061.54 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | TOTAL GRANT | Total Grant | | 1,186,851.00 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

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: ANNISTON HOUSING AUTHORITY

**Federal FFY of Grant: 2010**

| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
|---|---|---|---|---|---|
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| Resident Intiative Sal/Frg | 09/30/2012 | | 09/30/2014 | | |
| Youth Programs | 09/30/2012 | | 09/30/2014 | | |
| Resident Intiative Program | 09/30/2012 | | 09/30/2014 | | |
| Management Consultant | 09/30/2012 | | 09/30/2014 | | |
| Security Hiring Off-Duty Officers | 09/30/2012 | | | | |
| | | | | | |
| Modernization 4-4 | 09/30/2012 | | 09/30/2014 | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.

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: | | | | | **Federal FFY of Grant:** |
|---|---|---|---|---|---|
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates [1] |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

[1] 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.