

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: _____ Little Rock Housing Authority _____ PHA Code: _AR004 PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 01/2010																										
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 861 <span style="float: right;">Number of HCV units: 2025</span>																										
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	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:					
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<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update. <a href="#">See document below</a>																										
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <a href="#">See document below</a>																										
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <a href="#">See document below</a>																										
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (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. <a href="#">See document below</a>																										
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i> <a href="#">See document below</a>																										
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable. <a href="#">See document below</a>																										
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. <a href="#">See document below</a>																										
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <a href="#">See document below</a>																										
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. <a href="#">See document below</a>																										
<b>9.0</b>	<b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. <a href="#">See document below</a>																										

<b>9.1</b>	<b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b> <a href="#">See document below</a>
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<b>10.0</b>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” <b>See document below</b></p>
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<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(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.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) <b>See document below</b></p>
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**5.0 Five-Year Plan**

**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 mission of the LRHA is the same as that of the Department of Housing and Urban Development: HUD's mission is to increase homeownership, support community development and increase access to affordable housing free from discrimination. To fulfill this mission, LRHA will work with HUD to embrace high standards of ethics, management and accountability and forge new partnerships--particularly with faith-based and community organizations--that leverage resources and improve HUD's ability to be effective on the community level.*

**LRHA EMPLOYEE MISSION STATEMENT**

**“Make LRHA the most productive, effective, recognized housing authority in the State of Arkansas”**

Through our collective efforts we will positively enhance and serve this community with integrity, care, high ethical standards, and competence. LRHA is committed to provide quality service to the residents who are low, very low, extremely low and moderate-income citizens of the city: We are committed to the needs of our families and pledge to develop quality affordable housing opportunities to address those needs, provide leadership and resources to neighborhood revitalization and stabilization activities; develop various partnerships with private and public entities to optimize resources through innovative programs; and work diligently to provide efficient and effective management of resources.

**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.**

**GOAL: A. Increase the availability of decent, safe, and affordable housing.**

- Expand the supply of assisted housing by **500 units** (rental and homeownership). This will be accomplished through various sources, (not all inclusive) to tax credits, acquisition, new construction, all eligible HUD funds.*

## LRHA 2017 Housing Initiative

Year	Type of Housing	Targeted # of Units	Potential Source of Funding	Status
2007	Single Family Homeownership ( <i>New Horizon Village</i> )	17	RHF	Construction Complete / 58% of Homes Sold or Under Contract
2008	Multifamily ( <i>Cumberland Manor &amp; Metropolitan Village</i> )	120	TC, RHF, FHA Mortgage	Construction In Process Lease-up Underway
2009	Multifamily Housing ( <i>Stephens and Central High Neighborhoods</i> ) ( <i>Granite Mountain Green Senior Housing</i> )	14 20	ARRA Formula Grant, RHF, CFP, ARRA Competitive Grant, TC	Funds awarded for formula and competitive grants Application being developed for tax credits
2010	Multifamily Supportive Housing	20	TC, RHF, FHA Mortgage, PBV	
2011	Multifamily	40	HOME, AHP, RHF, CFP, TC	
2012	Mixed Use Multifamily	80	TC, RHF, FHA Mortgage	
2013	Single Family Homeownership	25	HOME, AHP, RHF, CFP, TC	
2014	Assisted Living	40	TC, RHF, PBV	
2015	Mixed Use Multifamily	80	TC, RHF, FHA Mortgage	
2016	Single Family Homeownership Supportive Housing	25	HOME, AHP, RHF, CFP, TC	
2017	Single Family Homeownership	25	HOME, AHP, RHF, CFP, TC	
	<b>TOTAL UNITS</b>	<b>506</b>		

Sources Key:

TC: Tax Credits  
RHF: Replacement Housing Factor Funds  
HOME: HOME Investment Program  
AHP: Affordable Housing Program  
CFP: Capital Fund Program  
PBV: Project Based Vouchers  
FHA: Mortgage Insurer

2. Reduce public housing vacancy downtime by **25%** within the first year; and additional **25%** by the end of year two; an additional **5%** by the end of years three, four and five.
3. LRHA will continue **100%** site based waiting list for the PH units owned and operated by the agency.
4. Reduce the lease-up time for HCV clients by **50%**.
5. Increase the HCV program lease-up rate to **98%** by the end of **2010**.

6. *Maintain the HCV lease-up rate at no less than 99% by the end of year two & each year thereafter.*
7. *Apply for HOPE VI, Capital Fund or any eligible program to increase housing stock.*
8. *Implement all ARRA, NSP and other resources to increase the number of affordable housing opportunities.*

**GOAL: B. Improve the quality of assisted housing**

- 1) *Improve public housing management assessment scores:*
  - a. *SEMAP: 92% (2010) 93% (2011) 94% (2012) 95% (2013), 96% (2014);*
  - b. *PHAS 0 EH&S for each site;*
  - c. *Increase PHAS scores by 10% at each site, each year;*
  - d. *Increase MASS scores by 10% at each site, each year*
- 2) *LRHA will ensure compliance with various regulations, memorandum, guidance and rules. This will be accomplished by additional staff training, quality control monitoring of 100% of the files in year one, 50% of the files in year two and random sampling each year thereafter.*
- 3) *Continue the applicability of the Enterprise Income Verification (EIV). 100% utilization of EIV system.*
- 4) *Increase customer satisfaction: 95% or greater customer satisfaction rate from HCV landlord, PH residents, HCV clients by the end of the five year period.*
- 5) *Achieve and maintain 97% or greater of rent collections for the public housing program.*
- 6) *Implement and maintain preventive maintenance efforts at 100% of the PH site.*
- 7) *Renovate or modernize public housing units, as needed.*
- 8) *Meet UFAS compliance at each PHA owned site.*
- 9) *Conduct a minimum of 2 landlord informational meetings each year.*
- 10) *Implement green design and energy efficiency 100% of the time, if applicable.*
- 11) *Implement Smoke-Free housing for Cumberland Towers (2010); Parris Towers (2011); Powell Towers (2012).*
- 12) *All newly constructed housing will be smoke free residences.*

**GOAL: Increase assisted housing choices:**

- 1) *Continue implementation of homeownership programs. Sell 30 units by the end of the five year period (2014).*
- 2) *Implement Project Based Voucher for 20% of HCV allocation by 2014.*
- 3) *Develop assisted living units that are affordable by 2014.*

**GOAL: B. Improve community quality of life and economic vitality**

- 1) *Develop green jobs program for HCV, PH and community residents.*
- 2) *Work with Workforce Investment Board, Jobs Corps, Black Community Developers, Pulaski County Brownfield, Clinton Climate Initiative, Gore Climate initiative, Audubon Arkansas and other stakeholders in this effort.*

- 3) *Revise and implement various strategies to address crime and incidents of criminal behavior in public housing apartment communities.*
- 4) *Create employment and connection of youth to mainstream education and employment opportunities.*
- 5) *Work with community stakeholders to explore and utilize New Market Tax Credits.*
- 6) *Become a CDE and apply for New Market Tax Credits.*
- 7) *Educate residents in energy conservation. Reduce energy consumption in water and electricity in the each of the high-rise apartment complexes.*
- 8) *Continue to build collaborations with other agencies.*

**GOAL: Promote self-sufficiency and asset development of families and individuals**

- 1) *Aggressively review and assist contractors and subcontractors to ensure compliance with Section 3 training and employment goals.*
- 2) *Educate LRHA residents regarding Section 3 business and training employment opportunities.*
- 3) *Provide or identify supportive services to improve assistance recipients' employability.*
- 4) *Seek new partnerships with both public and private entities to enhance social and economic services to residents in assisted housing.*

**GOAL: Ensure Equal Opportunity in Housing for all Americans**

- 1) *LRHA will provide and / or participate in annual trainings to ensure compliance with Section 504, ADA, and the Fair Housing Act.*
- 2) *Will comply with UFAS at PHA owned sites.*

**GOAL: Embrace High Standards of Ethics, Management and Accountability**

- 1) *LRHA will provide and / or participate in annual trainings to ensure compliance with Section 504, ADA, and the Fair Housing Act.*
- 2) *Combat fraud and waste in housing programs.*
- 3) *Achieve and maintain qualified employees to administer various housing programs*
- 4) *Properly procure goods and services.*

**GOAL: End Chronic Homelessness**

- 1) *Participate in Homeless Initiatives to partner with various stakeholders in the effort to eradicate homelessness.*
- 2) *Continue implementing vouchers for homeless prevention.*

**GOAL: Embrace Technology to Increase Efficiency and Effectiveness of Housing Programs**

- 1) *LRHA will implement various technological efforts to improve the delivery of services and core business practices to meet the overall mission of the agency.*
- 2) *LRHA will be paperless by FYE 2014.*

3) *Mandate utilization of electronic transfer of HAP funds for HCV landlords.*

**Progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan**

2005 began the first year of the previous 5 year plan for the fiscal years 2005-2009. The focus for the agency for 2005 was to improve the PHAS scores with particular emphasis on the physical indicator and unit turnaround time. The LRHA showed strong improvement in its PHAS scores in 2005. It worked with HUD to develop and implement a MOU. It was removed from “Troubled” designation to Standard Performer.

**PHA Goal: Expand the supply of assisted housing.**

Objective: Leverage private or other public funds to create additional housing opportunities.

- Completed the construction of 17 single family homes on the former Ives Walk public housing sites. The homes are for sale to first time homebuyers.
- The Authority owns eight properties adjacent / contiguous to the property to build additional housing.

The Little Rock Housing Authority, along with its development partner McCormack Baron Salazar, are in the process of constructing 120 new rental units made up of public housing, LIHTC units and market rate units. The proposed development mix will be PHA / LIHTC (30%), LIHTC / Non PHA (40%) and Market Rate (30%).

Objectives: Renovate or modernize public housing  
Demolish or dispose of obsolete housing units

- Replaced the chiller system in Parris Towers and Powell Towers.
- Replaced the furniture at Parris Towers.
- Submitted a disposition application to the DHUD for the leasing of 1000 Wolfe Street to Arkansas Children’s Hospital.
- Relocated all families from the Hollinsworth Grove PH development.
- Submitted a disposition application to the DHUD for the leasing of 201 East Roosevelt Road to Harmony Health Clinic.
- Submitted demolition / disposal application for Ives Homes site.
- Renovated units in Powell Towers to enhance the energy efficiency and marketability.
- Procured a consultant to assist with completing an Energy Performance Contract (EPC) for the high-rises.
- Demolished Ives Homes and Ives Walk.

Objectives: Provide an improved living environment

- The Little Rock Housing Authority HCV program was designated as a high performer. The score was greatly improved from previous years.
- The score for conventional housing program was a standard performer at 83 points.
- The LRHA assisted interested persons via the Section 3 program as part of the construction of the two new developments being constructed.
- The Authority implemented the final phase of Asset Management and Project Based Budgeting. This is in response to various HUD directives / guidance.
- LRHA's administrative offices relocated to 100 South Arch Street. The move has been an enhancement in overall customer service and program efficiency.

## 6.0 PHA Plan Update

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

- *PHA Goals & Objectives – (FY 2010 to FY 2014)*
- *Admissions and Continued Occupancy Policy*
- *HCV Administrative Plan*
- *Tenant Charges List*
- *Lease*
- *Deconcentration Policy*
- *Wait List Procedures*
- *Financial Resources*
- *EIV Policies and Procedures*
- *Rent Determination*
- *Violence Against Women Act (VAWA)*
- *Homeownership*
- *Project Based Vouchers*
- *Capital Improvements*
- *Resident Advisory Board Members*
- *PHA Management Organizational Chart*

**(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan.**

Location	Address
Sunset Terrace (AR001)	2800 South Battery Street, LR , AR 72209
Parris Towers (AR009)	1800 South Broadway St., LR , AR 72209
Cumberland Towers (AR010)	311 East 8 <sup>th</sup> Street, LR , AR 72201

Powell Towers (AR011)	1010 Wolfe Street, LR , AR 72202
Homes at Granite Mountain (AR020)	#6 Harris Circle, Little Rock, AR 72209
HCV Program & LRHA Administrative Office	100 South Arch Street, LR , AR 72201

Upon approval by HUD the plan will be posted on the LRHA website located at [www.lrhousing.org](http://www.lrhousing.org). The written plan is available from, 10:00 a.m. – 2:30 p.m., Monday thru Friday. *Those wishing to discuss the plan and supporting documents should phone 501-340-4821 to schedule an appointment with the Executive Director.*

## Required Plan Elements

**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.

### A. Public Housing

**(1) Eligibility**

Certification of the eligibility is made when families are within 60 days of being offered a unit. This may vary based upon the unit size the family is eligible for and the vacancy availability.

The following non-income (screening) factors are used by LRHA to establish eligibility for admission to public housing

- Criminal or Drug-related activity
  - Rental history
  - Housekeeping, if determined necessary
  - Other (describe)
- Past due balance to LRHA and other PHAs.  
 Ability to Live Independently  
 LRHA takes appropriate action before admission to verify the citizenship / immigration status of each household member as required under Federal law.

LRHA accesses NCIC for criminal records from the FBI for screening purposes.

LRHA use site based waiting list at each of it sites.

Persons may apply for admission to public housing via:

- PHA development site management office
- PHA website: [www.lrhousing.org](http://www.lrhousing.org)

Persons are eligible to be on more than one wait list simultaneously.

Applicants are ordinarily offered one opportunity to turn down and offer before they fall to the bottom of the wait list or they are removed from the LRHA waiting list.

We do not plan to exceed the federal targeting requirements by targeting more than

40% of all new admissions to public housing to families at or below 30% of median area Income.

In the following circumstances a PHA resident may transfer to another unit. This transfer will take precedence over new admissions.

- Emergencies
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Other: (list below)
  - Incentive Transfers
  - Demolition / Disposition of PHA proposed units

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

1 Date and Time

Former Federal preferences:

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs

4. Relationship of preferences to income targeting requirements:

- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

### (5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing:

- The PHA-resident lease  
 The PHA's Admissions and (Continued) Occupancy policy  
 PHA briefing seminars or written materials  
 Other source (list) PHA generated newsletter and other correspondence delivered to residents and the general population.

b. How often must residents notify the PHA of changes in family composition?

- At an annual reexamination and lease renewal  
 Any time family composition changes  
 At family request for revision  
 Other (list)  
When requested by the PHA if the PHA has verifiable information to substantiate the fact that the household composition has changed.

a.  Yes  No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

b.  Yes  No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

## **Section 8**

### **(1) Eligibility**

a. What is the extent of screening conducted by the PHA? (select all that apply)

- Criminal or drug-related activity only to the extent required by law or regulation  
 Other (list below) LRHA responds to landlord inquiries, i.e., whether damage claims were paid during prior Section 8 occupancy(s), previous PH account

b.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords?

- Criminal or drug-related activity  
 Other (describe below)  
Previous rental history of client and other regulation approved information.

**Waiting List Organization**

**a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged?**

None

b. Where may interested persons apply for admission to section 8 tenant-based assistance?

Other (list below)

Section 8 Wait List is closed, it may be reopened during the fiscal year.

**(3) Search Time**

a.  Yes  No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

Extenuating circumstances such as hospitalization or a family emergency for an extended period of time, which has affected the family's history to find a unit.

The HA is satisfied that the family made every reasonable effort to find a unit, including seeking the assistance of the HA, throughout the initial 60 day period.

The family was prevented from finding a unit due to disability accessibility requirements or large size (number of) bedroom unit requirement.

All extension requests require verifiable documentation.

**Admissions Preferences**

a. Income targeting

Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1.  Yes  No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) **Special purpose section 8 assistance programs**

2. Which of the following admission preferences does the PHA plan to employ in the coming year?

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Working families and those unable to work because of age or disability

Residents who live and/or work in your jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

3. What is the priority? Date and Time and Former Federal preferences

4. Among applicants on the waiting list with equal preference status, how are applicants selected? Date and time of application

**Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained?

- The Section 8 Administrative Plan
- Briefing sessions and written materials

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?  
Through published notices

**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.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2010 grants)</b>		
a) Public Housing Operating Fund	\$2.7 M (estimate)	Operations
b) Public Housing Capital Fund	\$1.2 M (estimate)	Capital Improvements
c) RHF	\$480 K (estimate)	Capital Improvements
d) CFP Recovery Grant	\$2.6M	Capital Improvements
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$9.5 M	Operations
f) ROSS Program	\$50k	Operations
g) CFRG Competitive	\$2.2M awarded	Capital Improvements
h) CFRG Competitive Grant	\$1.6 M	Capital Improvements
i) HOME	\$500k	Capital Improvements
Other Federal Grants (list below)		
NSP 2	\$9 M, if awarded	Capital Improvements
FSS Coordinator	\$50,000, if awarded	Operations
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
2 <sup>nd</sup> Increment RHF	\$1-3M	Capital Improvements
2009 CFP	\$1.2 M	Capital Improvements
2008 CFP	\$1M	Capital Improvements
<b>3. Public Housing Dwelling Rent Income</b>	\$950,000	Operations
<b>4. Other income (list below)</b>		
CFFP	TBD	Capital Improvements
Rent for air Space	TBD	Operations

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
Program Income	TBD	Various Housing Related Initiatives
<b>4. Non-federal sources</b> (list below)		
Disposition Proceeds	TBD	Operations or Capital Improvements

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

- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$26-\$50

2.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below: *Minimum Rent Policy*

c. Rents set at less than 30% than adjusted income

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- For the earned income of a previously unemployed household member  
If yes, state percentage/s and circumstances below:

- For household heads

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- No

f. Rent -determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Any time the family experiences an income increase

g.  Yes  No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

**(2) Flat Rents**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of similar unassisted units in the neighborhood

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

**(1) Payment Standards**

a. What is the PHA's payment standard? (select the category that best describes your standard)

- 100% of FMR
- Above 100% but at or below 110% of FMR (for 2 bedrooms)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- To increase housing options for families

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families

**(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

- \$26-\$50

b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below) Please see attached policy.

**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. Operations and Management**

[24 CFR Part 903.7 9 (e)]

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

- An organization chart showing the PHA's management structure

*Board of Commissioners*

*Executive Director*

*Director Finance Director Admin. Ser Director Real Estate Dev Director PH Director HCV*

### **B. HUD Programs Under PHA Management**

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing	800	20-25%
Section 8 Vouchers	1900	15-20%
Section 8 Certificates	0	
Section 8 Mod Rehab	8	3-5%
Special Purpose Section 8 Vouchers (list individually)		
FUP	100	20%-25%
VOA	50	20%-25%
VASH	100	20%-25%
AR CARES	25	10%
CATCH	25	50%
MFP	5	50%

### **C. Management and Maintenance Policies**

- (1) Public Housing Maintenance and Management: (list below)
- Admissions and Continued Occupancy Policy (A.C.O.P.)
  - Maintenance Plan and Charges
  - Personnel Policies
  - Procurement Policies
  - Pet Policy
  - Facilities Use Policy
  - House Rules (high-rise buildings)
  - Preventative Maintenance / Pest Eradication Policy
  - Grievance Policy
  - Community Service Policy
  - PH Homeownership Plan
  - Banned Policy

- (2) Section 8 Management: (list below)
- Administrative Plan
  - Owner's Briefing Manual
  - Family Self Sufficiency Action Plan
  - Personnel Policies
  - Procurement Policies
  - Grievance Policy
  - HCV Homeownership Plan

**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**

1.  Yes  No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?
2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- PHA main administrative office
  - PHA development management offices

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

1.  Yes  No: Has the PHA established 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?
2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- Other (list below) Correspondence to the participant will designate to whom, where and the timeline

**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.

**Request for Extension / Renewal Plan to Formally Designate Fred W. Parris Towers Developments submitted to HUD August 2009. Approved by HUD August 2009.**

The Housing Authority of the City of Little Rock submits this plan to renew the designation of **Fred W. Parris Towers (AR004-009)** and **Cumberland Towers (AR004-010)** apartment communities as **elderly and near elderly apartment buildings**.

**Identification of the Developments to be Redesignated:**

**AR004-009** Fred Parris Towers, 1800 S. Broadway St., Little Rock, AR 72206

**Number of units in the affected projects:**

Development	Project #	# of Units in the Development	Total # of Units in the Affected Projects	Total # of Units to be Designated as Non-Elderly	Percentage of the Project for Designation
Parris Towers	AR 004-009	250	250	0	100%
Cumberland Towers	AR 004-010	178	178	0	100%
Powell Towers	AR 004-011	168	0	168	0%

**LRHA High-Rise Unit Breakdown**

Bedroom Size	Parris Towers	Cumberland Towers	Powell Towers
Zero Bedroom	142	104	100
One Bedroom	98	70	63
Two Bedroom	10	4	6
<b>Total</b>	<b>250</b>	<b>178</b>	<b>169</b>

**Identify the population Served in the Designated Units: 2004 Data**

Development Name	Elderly & Near Elderly	Non-Elderly
Parris Towers	93	56
Cumberland Towers	119	38
Powell Towers	112	38
<b>Totals</b>	<b>324</b>	<b>132</b>

**Current Data**

Development Name	Elderly & Near Elderly	Non-Elderly
Parris Towers	236	7
Cumberland Towers	176	2
Powell Towers	78	76
<b>Totals</b>	<b>490</b>	<b>85</b>

**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. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

Yes  No: Has the PHA 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)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Jointly administer programs

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

**(1) General**

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference/eligibility for section 8 homeownership option participation

b. Economic and Social self-sufficiency programs

Yes  No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use. )

<b>Services and Programs</b>				
<i>Program Name &amp; Description)</i>	<i>Estimated Size</i>	<i>Allocation Method</i>	<i>Access</i>	<i>Eligibility</i>
<i>HCV FSS</i>	<i>90</i>	<i>Voluntary / Wait List</i>	<i>HCV FSS Coordinator</i>	<i>HCV</i>

**C. Welfare Benefit Reductions**

1. The PHA 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: (select all that apply)

- Adopting appropriate changes to the PHA’s public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination regarding the exchange of information and coordination of services

- Establishing a protocol for exchange of information with all appropriate TANF agencies (using EIV and other sources)

**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. Need for measures to ensure the safety of public housing residents**

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime

2. What information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).

- 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
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs

3. Which developments are most affected? (list below)

Cumberland Towers, Powell Towers and Sunset Terrace

**B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Activities targeted to at-risk youth, adults, or seniors

2. Which developments are most affected? (list below)

Powell Towers and Sunset Terrace

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

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities:

- Police provide crime data to housing authority staff for analysis and action
- Police regularly meet with the PHA management and residents

2. Which developments are most affected? (list below)

Parris Towers, Cumberland Towers, Powell Towers and Sunset Terrace

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

## II. PET OWNERSHIP POLICY

### A. Pet Rules

The following rules shall apply for the keeping of pets by Residents living in the units operated by the Housing Authority. These rules do not apply to service or companion animals verified to be needed by a person with a documented disability who have a disability-related reason for needing an animal.

- 1 Common household pets as authorized by this policy means a domesticated animals, such as a cat, dog, fish, birds, rodents (including rabbits) and turtles, that are traditionally kept in the home for pleasure rather than for commercial purposes.
- 2 Each resident family will be allowed to house only one (1) warm blooded animal at any time, one 10 gallon fish tank or one cage with up to 2 birds. Visiting guests with pets will not be allowed. Additional pets found in the premises will be removed at the owners expense.
- 3 Each resident must register his/her pet with the Authority **BEFORE** it is brought onto the Authority premises, and must update the registration annually at the annual re-examination of income. The registration will include: (Appendix 1)
  - Information sufficient to identify the pet and to demonstrate that it is a common household pet, including a picture;
  - A certificate signed by a licensed veterinarian or a State or Local Authority empowered to inoculate animals, stating that the pet has received all inoculations required by applicable State and Local Law;
  - A signed agreement must be executed by an alternate caretaker (listing the name, address, and telephone number) who will care for the pet if the pet owner dies, is incapacitated, or is otherwise unable to care for the pet.
  - A statement indicating that the pet owner has read the pet rules and agrees to comply with them; (*Appendix 2*)
  - The Authority may refuse to register a pet if:
    - 1) The pet is not a common household pet;
    - 2) The keeping of the pet would violate any applicable house pet rule;
    - 3) The pet owner fails to provide complete pet registration information;
    - 4) The pet owner fails to update the pet registration annually;

- 5) The Authority reasonably determines, based on the pet owners' habits and practices and the pet's temperament, that the pet owner will be unable to keep the pet in compliance with the pet rules and other legal obligations;
  - Financial ability to care for the pet will not be a reason for the Authority to refuse to register a pet.
  - The Authority will notify the pet owner if the Authority refuses to register a pet. The notice will:
    - 1) State the reasons for refusing to register the pet;
    - 2) Be served on the pet owner in accordance with procedure outlined in paragraph B1 of this policy; and
    - 3) Be combined with a notice of a pet rule violation if appropriate.
4. Cats and dogs shall be limited to small breeds where total adult weight shall not exceed twenty five (25) pounds and total height at the shoulder shall not exceed eighteen (18) inches. The size limitations do not apply to service animals.
5. No chows, pit bulls, Dobermans, rottweilers, or any other known fighter breed will be allowed on the premises.
6. All cat and dog pets shall verified by veterinarian to be neutered or spayed, cost to be paid by the owner. Pet owners will be required to present a certificate of health from their veterinarian verifying all required annual vaccines, initially and at re-examination.
7. In general occupancy developments, a non-refundable pet fee of \$100 per bedroom in the pet owner's unit shall be made to the Housing Authority. Such fee will be a one-time fee (per pet) and shall be used to help cover cost of damages to the unit caused by the pet.
8. Pets shall be quartered in the Resident's unit.
9. Dogs and cats shall be kept on a leash and controlled by a responsible individual when taken outside.
10. No dog houses will be allowed on the premises.
11. Visiting guests with pets (other than service animals to assist visitors with disabilities) will not be allowed.
12. Pets (dogs and cats) must be kept in the resident's apartment and not allowed to be in public areas without being on a leash. Pets must be kept in owner's arms when on the elevator, in the hallway or lobby area or high-rise buildings. The owner must prominently display rabies and license tags on the pet.
13. Owners shall clean up after pet after each time the animal eliminates.
14. Pets can be exercised in approved areas designated by the LRHA.
15. Persons who own pets are recommended to purchase a personal liability policy; the resident may include this coverage in the Renters Insurance Policy. The tenant acknowledges by signing the lease agreement they are solely responsible for all personal and property damages caused by their pet. The coverage should be sufficient to protect the owner of damage caused by the pet to persons or property.
16. A security deposit of \$150.00 is required to be held without interest, until such time as the owner moves out or until the pet is no longer with the resident. This deposit shall be applied against any and all damages caused by the pet or the owner's failure to clean up after the pet. This deposit will not be used to defray the cost of unrelated repairs.
17. Any pet determined to be dangerous or vicious as defined in the City of Little Rock Animal Service Code are prohibited from LRHA property at all times.
18. Should the LRHA have to exterminate a unit for fleas, ticks or other animal related pests, the cost of extermination shall be charged to the resident.

19. Prior to initial occupancy and annually thereafter, the pet owner must certify that the pet is housebroken or paper trained, and shall be responsible for cleaning up and proper disposal of pet waste daily inside the apartment and outside the building/unit. Pet waste will be put in a plastic bag and deposited in the dumpster. There will be a \$25.00 charge if this is not done.
20. No pet shall be allowed to make barking, whining, scratching or exhibit a threatening behavior that might disturb other residents or Housing Authority staff. The resident owning the pet will be asked to vacate or remove the pet from the premises if these conditions cannot be controlled.
21. Any applicable City and State Ordinances concerning pets will be complied with.
22. Pets shall be removed from the premises when their conduct or condition is duly determined to constitute a nuisance or a threat to the health and safety of the pet owner, other occupants of the Authority, or the pet, in accordance with paragraph B3 below.
23. Birds must be kept in regular bird cages and not allowed to fly throughout the unit.
24. Dishes or containers for food and water will be located within the owner's apartment. Food and/or table scraps, will not be deposited on the owner's porches or yards.
25. Residents will not feed or water stray animals or wild animals.
26. 17. Pets will not be allowed on specified common areas (under clotheslines, social rooms, office, maintenance space, etc.).
27. Each resident family will be responsible for the noise or odor caused by their pet. Obnoxious odors can cause health problems and will not be tolerated.

1. **NOTICE OF PET RULE VIOLATION (Appendix 3):** When the Authority determines on the basis of objective facts supported by written statements, that a pet owner has violated one or more of these rules governing the owning or keeping of pets, the Authority will:

- Serve a notice of the pet rule violation on the owner by sending a letter by first class mail, properly stamped and addressed to the Resident at the leased dwelling unit, with a proper return address, or
  - serve a copy of the notice on any adult answering the door at the Residents' leased dwelling unit, or if no adult responds, by placing the notice under or through the door, if possible, or else by attaching the notice to the door;
2. The notice of pet rule violation must contain a brief statement of the factual basis for the determination and the pet rule or rules alleged to be violated;
  3. The notice must state that the pet owner has ten (5) days from the effective date of service of notice to correct the violation (including, in appropriate circumstances, removal of the pet) or to make a written request for a meeting to discuss the violation. The effective date of service is the day that the notice is delivered or mailed, or in the case of service by posting, on the day that the notice was initially posted;
  4. The notice must state that the pet owner is entitled to be accompanied by another person of his or her choice at the meeting;
  5. The notice must state that the pet owners' failure to correct the violation, to request a meeting, or to appear at a requested meeting may result in initiation of procedures to terminate the pet owners' lease.
  6. **PET RULE VIOLATION MEETING:** If the pet owner makes a timely request for a meeting to discuss an alleged pet rule violation, the Authority shall establish a mutually agreeable time and place for the meeting to be held within fifteen (15) days from the effective date of service of the notice of pet rule violation (unless the Authority agrees to a later date).
    - The Authority and the pet owner shall discuss any alleged pet rule violation and attempt to correct it

and reach an understanding.

- The Authority may, as a result of the meeting, give the pet owner additional time to correct the violation.
- Whatever decision or agreements, if any, are made will be reduced to writing, signed by both parties, with one copy for the pet owner and one copy placed in the Authority's Resident file.

7. **NOTICE OF PET REMOVAL:** If the pet owner and the Authority are unable to resolve the pet rule violation at the pet rule violation meeting, or if the Authority determines that the pet owner has failed to correct the pet rule violation within any additional time provided for this purpose under paragraph B.3 above (or at the meeting, if appropriate), requiring the pet owner to remove the pet. This notice must:

- Contain a brief statement of the factual basis for the determination and the pet rule or rules that have been violated;
- State that the pet owner must remove the pet within ten (10) days of the effective date of service of notice or pet removal (or the meeting, if the notice is served at the meeting);
- State the failure to remove the pet may result in initiation of procedures to terminate the pet owner's residency.

8. **INITIATION OF PROCEDURE TO TERMINATE PET OWNERS RESIDENCY:** The Authority will not initiate procedure to terminate a pet owners' residency based on a pet rule violation unless:

- The pet owner has failed to remove the pet or correct the pet rule violation within the applicable time period specified above;
- The pet rule violation is sufficient to begin procedures to terminate the pet owner's residency under the terms of the lease and application regulations,
- Provisions of Resident's Lease, Section XIV: Termination of Lease will apply in all cases.

1. If the health or safety of a pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet, the Authority may:

- Contact the responsible party or parties listed in the registration form and ask that they assume responsibility for the pet;
- If the responsible party or parties are unwilling or unable to care for the pet, the Authority may contact the appropriate State or Local Animal Control Authority, Humane Society or designated agent of such Authority and request the removal of the pet at the owners expense;
- If the Authority is unable to contact the responsible parties despite reasonable efforts, action as outlined in C.1.b above will be followed; and
- If none of the above actions produce results, the Authority may enter the pet owner's unit, remove the pet, and place the pet in a facility that will provide care and shelter until the pet owner or a representative of the pet owner is able to assume responsibility for the pet, but no longer than thirty (30) days. The cost of the animal care facility provided under this section shall be charged to the pet owner.

Nothing in this policy prohibits the Authority or the Appropriate City Authority from requiring the removal of any pet from the Authority property. If the pet's conduct or condition is duly determined to constitute, under the provisions of State or Local Law, a nuisance or a threat to the health or safety of other occupants of the Authority property or of other persons in the community where the project is located.

#### **E. APPLICATION OF RULES**

1 Pet owners will be responsible and liable for any and all bodily harm to other residents or individuals.

Destruction of personal property belonging to others caused by owner's pet will be the financial obligation of the pet owner.

2 All pet rules apply to resident and/or resident's guests.

### Appendix I

### III. PET AGREEMENT

1. Management considers the keeping of pets a serious responsibility and a risk to each resident in the apartment. If you do not properly control and care for a pet, you will be held liable if it causes any damages or disturbs other residents.
2. Conditional Authorization for Pet. You may keep the pet that is described below in the apartment until Dwelling Lease is terminated. Management may terminate this authorization sooner if your right of occupancy is lawfully terminated or if you or your pet, your guests or any member of your household violate any of the rules contained in the Authority's pet Policy or this Agreement.
3. Pet Fee. The Pet Fee will be \$100 times the number of bedrooms in your unit for your current pet. The Pet Fee is a one-time, non-refundable charge.
  - If, at any time in the future, this pet is replaced by another animal, another one-time fee will be charged for that animal.
  - This fee will be used to pay reasonable expenses directly attributable to the presence of the pet in the complex, including but not limited to, the cost of repairs to and fumigation of the apartment.
4. Liability Not Limited. The fee under this Pet Agreement does not limit resident's liability for property damages, cleaning, deodorization, defleaing, replacements, or personal injuries.
5. Description of Pet. You may keep only one pet as described below. The pet may not exceed eighteen (18) inches in height at the shoulder and twenty five (25) pounds in adult weight. You may not substitute other pets for this one without amending this agreement.

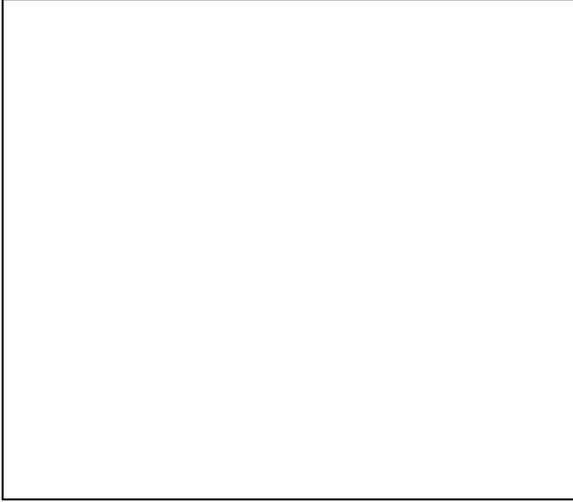
Pet's Name \_\_\_\_\_ Type \_\_\_\_\_  
Breed \_\_\_\_\_ Color \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_  
Housebroken? \_\_\_\_\_ City of License \_\_\_\_\_ License No. \_\_\_\_\_  
Date of last Rabies shot \_\_\_\_\_

Name, address and phone number of person able to care for pet in case of resident's permanent or temporary inability to care for animals

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

IV. PET POLICY CERTIFICATION

Attach photo of Pet here



By \_\_\_\_\_

Title \_\_\_\_\_

Housing Authority

Resident \_\_\_\_\_

Resident \_\_\_\_\_

Resident \_\_\_\_\_

I have read, fully understand and will abide by the rules and regulations contained in the Housing Authority Pet Policy and in this Pet Agreement.

**Appendix 3**  
**Pet Policy Rules Violation Notice**

DATE: \_\_\_\_\_

TIME: (IF DELIVERED) \_\_\_\_\_ A.M. /P.M.

TO: \_\_\_\_\_

NAME OF RESIDENT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

PET NAME OR TYPE: \_\_\_\_\_

This notice hereby informs you of the following pet rule violation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Factual Basis for Determination of Violation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

As pet owner you have ten (10) calendar days from the date shown on this notice (date notice delivered or mailed) in which to correct the violation or make a written request for a meeting to discuss the violation.

As pet owner you are entitled to be accompanied by another person of your choice at the meeting.

Failure to correct the violation, to request a meeting, or to appear at the requested meeting may result in initiation of procedures to terminate your tenancy.

\_\_\_\_\_  
Executive Director

**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.

The LRHA certifies it can document that it examines its programs, policies to identify potential impediments to fair housing choice.

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

**16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1.  Yes  No: Is the PHA 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))?(If no, skip to component 17.)
2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes  No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? 8
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD? Not at the submission of this document  
If not, when are they due (state below)? November, 2009

**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.

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - Private management
  - Development-based accounting
  - Comprehensive stock assessment
3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

**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.

**Domestic Violence, Dating Violence, Sexual Assault, Stalking**

The LRHA (LRHA) has adopted a policy to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA). LRHA's goals, objectives and policies to enable LRHA to serve the needs of child and adult victims of domestic violence, dating violence

and stalking, as defined in VAWA, are stated in the LRHA VAWA Policy, a copy of which is included in the ACOP and Administrative Plans.

In addition:

A. The following activities, services, or programs are provided by LRHA, directly or in partnership with other service providers, to child and adult victims of domestic violence, dating violence, sexual assault or stalking.

Pamphlets and assistance with contacting programs in the community that assist families in need.

B. The following activities, services, or programs are provided by LRHA to help child and adult victims of domestic violence, dating violence, sexual assault, or stalking maintain housing.

Pamphlets and assistance with contacting programs in the community that assist families in need.

C. The following activities, services, or programs are to be provided by LRHA to prevent domestic violence, dating violence, sexual assault and stalking, or to enhance victim safety in assisted families.

Annual Awareness Day Activities

**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.**

- (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>

*It is the intent of the LRHA to develop various housing types during this period. We will utilize techniques of the mixed finance model, as applicable. Where not applicable the traditional development model will be used. Specific sites have not been determined for future development.*

- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)

**Note:** This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

*At this time there are no planned demolition / dispositions of PHA property. If the PHA should elect to do so, this will not be considered a significant deviation from the plan.*

- (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>

*At this time there are no planned conversions of PHA property. If the PHA should elect to do so, this will not be considered a significant deviation from the plan.*

**(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.

*It is the intent of the LRHA to develop various housing types during this period. We will utilize techniques of the mixed finance model, as applicable. Where not applicable the traditional development model will be used.*

**(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.

*The Housing Authority of Little Rock will provide opportunity for utilization of Project Based Section 8 Vouchers.*

*The Housing Authority has determined that project-basing is an appropriate option because it will enhance the mixed income concept and reduce the concentration of poverty in the City of Little.*

*The total number of project based units made available by the PHA will be "equal to 20% of the total funding available under the Annual Contributions Contract (ACC) for tenant based assistance (Housing Choice Voucher funding), equivalent to 20% of the baseline units established by HUD."*

*All new Project Based Assistance agreements... "Must be for units located in census tracts with poverty rates of less than 20%, unless the Housing Authority of Little Rock secures an exception from HUD." The PHA may also seek to increase the 25% limit for any development.*

*The Housing Authority of Little Rock has determined that entering into a Housing Assistance Payments Contract for Project Based Assistance is consistent with the Annual Plan and HUD requirements of "deconcentrating poverty and expanding housing and economic opportunities."*

## **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 the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing. See Attached Documents

**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. See Attached Documents

### 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. N/A

**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.**

#### *Affordable Housing Supply*

The City of Little Rock has a population of approximately 189,000 and continues to experience a decline in its housing growth rate. Regional growth appears to be occurring outside the incorporated areas of the City, although the City retains its position as the employment center.

#### *Affordable Housing Need*

There are four factors that contribute to a need for additional affordable housing:

- (1) Many households are over-crowded;
- (2) Many households are over-burdened with housing costs;
- (3) Affordable rental housing is being lost to the market through expiring use restrictions; and
- (4) The demolition of blighted, distressed housing.

Over the past four years, over 300 units of assisted and project-based Section 8 units in the City of Little Rock have already “converted” or “opt-out” to non-assisted housing, according to the National Housing Trust. There are an additional 941 units in Little Rock where the expiring use date is pending. Thus, including previously lost and potentially lost, there are over 2,100 units already lost or in jeopardy of being lost.

2000 Census data indicate that there are approximately 19,490 households in Little Rock with annual household incomes at or below \$20,000.

#### **2000 Census Data**

<i>Total Households</i>	<b>Households</b>	<b>Average Income</b>	<b>Include</b>	<b>Extension</b>
< \$10K	8,418		100%	8,416
\$10K to \$14,999	5,261	\$ 12,500	100%	5,261
\$15K to \$24,999	11,626	\$ 20,000	50%	5,813

**Total Households with Incomes at or below \$20,000/yr** **19,490**

What can a household with annual income under \$20,000 afford at 30% of their income? **They can afford \$500 per month including utilities.** If utilities average \$80 per month, they can afford **\$420 for rent** in cases where utilities are not included in the rent. But as across America the cost of gas and electricity continues to escalate. This has added an additional burden on families below the affordability income rate.

Census data presented in the following chart show that there are approximately 11,000 units available for rent in Little Rock with monthly rents at or below \$500.

**Rental Occupied Units—2000 Census Data**

<i>Paying Gross Monthly Rent</i>	Households	Cumulative
Less than \$200	1,422	1,422
\$200 to \$299	1,235	2,657
\$300 to \$499	8,440	11,097
\$500 to \$749	14,563	
\$750 to \$999	4,063	
\$1,000 to \$1,499	1,490	
\$1,500 +	252	
No cash rent	1,360	
Median (dollars)	\$ 562	
 Rental Units below \$500	 11,097	

Based on the number of units available at rents under \$500 per month, compared with the number of households that can only afford rental costs under \$500 per month, there is a deficit of nearly 8,400 units. This assumes that all of the units for rent under \$500 per month: a) include utilities; b) are decent safe and sanitary; and c) are of adequate size for the current household. To the extent this is not the case, the deficit would be larger. This represents a gap of 43%. In other words, more than four in 10 households in Little Rock cannot obtain housing without paying more than 30% of their income and thus need more affordable housing.

Total Households with Incomes at or below \$20,000/yr	19,490
Total Units Renting at < \$500/month	11,097
Deficit of Affordable Housing Rental units	8,393

The affordability squeeze from the Supply-Demand Gap primarily affects extremely low-income households, that is, those below 30% of AMI. Nationally, there are 8.5 million households with incomes under 30% of AMI, while there are only 6.7 million units of housing available to households with incomes under 30% of AMI, leaving a national gap of 1.8 million, or 21% of the very low-income households. The gap of approximately 43% in Little Rock, therefore, far exceeds the national gap. (Source: HUD tabulations, 1999 American Housing Survey, prepared for the Millennial Housing Commission)

Are only the very low-income households experiencing a supply and demand problem? No, the supply of housing for households from 60 to 120% of AMI is shrinking in absolute terms.

How many households in Little Rock pay in excess of 30% of their income for housing? Based on 2000 census data, there are 9,750 households in Little Rock that pay in excess of 35% of their income for housing costs. This can apply to households with incomes above \$20,000 as well.

It is not only from these data, but also in the visual survey of housing conditions and in articulated perceptions that an understanding of the need for housing begins to emerge.

The City has large areas and neighborhoods showing significant decline and disinvestment. A significant number of vacant houses are in poor repair and are interspersed among other homeowner units. The recent effort to work on eradicating this has been the initiative, led in part by the Mayor of Little Rock, to form a land bank to assist in removing the blighted units and redevelop city center neighborhoods. Only a small-scale effort of selected nonprofits and limited number of for profit developers are focused on in-fill development and renewal. The infill constructed by the for-profit developer is beyond the economic limits of the low to very low

income community. The capacity level of many of the nonprofits is a hindrance to successful accomplishment of major projects.

The desire to stabilize neighborhoods while building the tax base complements the desire to increase the relative proportion of homeownership. Factors that are seen to affect the achievement of this objective beyond a general slowdown in the housing market include the unbalanced cost of new construction due to pressures on materials costs; perceptions that crime is a problem in many neighborhoods; and concerns about the quality of the LR public Schools and the school administration recent turnover.

**Community Homeless Needs:**

Little Rock and North Little Rock have targeted an end to chronic homelessness by the year 2016. The Ten Year Plan to End Chronic Homelessness clearly establish that chronic homelessness is a serious issue that must be solved through maximization of federal, state and local resources to create additional permanent housing opportunities for the chronically homeless population. This housing must be linked with supportive, mainstream, and community-based services that address the long-term needs and issues of chronically homeless individuals.

The LRHA will work diligently with local governments, CATCH and individual service provides to reach the goals established in the plan for the eradication of homelessness.

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. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

**Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies

**Strategy 2: Increase the number of affordable housing units by:**

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.

Other: (list below) Purchase Affordable Housing Units  
**Need: Specific Family Types: Families at or below 30% of median**  
**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Adopt rent policies to support and encourage work  
**Need: Specific Family Types: Families at or below 50% of median**  
**Strategy 1: Target available assistance to families at or below 50% of AMI**

Employ admissions preferences aimed at families who are working  
 Adopt rent policies to support and encourage work  
Need: Specific Family Types: The Elderly

**Strategy 1: Target available assistance to the elderly:**

Maintain designation of public housing for the elderly : NOTE: Two developments are designated for the elderly / near elderly (*Parris & Cumberland Towers*)

Apply for special-purpose vouchers targeted to the elderly, should they become available

Need: Specific Family Types: Families with Disabilities

**Strategy 1: Target available assistance to Families with Disabilities:**

Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing

Apply for special-purpose vouchers targeted to families with disabilities, should they become available

Affirmatively market to local non-profit agencies that assist families with disabilities

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Affirmatively market to races/ethnicities shown to have disproportionate housing needs

**Strategy 2: Conduct activities to affirmatively further fair housing**

Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units

Market the section 8 program to owners outside of areas of poverty /minority concentrations

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

Funding constraints

Staffing constraints

Extent to which particular housing needs are met by other organizations in the community

Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA

Influence of the housing market on PHA programs

Community priorities regarding housing assistance

Results of consultation with local or state government

Results of consultation with residents and the Resident Advisory Board

Results of consultation with advocacy groups

**10.0 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.**

This marks the first year of the 2010-2014 Five-Year Plan. LRHA's progress will be reported next year. The previous progress is noted in section 5.2 above.

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

A significant amendment or substantial deviation would be a modification that would result in changes in the fundamental program focus so it is inconsistent with LRHA's mission.

**(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).**

The PHA is in the process of developing a Corrective Action Plan (CAP) for both the PH and HCV programs. The CAP is a result of a recent HUD RIM file review.

**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.**

- Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights) **See Attached Certifications**
- Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) **See Attached Certifications**
- Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) **See Attached Certifications**
- Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only) **See Attached Certifications**
- Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only) N/A
- 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. **See document below**
- Challenged Elements **See document below**
- Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only) **See Attached CFP Documents**
- Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only) **See Attached CFP Documents**
- Form HUD 50077-SL - **See Attached Certifications**

## RAB Comments

### A. Resident Advisory Board Recommendations

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: Resident Advisory Council was supportive of all PHA proposed policies and plans. A member of the Resident Advisory Board is serving in an ex-officio capacity on the LRHA governing board. Input and comments are gathered at the highest level of the agency at the public meetings.**
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)

## Challenged Elements

No element of the LRHA's proposed five year or annual plan was challenged by any member of the general public, residents, governmental officials or elected officials.

The Authority publicly advertised the review period in the print media via the statewide newspaper on circulation.

In addition the plan and the notification was posted on the agency website [www.lrhousing.org](http://www.lrhousing.org). Agency staff informed various neighborhood associations and community groups of the plan's availability on the web.

The public hearing was held on Friday, October 9, 2009. No person attended the hearing.

LRHA is very proud of the support and understanding the citizens of Little Rock have in making certain that affordable housing is part of the fabric of this community.

**PHA Certifications of Compliance  
with PHA Plans and Related  
Regulations**

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

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

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the  5-Year and/or  Annual PHA Plan for the PHA fiscal year beginning Jan, 2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

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

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

Little Rock Housing Authority  
PHA Name

AR004  
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2010 - 2014

Annual PHA Plan for Fiscal Years 2010 - 2011

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

Name of Authorized Official	Title
<u>H. Bradley Waller</u>	<u>Board Chair</u>
Signature	Date
<u>[Signature]</u>	<u>10/14/09</u>

**Civil Rights Certification**

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

**Civil Rights Certification**

**Annual Certification and Board Resolution**

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

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

Little Rock Housing Authority

AR 004

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	H. Bradley Walker	Title	Board Chair
Signature		Date	10/14/09

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Little Rock Housing Authority

Program/Activity Receiving Federal Grant Funding

2010 Public Housing Agency Plan, including all attachments

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

100 South Arch Street, Sunset Terrace, Parris Towers, Powell Towers, Cumberland Towers, Cumberland Manor, Metropolitan Village, Homes at Granite Mountain, Madison Heights Phases I, II, and III. Any other HUD required sites.

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

Shelly Ehenger

Title

Executive Director

Signature

Date

10/10/2009

X

form HUD-50070 (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Little Rock Housing Authority

Program/Activity Receiving Federal Grant Funding

2010 Public Housing Agency Plan, including all attachments

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)

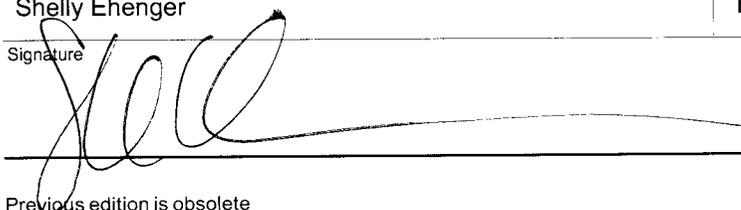
Name of Authorized Official

Shelly Ehenger

Title

Executive Director

Signature



Date (mm/dd/yyyy)

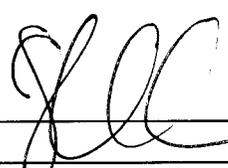
10/10/2009

## 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.)

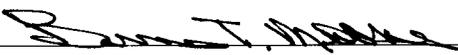
<b>1. Type of Federal Action:</b> <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Congressional District, if known: 2nd	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b> Little Rock Housing Authority 100 South Arch Street Little Rock AR, 72201  Congressional District, if known: 2nd	
<b>6. Federal Department/Agency:</b> Dept. of Housing and Urban Development	<b>7. Federal Program Name/Description:</b> CFP Program / RHF Program  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> <i>(if individual, last name, first name, MI):</i>  N/A	<b>b. Individuals Performing Services</b> <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i> N/A  	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: <u>Shelly Ehenger</u> Title: <u>Executive Director</u> Telephone No.: <u>5013404821</u> Date: <u>10/10/2009</u>	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

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

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

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

I, Bruce T. Moore the City Manager certify that the Five Year and  
Annual PHA Plan of the Little Rock Housing Authority is consistent with the Consolidated Plan of  
City of Little Rock prepared pursuant to 24 CFR Part 91.

 2 Oct 2009

Signed / Dated by Appropriate State or Local Official

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

Part I: Summary		Grant Type and Number		FFY of Grant: 2008	
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>		Capital Fund Program Grant No: AR37R00450108		FFY of Grant Approval: 2008	
Type of Grant		Reserve for Disasters/Emergencies			
<input checked="" type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: )			
<input type="checkbox"/> Performance by Development Account		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
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 <sup>4</sup>	268,054			

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

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

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

<b>Part I: Summary</b>		FFY of Grant: <b>2008</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: <b>2008</b>	
Grant Type and Number Capital Fund Program Grant No: AR37P00450108 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line		Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
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)	268,054	
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		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

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



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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: AR37P00450109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant		) )	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements	263711	
4	1410 Administration (may not exceed 10% of line 21)	131856	
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures	357280	
11	1465.1 Dwelling Equipment—Nonexpendable	237709	
12	1470 Non-dwelling Structures	116000	
13	1475 Non-dwelling Equipment	212000	
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		

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

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

<b>Part I: Summary</b>		FFY of Grant: <b>2009</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: <b>2009</b>	
Grant Type and Number Capital Fund Program Grant No: <b>AR37P00450109</b> Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Original	Total Actual Cost <sup>1</sup> Revised <sup>2</sup> Obligated Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	1318556	
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		Signature of Public Housing Director	
		Date 10/15/2009	
		Date	

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



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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AR37P00450109 Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Original	Total Estimated Cost Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
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 <sup>4</sup>	249692			

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

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

<b>Part I: Summary</b>		FFY of Grant: <b>2009</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: <b>2009</b>	
Grant Type and Number Capital Fund Program Grant No: <b>AR37P00450109</b>			
Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Actual Cost <sup>1</sup>	
Line		Original	Revised <sup>2</sup> Obligated
18a	1501 Collateralization or Debt Service paid by the PHIA		
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)	249692	
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		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

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



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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AR37R004502-09 Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
Line		Original	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
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 <sup>4</sup>	286019	

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

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

Part I: Summary		FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: 2009	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: TBDAR37R004502-09 Date of CFFP:			
Type of Grant		Total Actual Cost <sup>1</sup>	
<input checked="" type="checkbox"/> Original Annual Statement		<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 <sup>1</sup>
		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	286019	
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		Signature of Public Housing Director	
Date 10/15/2009		Date	

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



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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: TBD		FFY of Grant: 2010 FFY of Grant Approval: 2010	
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>		Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies		Total Estimated Cost Revised <sup>2</sup>	
Line		Original	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
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 <sup>4</sup>	286019			

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: 2010	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: TBD Date of CFFP:			
Type of Grant		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	
<input type="checkbox"/> Reserve for Disasters/Emergencies <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 <sup>1</sup>
		Original	Revised <sup>2</sup>
		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	286019	
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		Signature of Public Housing Director	
Date 10/15/2009		Date	



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



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

<b>Part I: Summary</b>		FFY of Grant: <b>2010</b>	
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>		FFY of Grant Approval: <b>2010</b>	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: <b>TBD</b> Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised <sup>2</sup>	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
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 <sup>4</sup>		249692

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

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

Part I: Summary		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: 2010	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: TBD Date of CFFP:			
Type of Grant		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies	
Summary by Development Account		Total Estimated Cost	
Line		Original	Revised <sup>2</sup>
		Total Actual Cost <sup>1</sup>	
		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	249692	
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		Signature of Public Housing Director	
Date 10/15/2009		Date	



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



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

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

<b>Part I: Summary</b>					
PHA Name/Number	Work Statement for Year 1 FFY 2010	Locality (City/County & State)			Revision No:
Development Number and Name	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	
A.					
AR4-001 – Sunset Terrace	180,000	100,000	180,000	100,000	
AR-9 Parris Towers	175,000		175,000		
AR4-10 Cumberland Towers	200,000		200,000		
AR4-11 Powell Towers	155,686		124,517		
AR4-18 Madison Phase I	100,000		100,000		
AR4-19 Madison Phase II	155,687	1,035,000	155,687		
AR4-20 HAGM					
TBD New Development					1,035,000
B.					
Physical Improvements	966,373	100,000	935,204		
Subtotal					
C.					
Management Improvements	168,831		200,000		100,000
D.					
PHA-Wide Non-dwelling Structures and Equipment	155,687				
E.					
Administration	131,856	131,856	131,856	131,856	131,856
F.					
Other					
G.					
Operations					
H.					
Demolition		35,204			35,204
I.					
Development		1,000,000			1,000,000
J.					
Capital Fund Financing – Debt Service					
K.					
Total CFP Funds					
L.					
Total Non-CFP Funds					
M.					
Grand Total	1,267,060	1,267,060	1,267,060	1,267,060	1,267,060



Capital Fund Program—Five-Year Action Plan

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

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

Work Statement for Year 1 FFY 2010	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	AR 4 - I / Sunset Terrace			TBD New Construction	10 Units	1,000,000
	Replace Aluminum Windows	450	180,000	Demolition	TBD	35,204
Annual Statement	AR - 9 / Parris Towers Paint Walls	5800 Square Ft.	175,000	AR - 10 / Powell Paint Walls	37,000 Square Ft.	100,000
	AR - 10 / Cumberland Towers Perimeter Fan Coil Units	237	200,000			
	AR - 18 / Madison I Replace Carpet	59 Apartments	155,686			
	AR - 19 / Madison II Replace Carpet	38 Apartments	100,000			
	AR - 20 / HAGM Build Management / Maintenance Office	1	155,687			



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

Work Statement for Year 1 FFY 2010	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	<i>AR 4 - I / Sunset Terrace</i> Replace Asphalt Shingles Replace Solid Entry Door Replace Ranges	1003 sq ft 148 73	110,000 40,000 30000	TBD New Construction  Demolition	10 Units  TBD	1,000,000  35,204
Annual Statement	AR - 9 / Parris Towers Replace Windows	308	175000	AR - 10 / Powell		100,000
	AR - 10 / Cumberland Towers Replace Elevator and Controls	2	200000			
	AR - 18 / Madison J Replace blinds and apparatuses	59	155686			







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

Part I: Summary		FFY of Grant: 2007		
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>		FFY of Grant Approval: <b>2007</b>		
Grant Type and Number Capital Fund Program Grant No: AR37P00450107 Replacement Housing Factor Grant No: Date of CFFP:				
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" type="checkbox"/> Reserve for Disasters/Emergencies				
Summary by Development Account				
Line	Original	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1				
2	252,856	252,856		
3	133,640	133,640		
4	140,569	140,569		
5				
6				
7	69,343	69,343		
8	54,865	54,865		
9	50,790	50,790		
10	553,040	553,040		
11	49,460	49,460		
12	9,899	9,899		
13	19,798	19,789		
14	13,000	15,833		
15				
16	15,431	15,431		
17	90,289	124,414		

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

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

<b>Part I: Summary</b>		FFY of Grant: <b>2007</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: <b>2007</b>	
Grant Type and Number Capital Fund Program Grant No: AR37P00450107 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Actual Cost <sup>1</sup>	
Line		Original	Revised <sup>2</sup>
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)	20,000	20,000
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,472,980	1,509,929
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		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

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

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

Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450107 CFFP (Yes/No): NO Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>PHA - WIDE</b>	Operations	1406		252,856				
	<b>Subtotal</b>	<b>1406</b>		<b>252,856</b>				
<b>PHA - WIDE</b>	Computer Software/Management	1408		10,000				
	Consultant Fees	1408		10,000				
	Resident Training	1408		9,320				
	Maintenance and Other Staff Training	1408		9,320				
	Maintenance Improvements	1408		5,000				
	Security	1408		90,000				
	<b>Subtotal</b>	<b>1408</b>		<b>133,640</b>				
<b>PHA - WIDE</b>	Technical and Non-Technical Salaries	1410		124,069				
	Travel Related to CFP	1410		10,000				
	Publications Related to CFP	1410		500				
	Telephone / Fax etc.	1410		1,000				
	Sundry (advertisements etc.)	1410		5,000				
	<b>Subtotal</b>	<b>1410</b>		<b>140,569</b>				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450107 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>PHA - WIDE</b>	Architect / Engineers Fees	1430		50,000				
	Inspection Cost	1430		14,343				
	Sundry Planning	1430		5,000				
	<b>Subtotal</b>	<b>1430</b>		<b>69,343</b>				
<b>PHA - WIDE</b>	Non-Dwelling Structures	1470		9,899				
	<b>Subtotal</b>	<b>1470</b>		<b>9,899</b>				
<b>PHA - WIDE</b>	Non-Dwelling Equipment	1475		19,798				
	<b>Subtotal</b>	<b>1475</b>		<b>19,798</b>				
<b>PHA - WIDE</b>	Relocation Costs	1495		15,431				
	<b>Subtotal</b>	<b>1495</b>		<b>15,431</b>				
<b>PHA - WIDE</b>	Contingency	1502		20,000				
	<b>Subtotal</b>	<b>1502</b>		<b>20,000</b>				
<b>PHA - WIDE</b>	Site Acquisition	1440		54,865				
	<b>Subtotal</b>	<b>1440</b>		<b>54,865</b>				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

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

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

Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450107 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>PHA - WIDE</b>	Audit	1411						
	<b>Subtotal</b>	<b>1411</b>						
<b>AR4-01</b>	Site Improvements (landscape, sidewalks, lighting, etc.)	1450		24,560				
	<b>Subtotal</b>	<b>1450</b>		<b>24,560</b>				
	Refurbish Units (bathrooms, patch, paint, heat, A/C, Kitchens, etc.)	1460	5	38,617				
	<b>Subtotal</b>	<b>1460</b>		<b>38,617</b>				
	Dwelling Equipment	1465.1		2,500				
	<b>Subtotal</b>	<b>1465.1</b>		<b>2,500</b>				
	Demolition	1485						
	<b>Subtotal</b>	<b>1485</b>						
	<b>Total AR4-01</b>			<b>65,677</b>				

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

<sup>2</sup>To be completed for the Performance and Evaluation Report.





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

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

Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450107 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AR4-06 Ives Walk	Site Improvements (landscape, sidewalks, lighting, etc.)	1450	28,741					
	<b>Subtotal</b>	<b>1450</b>	<b>28,741</b>					
	Refurbish Units (bathrooms, patch, paint, heat, A/C, Kitchens, etc.)	1460						
	<b>Subtotal</b>	<b>1460</b>						
	Dwelling Equipment	1465.1						
	<b>Subtotal</b>	<b>1465.1</b>						
	Demolition	1485						
	<b>Subtotal</b>	<b>1485</b>						
	Relocation Costs	1495	15,431					
	<b>Relocation Costs</b>	<b>1495</b>	<b>15,431</b>					
	<b>Total AR4-06</b>		<b>44,172</b>					

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.









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

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

Part III: Implementation Schedule for Capital Fund Financing Program					Federal FFY of Grant: 2007
PHA Name: Housing Authority of the City of Little Rock, Arkansas					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-WIDE 1406	06/12/2009		06/12/2011		
PHA-WIDE 1408	06/12/2009		06/12/2011		
PHA-WIDE 1410	06/12/2009		06/12/2011		
PHA-WIDE 1430	06/12/2009		06/12/2011		
PHA-WIDE 1440	06/12/2009		06/12/2011		
PHA-WIDE 1470	06/12/2009		06/12/2011		
PHA-WIDE 1475	06/12/2009		06/12/2011		
PHA-WIDE 1495	06/12/2009		06/12/2011		
PHA-WIDE 1502	06/12/2009		06/12/2011		
PHA-WIDE 1465	06/12/2009		06/12/2011		
AR4-01 1450-60	06/12/2009		06/12/2011		
AR4-03	06/12/2009		06/12/2011		
AR4-05	06/12/2009		06/12/2011		
AR4-06	06/12/2009		06/12/2011		
AR4-09 1450-60	06/12/2009		06/12/2011		
AR4-10 1450-60	06/12/2009		06/12/2011		
AR4-11 1450-60	06/12/2009		06/12/2011		

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

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

Part I: Summary		Grant Type and Number		FFY of Grant: 2007	
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>		Capital Fund Program Grant No: AR37R00450107		FFY of Grant Approval: 2007	
Type of Grant		Reserve for Disasters/Emergencies			
<input checked="" type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: <input type="checkbox"/> Performance by Development Account		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>	Expended
		Original			
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
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 <sup>4</sup>	399,374			

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

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

<b>Part I: Summary</b>		FFY of Grant: <b>2007</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas	Grant Type and Number Capital Fund Program Grant No: AR37P00450107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: <b>2007</b>	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant		Total Estimated Cost	
Line	Summary by Development Account	Original	Revised <sup>2</sup>
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)	399,374	
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		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

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



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

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: AR37P00450108 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval: 2008	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Reserve for Disasters/Emergencies Original Annual Statement and Evaluation Report for Period Ending:		Revised Annual Statement (revision no: ) Final Performance and Evaluation Report	
Line	Summary by Development Account	Original	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup> Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	150,000			
3	1408 Management Improvements	100,000			
4	1410 Administration (may not exceed 10% of line 21)	84,000			
5	1411 Audit	1,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	98,157			
8	1440 Site Acquisition	50,000			
9	1450 Site Improvement	29,000			
10	1460 Dwelling Structures	627,403			
11	1465.1 Dwelling Equipment - Nonexpendable	40,000			
12	1470 Non-dwelling Structures	5,000			
13	1475 Non-dwelling Equipment	7,500			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	10,000			
17	1499 Development Activities <sup>4</sup>				

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

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

<b>Part I: Summary</b>		FFY of Grant: <b>2008</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: <b>2008</b>	
Grant Type and Number Capital Fund Program Grant No: AR37P00450108 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Reserve for Disasters/Emergencies			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost<sup>1</sup></b>
		<b>Original</b>	<b>Obligated</b>
		<b>Revised<sup>2</sup></b>	<b>Expended</b>
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)	65,000	
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,267,060	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	50,000	
23	Amount of line 20 Related to Security - Soft Costs	45,000	
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

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

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

Part II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450108 CFFP (Yes/No): NO Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>PHA - WIDE</b>	Operations	1406		150,000				
	<b>Subtotal</b>	<b>1406</b>		<b>150,000</b>				
<b>PHA - WIDE</b>	Computer Software/Management	1408		15,000				
	Consultant Fees	1408		20,500				
	Resident Training	1408		7,500				
	Maintenance and Other Staff Training	1408		7,000				
	Maintenance Improvements	1408		5,000				
	Security	1408		45,000				
	<b>Subtotal</b>	<b>1408</b>		<b>100,000</b>				
<b>PHA - WIDE</b>	Technical and Non-Technical Salaries	1410		67,000				
	Travel Related to CFP	1410		8,000				
	Publications Related to CFP	1410		2,000				
	Telephone / Fax etc.	1410		2,000				
	Sundry (advertisements etc.)	1410		5,000				
	<b>Subtotal</b>	<b>1410</b>		<b>84,000</b>				

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

<sup>2</sup>To be completed for the Performance and Evaluation Report.

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

Part II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450108 CFFP (Yes/ No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>PHA - WIDE</b>	Architect / Engineers Fees	1430		70,000				
	Inspection Cost	1430		5,000				
	Sundry Planning	1430		23,157				
	<b>Subtotal</b>	<b>1430</b>		<b>98,157</b>				
<b>PHA - WIDE</b>	Non-Dwelling Structures	1470		5,000				
	<b>Subtotal</b>	<b>1470</b>		<b>5,000</b>				
<b>PHA - WIDE</b>	Non-Dwelling Equipment	1475		7,500				
	<b>Subtotal</b>	<b>1475</b>		<b>7,500</b>				
<b>PHA - WIDE</b>	Relocation Costs	1495		10,000				
	<b>Subtotal</b>	<b>1495</b>		<b>10,000</b>				
<b>PHA - WIDE</b>	Contingency	1502		65,000				
	<b>Subtotal</b>	<b>1502</b>		<b>65,000</b>				
<b>PHA - WIDE</b>	Site Acquisition	1440		50,000				
	<b>Subtotal</b>	<b>1440</b>		<b>50,000</b>				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report  
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Capital Fund Financing Program

Part II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: Housing Authority of the City of Little Rock, Arkansas		Grant Type and Number Capital Fund Program Grant No: AR37P00450108 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>PHA - WIDE</b>	Audit	1411		1,000				
	<b>Subtotal</b>	<b>1411</b>		<b>1,000</b>				
<b>AR4-01</b>	Site Improvements (landscape, sidewalks, lighting, etc.)	1450		15,000				
	<b>Subtotal</b>	<b>1450</b>		<b>15,000</b>				
	Refurbish Units (bathrooms, patch, paint, heat, A/C, Kitchens, etc.)	1460	15	141,850				
	<b>Subtotal</b>	<b>1460</b>		<b>141,850</b>				
	Dwelling Equipment	1465.1		10,000				
	<b>Subtotal</b>	<b>1465.1</b>		<b>10,000</b>				
	Demolition	1485						
	<b>Subtotal</b>	<b>1485</b>						
	<b>Total AR4-01</b>			<b>166,850</b>				

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Part III: Implementation Schedule for Capital Fund Financing Program							Federal FFY of Grant: 2008
PHA Name: Housing Authority of the City of Little Rock, Arkansas							Reasons for Revised Target Dates
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		Actual Obligation End Date	All Funds Expended (Quarter Ending Date)		Actual Expenditure End Date	
	Original Obligation End Date			Original Expenditure End Date			
PHA-WIDE 1406	06/12/2010			06/12/2012			
PHA-WIDE 1408	06/12/2010			06/12/2012			
PHA-WIDE 1410	06/12/2010			06/12/2012			
PHA-WIDE 1430	06/12/2010			06/12/2012			
PHA-WIDE 1440	06/12/2010			06/12/2012			
PHA-WIDE 1470	06/12/2010			06/12/2012			
PHA-WIDE 1475	06/12/2010			06/12/2012			
PHA-WIDE 1495	06/12/2010			06/12/2012			
PHA-WIDE 1502	06/12/2010			06/12/2012			
PHA-WIDE 1465	06/12/2010			06/12/2012			
AR4-01 1450-60	06/12/2010			06/12/2012			
AR4-03	06/12/2010			06/12/2012			
AR4-05	06/12/2010			06/12/2012			
AR4-06	06/12/2010			06/12/2012			
AR4-09 1450-60	06/12/2010			06/12/2012			
AR4-10 1450-60	06/12/2010			06/12/2012			
AR4-11 1450-60	06/12/2010			06/12/2012			

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

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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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		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: AR37R00450208 Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:			
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )			
Summary by Development Account		Total Estimated Cost	Total Actual Cost <sup>1</sup>
Line		Original	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
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 <sup>4</sup>	543,128	

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

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>		FFY of Grant: <b>2008</b>	
PHA Name: Housing Authority of the City of Little Rock, Arkansas		FFY of Grant Approval: <b>2008</b>	
Grant Type and Number Capital Fund Program Grant No: <b>AR37P00450208</b>			
Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Actual Cost <sup>1</sup>	
Line		Original	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)	543,128	
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		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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Part I: Summary		Grant Type and Number	FFY of Grant: <b>2010</b>				
PHA Name: <b>Housing Authority of the City of Little Rock, Arkansas</b>		Capital Fund Program Grant No: TBD	FFY of Grant Approval: <b>2010</b>				
Type of Grant		Replacement Housing Factor Grant No:					
<input checked="" type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: <input type="checkbox"/> Performance by Development Account		Date of CFFP:					
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report							
Line	Summary by Development Account	Original	Revised <sup>2</sup>	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>						
3	1408 Management Improvements	263711					
4	1410 Administration (may not exceed 10% of line 21)	131856					
5	1411 Audit	10,000					
6	1415 Liquidated Damages						
7	1430 Fees and Costs	50000					
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	462000					
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	212000					
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>	188989					

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<sup>4</sup> RHF funds shall be included here.

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2010</b>	
<b>PHA Name:</b> Housing Authority of the City of Little Rock, Arkansas	<b>Grant Type and Number</b> Capital Fund Program Grant No: TBD Replacement Housing Factor Grant No: TBD Date of CFFP:	<b>FFY of Grant Approval: 2010</b>	
<b>Type of Grant</b>		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			
<input type="checkbox"/> Reserve for Disasters/Emergencies			
<b>Summary by Development Account</b>		<b>Total Estimated Cost</b>	<b>Total Actual Cost<sup>1</sup></b>
<b>Line</b>	<b>Original</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b>
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)		1318556
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		
<b>Signature of Executive Director</b>		<b>Signature of Public Housing Director</b>	
		<b>Date 10/15/2009</b>	
		<b>Date</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
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