

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: Housing Authority of the City of Boaz PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: 07/2010 PHA Code: AL075					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 451 Number of HCV units: 368					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					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: Our goal is to provide drug free, decent, safe, and sanitary housing for eligible families and to provide opportunities and promote self-sufficiency and economic independence for residents, in order to achieve this, we will: <ol style="list-style-type: none"> 1) Recognize residents as our ultimate customer, 2) Improve Public Housing Authority (HA) management and service delivery efforts through effective and efficient management of HA staff, 3) Seek problem-solving partnerships with residents, community, and government leadership, 4) Apply HA resources to the effective and efficient management and operation of public housing programs, talking into account changes in Federal funding. 					
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. <p>The Annual Plan was developed by the Boaz Housing Authority (BHA) in accordance with the Rules and Regulations promulgated by HUD. The goals and objectives of the BHA are contained in the Five-Year Plan and the ACOP/Section 8 Administrative Plan. These were written to comply with the HUD guidelines, rules, regulations, and Federal Law. The basic goals and objectives are:</p> <ol style="list-style-type: none"> 1) increase the availability of decent, safe and affordable housing in Boaz, as well as in the jurisdiction of DeKalb, Etowah, and Marshall Counties in regard to the Section 8 Program 2) To insure equal opportunity in housing for all Americans. 3) To promote self-sufficiency and asset development of families and individuals 4) To help improve community quality of life and economic vitality. <p>This plan was written after consultation with necessary parties and entities as provided in the guidelines issued by HUD. All necessary accompanying documents are attached to the document, or are available upon request. The PHA plans to make as many affordable housing units, that are suitable for living, and that will meet the economic needs of families, available to as many families as possible in the jurisdiction it serves. We intend to make capital improvements to our existing housing stack with available funds to improve living conditions. We further plan to improve our vacancies by improving our turn-around time for vacant units, and lease up capability to insure families in occupancy.</p> <p>We plan to follow the deconcentration and income mixing policies, following information taken from the development analysis, to insure a balance of income levels and income mix at each development. The PHA has set a discretionary minimum rent for public and Section 8 housing, and has adopted a minimum rent hardship policy</p> <p>VAWA Statement is attached</p>					

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>A) Revise and or Adopt New Policies: ACOP Policy, Procurement Policy, Community Service Policy, EIV/ UIV Policy; Maintenance Plan; Annual Inspection, Internal Control Policy, Sensitive Information Policy and Identity Theft Prevention Program, Satellite Dish Policy, Assistance Animal Policy.</p> <p>B) Boaz Housing Authority main office/ and Web site address -at -boazhousingauthority.com</p> <p>Resident and Resident Advisory Board participation /comments and Public Hearings</p> <p>Ad's for our 1st Public Hearing were run Tuesday, December 29th and Thursday, December 31st, 2009 in the Sand Mt. Reporter for a Public Hearing on the Annual Plan scheduled for Monday, January 4th, 2010 at 2:00 P. M. at the Boaz Housing Authority office. Also, Flyers were sent door to door to all the Residents. This first meeting was a preliminary meeting to go over the needs and concerns of the Resident Advisory Board residents, and general public. Residents had general questions and concerns about the up coming annual and 5-year plan. After review and discussion, the over all comments concerning the Annual and 5-year Plan were very positive.</p> <p>Ad's for our 2nd Public Hearing were run Tuesday, March 2nd and Thursday, March 4th, 2010 in the Sand Mountain Reporter for a Public Hearing on the Annual Plan scheduled for Monday, March 8th, 2010 at 2:00 P.M. at the Boaz Housing Authority Office. Flyers were sent door to door to all the Residents. This second meeting was to address any last minute question or concerns the Resident Advisory Board and or, other residents may have had from the first meeting, and to finalize the Plans before submission. The annual and 5-year plans were discussed, and the residents did ask question concerning the plans. After a question and answer session, the residents were very pleased with these plans.</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. See Chart Below:

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	4,304	5	5	5	5	5	5
Income >30% but <=50% of AMI	2,903	4	4	4	4	4	4
Income >50% but <80% of AMI	4,148	3	3	3	3	3	3
Elderly	4,493	5	5	5	5	5	5

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Families with Disabilities							
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						
Race/Ethnicity	N/A						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year:
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset
- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

1. Statement of Housing Needs [24 CFR Part 903.12 (b), 903.7(a)]

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

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

Housing Needs of Families on the PHA’s Waiting Lists			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 tenant-based assistance		
<input type="checkbox"/>	Public Housing		
<input checked="" type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover

Housing Needs of Families on the PHA's Waiting Lists			
Waiting list total	294	100	213
Extremely low income <=30% AMI	222	75	
Very low income (>30% but <=50% AMI)	53	18	
Low income (>50% but <80% AMI)	19	7	
Families with children	175	60	
Elderly families	23	8	
Families with Disabilities	63	22	
Race/ethnicity -(White)	291	99	
Race/ethnicity -(Black)	0	0	
Race/ethnicity – (Hispanic)	3	1	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR68	97- White	0- Black	1 – Hispanic
2 BR	139	0	1
3 BR	51	0	1
4 BR	4	0	0
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

Strategy # 1 -NEED: shortage of affordable housing for all eligible populations.-STRATEGY: Maximize the number of affordable units available to the PHA within its current resources by:

- a) Employ effective maintenance and management policies to minimize the number of public housing units off-line.
- b) reduce turnover time for vacated public housing units
- c) maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- d) undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- e) maintain or increase section 8 lease-up rate by marketing the program to owners, particularly those outside of areas of minority and poverty concentration.
- f) maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program.

Strategy # 2 –Increase the number of affordable housing units by:

- a) Apply for additional Section 8 units should they become available
- b) Pursue housing resources other than Public Housing or Section 8 tenant-based assistance
- c) Request for additional new vouchers should additional funds become available and request for development of new construction units should funds become available.

Strategy # 1 –NEED Specific family Types: families with disabilities: STRATEGY: Target available assistance to Families with Disabilities

9.1

- a) Seek designation of Public Housing for families with disabilities.
- b) Carry out the modifications needed in Public Housing based on the section 504 Needs Assessment for Public Housing.

Strategy #1 –NEED Specific Family Types: Races or ethnicities with disproportionate housing needs.-STRATEGY : increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

- a) Affirmatively market to races/ethnicities shown to have disproportionate housing needs

Strategy # 2: Conduct activities to affirmatively further fair housing

- a) counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- b) Market the Section 8 Program to owners outside of areas of poverty/minority concentrations

REASONS FOR SELECTING STRATEGIES

- a) Funding constraints
- b) Staffing constraints
- c) Limited availability of sites for assisted housing
- d) Extent to which particular housing needs are met by other organizations in the community
- e) Influence of the housing market on PHA programs
- f) Community priorities regarding housing assistance
- g) Results of consultation with local or state government
- h) 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.

The Housing Authorities main objective is to provide decent safe and sanitary housing for low-income families.

Goal # 1- increase the customer satisfaction in two areas. Number 1 communication. Number 2 safety. The Housing Authorities goal is to increase communications among our residents through written correspondence and or flyers, and other correspondence posted on the office bulletin board The Housing Authority has also increase the level of safety by stressing to the residents their need to report any and all activities that is not in keeping with the lease , and have stressed the importance of a neighborhood watch program. Extra lighting has also been placed in areas that were deficient. Provide weather radios and flash lights for increase safety awareness.

Goal # 2 The Housing Authority is continuing to make great strides in renovating our units. The Housing Authority is concentrating on 5 primary areas.

#1 Putting in Central Air & Heat-HVAC.

#2 Replacing existing asphalt shingle roofs with metal roofs.

#3 Replacing existing terracotta sewer pipe with pvc pipe.

#4 Remodeling inside units.

#5 Doing general landscaping.

Item #1 -HVAC - have completed all the remaining part of amp 30 (75-7- 80 units) with the current 2008 CFP monies. The 2009 CFP and stimulus monies will allow the Housing Authority to complete the HVAC units at Amp 20(75-2- 40 units).

Item #2- Metal roofs- will complete metal roofs at Amp 30, 80 units, still like part of amp 40 in Geraldine and Fyffe which is 44 units.

Item #3 -Sewer lines- only replaced part of amp 20 (40 units) and part of amp 40 (12 units) we have, and will continue, to replace the worse ones asap.

items #4 & 5 can be put with any CFP mod when needed.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" BHA intends to adhere to the mission, goals, and objectives of this five year plan. However, should a substantial deviation from program goals and objectives occur, the plan will be modified. BHA defines substantial deviations to be:

Any change in the planned or actual use of federal funds for activities that would prohibit or redirect the HHA's strategic goals of increasing the availability of decent, safe and affordable housing for the citizens of the jurisdiction served;

Any single or cumulative annual change in the planned or actual use of federal funds as identified in the five year plan that exceeds 20% of the BHA annual program budgets;

A mandate for the Board of Commissioners of the BHA to modify, revise or delete the long-range goals and objectives of a program;

A need to respond immediately to events beyond the control of the BHA, such as natural disasters, civil unrest, or other unforeseen significant events.

10.0

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.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
- (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
- (f) Resident Advisory Board (RAB) comments. 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.
- (g) Challenged Elements
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

Under new provisions of the lease, dated September 2007, "IV: OBLIGATION OF TENANT", section, Tenant Agrees: part (M). "Landlord shall not terminate or refuse to renew this lease due to an incident or incident of actual or threatened domestic violence, dating violence, or stalking. These incident(s) will not be construed as a serious or repeated violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy of occupancy rights of the victim of such violence. The tenant may be required to complete HA forms documenting the incident(s) within the time as set by the HA."

The tenant will be informed of their rights under the VAWA, (Violence Against Woman Act) at move in. In such cases of domestic violence, tenants are encouraged to fill out a certification form, HUD form 50066, of the incident, for documentation purposes. In lieu of this form, tenants may bring other documentation, such as police records, or signed statements of the incident, to the office, or make arrangements with Management to pick information up.

Individual's who are victims of such abuse may seek assistance through the following:

1) Marshall County Coalition against Domestic Violence, under the directorship of Carolyn Crump
Office Phone # (256) 891-9864 or the **24 HOUR CRISIS LINE # (256) 891-0019 or 1-888-582-6883.**
STATE HOTLINE 800-650-6522

The Alabama Coalition Against Domestic Violence-(ACADV)
DeKalb County -(256) 845-9229- Cherokee County -(256) 927-9574
Provide assistance to victims of domestic violence: referrals to safe shelter placement,
support/education counseling, court advocacy.

2) Rose Haven Shelter, under the directorship of Anna Brugge Fulmer/ also contact - D. D. Carter, for
Etowah County-24 HOUR HOTLINE # (256)543-3059
Cherokee County-24 HOUR HOTLINE # (256)927-8876

Also: contact: Olivia, in **DeKalb Counties-24 HOUR HOTLINE # (256) 845-9095**
Provide safe, confidential shelter, crises intervention and advocacy for victims of violence.
They provide shelter in Etowah Co. area that DeKalb, Cherokee, and Marshall Counties can use. Also
provide programs that help women with custody of her children, with move-in rent, any deposits,
(except phone). Must have an income in order to pay rent later on, (does not except credit renters) will
help with legal paper work if needed. Is a member of the (ACADV).

3) Salvation Army- contact person: Debbie Bearden (256)582-0536

If already housed, will provide food and help with utilities, if they have money available. If money is
not available, will refer them to the Marshall Co Coalition against Domestic Violence.

4) United Way of Marshall Co.

Contact person: Betty (256)582-4700

If receive a call on domestic violence, can provided immediate shelter. If they need to stay in shelter
until protection order is issued they may do so. Also provide pick-up service to take person to a safe
place. Will go to court if need be, to provide moral support for the abused person. Will refer abused
person to Mountain Lakes Crisis Center, if they need, for professional help.

5) First Call for Help

(256)582-0506

Provide same services as United Way

6) Legal Aid

(256)894-0100

Will give legal aid to victims

7) Department of human resources (DHR)-contact person: Wayne Sellers (256)582-7138 or (256)582-7158

Offers food stamps if they qualify, offers temporary assistance for needy families, (TANAF), if they qualify. Will refer abused person to domestic violence shelter.

The Housing Authority works in close contact with each agency mentioned above, and will assist in any way possible to get the help you need.

A packet of information will be available at the front office, or made available upon request.

The Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA), protects tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them. These provisions apply both to the public housing agencies administering public housing and Section 8 programs and the owners renting to families under Section 8 rental assistance programs.

Among other requirements, Section 606 and 607 of VAWA add certification and confidentiality provisions that allow for PHA's owners or managers responding to an incident of incidents of actual or threatened domestic violence, dating violence or stalking that may affect a tenant's participation in the housing program to request in writing that an individual complete, sign and submit, within 14 business days of the request, a HUD-approved certification form. On the form, the individual certifies that he/she is a victim of domestic violence, dating violence, or stalking, and that the incident or incidences in question are bona fide incidences of such actual or threatened abuse. On the certification form, the individual shall provide the name of the perpetrator.

In lieu of a certification form, the PHA's, and Section 8 programs may request that a tenant provide, 1) local police record or court record, 2) documentation signed and attested to by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence or stalking, or the effects of abuse, in which the professional attests under penalty of perjury (28 U.S. C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, or stalking has signed or attested to the documentation.

The PHA's and Section 8 Programs are not required to demand that an individual produce official documentation or physical proof of an individual's status as a victim of domestic violence, dating violence, sexual assault, or stalking in order to receive the protections of VAWA. Note that, a PHA, owner or manager, at their discretion, may provide assistance to an individual based solely upon the individual's statement of other corroboration evidence.

If the individual does not provide the form HUD 50066 or the information that may be provided in lieu of the certification by the 14th business day or 5 day extension of that date provided by the PHA , owner or manager, none of the protections afforded to the victim of domestic violence, dating violence or stalking by sections 606 or 607 will apply. The PHA, owner or manager would therefore be free to evict, or to terminate assistance, in the circumstance authorized by otherwise applicable law and lease provisions, without regard to the amendments made by Sections 606 and 607.

However, the PHA's and Section 8 Program management is requesting that the tenant come into the office to pick up the certification form or provide management with the appropriate information stated above or make other delivery arrangements with management that do not place the tenant at risk.

A. Resident Advisory Board Recommendations

- (1). Boyd Gregory – Married -Elderly – President-Apt # 186-75-4 -MVH**
- (2). Dan Florence-Single-Disabled-Apt# 32-75-1-Cooper Courts**
- (3). Anne Heaton-Single-Elderly- Apt#17-75-11-Fyffe Homes**
- (4). Marjory Beam-Single-Elderly-Apt# 41-75-12-Geraldine Homes**
- (5). Ruby Maise-Single- Elderly- Apt# 320-75-8 -Summerville Homes**

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- Attached at Attachment (File name)
 Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

- Considered comments, but determined that no changes to the PHA Plan were necessary.
 The PHA changed portions of the PHA Plan in response to comments
List changes below:

 Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations
- Candidates could be nominated by any adult recipient of PHA assistance
- Self-nomination: Candidates registered with the PHA and requested a place on ballot
- Other: (describe) Eligible candidates was asked to serve and resident agreed to serve.

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Boaz, Alabama		Grant Type and Number Capital Fund Program Grant No: AL09P075-501-10 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	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)	3,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	50,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	361,189			
10	1460 Dwelling Structures	286,000			
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.

4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Boaz, Alabama	Grant Type and Number Capital Fund Program Grant No: AL09P075-501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval: 2010			
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	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)	700,189			
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	216,000			
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.

4/30/2011

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Boaz, Alabama		Grant Type and Number Capital Fund Program Grant No: AL09P075-501-10 CFFP (Yes/ No): 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	
PHA Wide	Accounting	1410		3,000				
	A&E Fees	1430		50,000				
AMP40								
AL 75-9	Install high efficiency heatpumps and	1460		156,000				
Geraldine Homes	install insulated duct work							
AL 75-11	Install high effeiciency heatpumps and	1460		60,000				
Fyffe Homes	install insulated duct work							
AL 75-6	Remove ashplalt shingles, install ice	1460		70,000				
Geraldine Homes	shield & install standing seam metal roof							
Amp 30								
AL 75-7 & 4	Replace Terracotta sewer line w/ PVC	1450		361,189				
Mt. Vernon	& refurbish manholes							

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.

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Part II: Supporting Pages								
PHA Name:			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): 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	

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² To be completed for the Performance and Evaluation Report.

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of the City of Boaz, Alabama					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	
PHA Wide	6-12-2012	6-12-2014			
AMP 40					
AL 75-9 Geraldine Homes	6-12-2012	6-12-2014			
AL 75-11 Fyffe Homes	6-12-2012	6-12-2014			
AL 75-6 Geraldine Homes	6-12-2012	6-12-2014			
AMP 30					
AL 75-7 & 4 Mt. Vernon	6-12-2012	6-12-2014			
AMP 20	6-12-2012	6-12-2014			
AL 75-3 Mt. Vernon					

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.

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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.

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Part I: Summary					
PHA Name: Housing Authority of the City of Boaz, Alabama		Grant Type and Number Capital Fund Program Grant No: AL09S075-501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:5) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> 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)	50,000	50,000	50,000	
5	1411 Audit				
6	1415 Liquidated Damages	43,625			
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	803,815	847,440	847,440	153,969
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.

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Part I: Summary						
PHA Name: Housing Authority of the City of Boaz, Alabama		Grant Type and Number Capital Fund Program Grant No: AL09S075-501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 5)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				<input type="checkbox"/> 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)	897,440				
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	847,440				
Signature of Executive Director			Signature of Public Housing Director			
Date			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.

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Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Boaz, Alabama			Grant Type and Number Capital Fund Program Grant No: AL09S075-501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Administrative costs	1410		50,000	50,000	50,000		
	A&E	1430		43,625	0	0		
AMP 30 AL 75-7 Mount Vernon	Install new High Efficiency HVAC system with duct work and upgrade electrical service to 200 amps.	1460		153,969	153,969	153,969	153,969	
AMP 30 AL 75-7 Mount Vernon	Remove existing asphalt shingle and install extra decking, freeze membrane and 24 gauge standing seam metal roofs.	1460		693,471	527,155	527,155		

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Part II: Supporting Pages								
PHA Name:			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
Amp 40	Install new High Efficiency HVAC	1460		79,066	122,691	122,691		
AL075-9 Geraldine	system with duct work and upgrade							
AL075-5 Fyffe	electrical service to 200 amps as needed.							

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of the City of Boaz, Alabama					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	
PHA Wide	3-18-2010	3-18-2011			
AMP 30	3/18/2010	3-18-2011			
AL 75-7					
Mount Vernon					

AMP 30	3-18-2011	3-18-2011			
AL 75-7					
Mount Vernon					
Amp 40	3-18-2011	3-18-2011			
AL075-9 Geraldine					
AL075-5 Fyffe					

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.

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Part I: Summary					
PHA Name: Housing Authority of the City of Boaz, Alabama		Grant Type and Number Capital Fund Program Grant No: AL09P075-501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> 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)	53,000	53,000	50,000	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	26,250	0		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	622,236	648,486	424,161	
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.

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Part I: Summary					
PHA Name: Housing Authority of the City of Boaz, Alabama		Grant Type and Number Capital Fund Program Grant No: AL09P075-501-09 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> 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)	701,486	701,486		
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	648,486	648,486		
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.

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Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Boaz, Alabama			Grant Type and Number Capital Fund Program Grant No: AL09P075-501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Administrative	1410		3,000	53,000	53,000	6,250	
	A&E Fees	1430		26,250	0			
AMP 30 AL 75-7	Remove existing asphalt shingle and install extra decking, freeze membrane and 24 gauge standing seam metal roofs.	1460		100,000	0			
AMP 20 AL 75-2	Install high efficiency HVAC systems with insulated duct systems and upgrade electrical system to 200 amp	1460		522,236	307,200			
AMP40 AL075-5 Fyffe AL075-11 Fyffe	Install high efficiency HVAC systems with insulated duct systems and upgrade electrical system to 200 amp as needed.	1460		0	341,286			

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of the City of Boaz, Alabama					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	
PHA Wide	6-12-2011	6-12-2013			
AMP 30					
AL 75-7					
Mount Vernon	6-12-2011	6-12-2013			

AMP40	6-12-2011	6-12-2013			
AL075-5 Fyffe					
AL075-11 Fyffe					

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 Housing Authority of the City of Boaz, Alabama AL075		Locality (City/County & State) Boaz, Alabama			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B	Physical Improvements Subtotal	Annual Statement	648,486	648,486	648,486	648,486
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E	ADMINISTRATION		3,000	3,000	3,000	3,000
F.	Other: A&E Fees		50,000	50,000	50,000	50,000
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		701,486	701,486	701,486	701,486
L.	Total Non-CFP Funds					
M.	Grand Total		701,486	701,486	701,486	701,486

PART I: SUMMARY (CONTINUATION)

PHA Name/Number Housing Authority of the City of Boaz, Alabama AL075		Locality (City/county & State) Boaz, Alabama			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
		Annual Statement				
	PHA Wide		53,000	53,000	53,000	53,000
	Amp 10					
	75-8 SUMMERVILLE		424,486			
	AL 75-1 Cooper Court			288,243		
	Amp 20					
	AL75-3 Mt. Vernon			288,243		636,486
	AL 75-2 Mt. Vernon					12,000
	Amp 40					
	AL75-5 Fyffe		84,000		324,243	
	AL75-11 Fyffe		140,000			
	AL75-6 Geraldine			72,000	324,243	

