

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Northwest Regional Housing Authority</u> PHA Code: <u>AR010</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>12/31/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>58</u> Number of HCV units: <u>676</u>				
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	<p>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:</p> <p style="text-align: center;">STATEMENT OF PROGRESS IN MEETING THE GOALS AND MISSION OF NORTHWEST REGIONAL HOUSING AUTHORITY</p> <p>Mission: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</p> <p>Goals: Increase the availability of decent, safe, and affordable housing; improve community quality of life and economic vitality; promote self-sufficiency and asset development of families and individuals; ensure equal opportunity in housing for all.</p> <p>Actions: Northwest Regional Housing Authority continues to offer a variety of programs to the seven counties that we serve. We have received the designation of "high performer" on PHAS score for our Public Housing for the FY ended December 31, 2007. Our staff is kept up-to-date on current issues and regulations by attending DHUD sponsored meetings, as well as meetings with industry groups. Besides our Housing Choice Voucher Program and our Public Housing, the housing authority also manages seven apartment complexes. The management of these properties helps us to achieve an overall view of the housing needs in the area, and strive to alleviate affordable housing shortages.</p> <p>The Family Self-Sufficiency Program continues to assist families in reaching their goals of independence from assistance programs. Participants are involved in job skills training and pursuit of higher education, with many successfully graduating from the program. Many of these families acquire a significant sum in an escrow account while participating in the program, and these funds are used to purchase homes, cars, or pay off debts upon their successful completion. NWRHA will offer scholarships to qualifying FSS participants in the program. At this time the FSS program has more participants, who are not students, interested in the HCV Homeownership aspect of the program. The HUD student rule has affected the number of students that qualify for rental assistance.</p> <p>Capital Funds have been utilized to improve the quality of the Public Housing by Housing Authority staff. The Resident Advisory Board has been very active in planning Capital Expenditures for the next five years. Residents seem happier and better satisfied with living conditions, and vacancy rates have dropped since the Capital Fund Program has been responsively utilized including dishwashers, cabinets, exterior handrails, ramp construction, sidewalks replacement, playground upgrade, planting 20 trees, restriping parking lot and replacing office equipment.</p> <p>The Housing Authority received a grant to help fund hiring a Homeownership Coordinator for our Homeownership Program. The Housing Authority will utilize up to 25 Housing Choice Vouchers for mortgage assistance instead of rental assistance. As of this date, we have 8 Homeownership contracts in effect. Partnerships with lending institutions; USDA, Rural Development, Credit Counseling Agencies, Realtors, and other entities assist with this project. The Housing Authority administers funds from USDA, Rural Development and operates a Mutual Self-Help Housing Program, which complements the Housing Choice Voucher Homeownership Program to provide new homeowners in our region.</p> <p>The Housing Authority has not applied for any additional Housing Choice Vouchers this year as none were available. When Housing Choice Vouchers become available, the housing authority will apply.</p> <p>Northwest Regional Housing Authority applied for and has received a second grant from ADFA for HOME TBRA Tenant Based Rental Assistance to provide up to an additional 100 very low income families with rental assistance.</p>				

	<p>The housing authority advises local non-profits with their grant applications to build additional affordable rental properties targeting families, elderly and disabled populations.</p> <p>During 2010, Northwest Regional Housing Authority will continue to explore new avenues which would better serve our clients and area, to attend training on existing programs in order to better utilize funding; and give high priority to ethics and principles in the operation of the housing authority.</p>
5.2	<p>Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>The housing authority will continue to provide Housing Choice Vouchers as they become available and as funding allows. We are also using HOME TBRA (tenant based rental assistance) to assist as many families as funding allows. We have instituted direct deposit of funds for landlords in order to make the program more appealing. The Homeownership program allows the housing authority to use vouchers for assisting eligible families with mortgage payments based on their income.</p> <p>NWRHA continues to advise other non-profit agencies with finding funding to build more affordable housing for families, elderly and disabled.</p> <p>The housing authority administers the Self-Help Housing Program funded by Rural Development to assist in building affordable homes for families to purchase.</p> <p>Locust Heights currently has 58 public housing units. This is a multifamily project with 20 – one bedroom units, 4-one bedroom handicap units, 20 – two bedroom units, 12 – three bedroom units, and 2 – four bedroom units. The one bedroom are designated from elderly, handicapped, and disabled. We are located within walking distance of the school, local grocery store, and Tyson Foods. It is our goal to help as many families as possible with their housing needs, over the past 10 years we have only raised the flat rent one time. It is a priority to keep public housing affordable. We have utilized the capital fund program responsibly. During the resident meeting for the 2010 annual plan, the residents expressed their satisfaction with how the Housing Authority has spent the capital fund monies. Very few suggestions were made on how to spend the next round of funds.</p>
6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (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) 5.1, 5.2, 6.0, 8.0, 8.1, 8.2, 9.0, 9.1, 10.0 (b) Northwest Regional Housing Authority (Administrative Office) 114 Sisco Ave, Harrison, AR 72601 Locust Heights Apartments (Public Housing) 612 East Freeman, Berryville, AR 72616</p>
	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>NWRHA HCV Homeownership program offers voucher holders the opportunity to use HCV Hap payments as partial mortgage Payments. Application to the HCV Homeownership Program is subject to NWRHA and HUD pre-qualification criteria. Homeowners must comply with NWRHA, HUD and mortgage lending institution rules and regulations to ensure continuous and proper subsidy of the home loan.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>

9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>The housing authority is in desperate need of funding to be able to fill the vouchers it already has. The funding for this year and the Net Restricted Assets (NRA) will not be enough to fund all of the 676 vouchers we are assigned. The waiting list for assistance is over one year and with the economy we have had a large increase in the number of applications for assistance. The families needing assistance will have no place to live, many will be homeless. These are families with children, elderly and disabled. Quality units are available in the price range for assisted units.</p> <p>Locust Heights currently has 58 public housing units. This is a multifamily project with 20 – one bedroom units, 4-one bedroom handicap units, 20 – two bedroom units, 12 – three bedroom units, and 2 – four bedroom units. The one bedroom are designated from elderly, handicapped, and disabled. We are located within walking distance of the school, local grocery store, and Tyson Foods. It is our goal to help as many families as possible with their housing needs, over the past 10 years we have only raised the flat rent one time. It is a priority to keep public housing affordable. We have utilized the capital fund program responsibly. During the resident meeting for the 2010 annual plan, the residents expressed their satisfaction with how the Housing Authority has spent the capital fund monies. Very few suggestions were made on how to spend the next round of funds.</p>
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9.1	<p>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.</p> <p>The housing authority will continue to provide Housing Choice Vouchers as they become available and as funding allows. We are also using HOME TBRA (tenant based rental assistance) to assist as many families as funding allows. We have instituted direct deposit of funds for landlords in order to make the program more appealing. The Homeownership program allows the housing authority to use vouchers for assisting eligible families with mortgage payments based on their income.</p> <p>NWRHA continues to advise other non-profit agencies with finding funding to build more affordable housing for families, elderly and disabled.</p> <p>The housing authority administers the Self-Help Housing Program funded by Rural Development to assist in building affordable homes for families to purchase.</p> <p>Northwest Regional Housing Authority has established and operated for 5 years a housing counseling program to assist in offering residents of north central Arkansas the opportunity of homeownership.</p> <p>Northwest Regional Housing Authority counselors and staff adhere to national industry standards for homeownership education and counseling, in addition to a code of ethics regarding the mission, philosophy and delivery of homeownership classes and counseling.</p> <p>HUD certified housing and homeownership counseling is not offered by any organization located in north central Arkansas, and renters, potential homebuyers, homebuyers, and homeowners may attend homeownership classes thus increasing their knowledge in loan products, credit management, budgeting, home maintenance and assistance with avoiding foreclosure.</p>
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10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>(a) The housing authority will continue to provide Housing Choice Vouchers as they become available and as funding allows. We are also using HOME TBRA (tenant based rental assistance) to assist as many families as funding allows. We have instituted direct deposit of funds for landlords in order to make the program more appealing. The Homeownership program allows the housing authority to use vouchers for assisting eligible families with mortgage payments based on their income. NWRHA continues to advise other non-profit agencies with finding funding to build more affordable housing for families, elderly and disabled. The housing authority administers the Self-Help Housing Program funded by Rural Development to assist in building affordable homes for families to purchase.</p> <p>Northwest Regional Housing Authority has established and operated for 5 years a housing counseling program to assist in offering residents of north central Arkansas the opportunity of homeownership.</p> <p>Northwest Regional Housing Authority counselors and staff adhere to national industry standards for homeownership education and counseling, in addition to a code of ethics regarding the mission, philosophy and delivery of homeownership classes and counseling.</p> <p>HUD certified housing and homeownership counseling is not offered by any organization located in north central Arkansas, and renters, potential homebuyers, homebuyers, and homeowners may attend homeownership classes thus increasing their knowledge in loan products, credit management, budgeting, home maintenance and assistance with avoiding foreclosure.</p> <p>(b) NONE</p>
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11.0	<p>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.</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)</p>
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

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

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

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

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

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

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

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

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

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

Part I: Summary		
PHA Name: Northwest Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37P01050106 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2006 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/2007 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	10,000	6,229		0
3	1408 Management Improvements	5,000	1,000		0
4	1410 Administration (may not exceed 10% of line 21)	13,000	7,800	8,447	8,447
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,500	5,000	9,850	9,850
8	1440 Site Acquisition				
9	1450 Site Improvement	19,155	25,129	24,307	24,307
10	1460 Dwelling Structures	25,000	23,000	33,848	33,848
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	20,000	8,000	840	840
13	1475 Non-dwelling Equipment	10,000	5,000	3,866	3,866
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary						
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37P01050106 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2006 FFY of Grant Approval:	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2007/				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	109,655	81,158	81,158	81,158	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date 8/28/2009		Signature of Public Housing Director		
				Date 08/28/2009		

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Northwest Regional Housing Authority			Grant Type and Number Capital Fund Program Grant No: AR37P01050106 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		10,000	6,229	0	0	0
"	Management Improvements	1408		5,000	1,000	0	0	0
"	Technical Salaries	1410 02		10,000	7,100	8,447	8,447	100%
"	Employee Benefits	1410 09		1,000	700	0	0	0
"	Travel/Training	1410 10		1,000	0	0	0	0
"	Advestising/Sundry	1410 19		1,000	0	0	0	0
"	Fee & Costs Outside Contractors	1430		7,500	5,000	9,850	9,850	100%
"	Landscaping	1450 01		5,000	4,000	12,607	12,607	100%
"	Construct Patios	1450 02		10,155	9,129	0	0	0
"	Parking Lot	1450 03		4,000	12,000	11,700	11,700	100%
"	Screens on Gutters	1460 01		1,000	1,000	0	0	0
"	Emergency Alarm System	1460 02		10,000	10,000	0	0	0
"	Replace Bath Vanities (10 units)	1460 03		10,000	10,000	23,298	23,298	100%
"	Exterior Doors	1460 04		4,000	2,000	4,094	4,094	100%
"	Install Dishwashers	1460 06				6,456	6,456	100%
"	Remodel Office	1470		20,000	8,000	840	840	100%
"	Refurnish Office	1475		10,000	5,000	3,866	3,866	100%

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary	
PHA Name: Northwest Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37P01050207 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2007 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/07 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	10,000	10,000		
3	1408 Management Improvements	5,000	5,000		
4	1410 Administration (may not exceed 10% of line 21)	13,000	13,000	8,750	8,750
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,500	7,500	1,250	1,250
8	1440 Site Acquisition				
9	1450 Site Improvement	18,000	8,000		
10	1460 Dwelling Structures	26,155	26,155	78,243	78,243
11	1465.1 Dwelling Equipment—Nonexpendable		1,000		
12	1470 Non-dwelling Structures	20,000	10,000		
13	1475 Non-dwelling Equipment	10,000	7,588		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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

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

Part I: Summary						
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37P01050207 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2007 FFY of Grant Approval:	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/07				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	109,655	88,243	88,243	88,243	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director			Date 8/28/2009	Signature of Public Housing Director		
				Date 8/28/2009		

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Northwest Regional Housing Authority			Grant Type and Number Capital Fund Program Grant No: AR37P01050207 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		10,000	10,000			
"	Management Improvements	1408		5,000	5,000			
"	Technical Salaries	1410 02		10,000	10,000	8,750	8,750	100%
"	Employee Benefits	1410 09		1,000	1,000			
"	Travel/Training	1410 10		1,000	1,000			
"	Advertising/Sundry	1410 19		1,000	1,000			
"	A & E Cost	1430		7,500	7,500	1,250	1,250	100%
"	Seal Parking Lot	1450 01		6,000	2,000			
"	Stripe Parking Lot	1450 02		2,000	1,000			
"	Motion Sensor Ext Lights	1450 03		10,000	5,000			
"	Interior Electric Upgrade	1460 01		15,000	15,000			
"	Replace Interior Doors	1460 02		6,000	6,000			
"	Window Blinds	1460 03		5,155	5,155			
"	Replace Storm Doors	1460 05				41,673	41,673	100%
"	Install Dishwashers	1460 06				36,570	36,570	100%
"	Replace Appliances	1465 01		1,000	1,000			
"	Remodel Community Room	1470		20,000	10,000			
"	Replace Community Room Equipment	1475		10,000	7,588			

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary		
PHA Name: Northwest Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37P01050108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
 Performance and Evaluation Report for Period Ending: 06/30/08 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	3,644		3,644	3,644
3	1408 Management Improvements	1,000			
4	1410 Administration (may not exceed 10% of line 21)	9,356		9,356	9,356
5	1411 Audit	1,000			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	16,800		25,418.79	25,418.79
10	1460 Dwelling Structures	40,759		37,589.50	37,589.50
11	1465.1 Dwelling Equipment—Nonexpendable	1,000		1,559.97	1,559.97
12	1470 Non-dwelling Structures	5,000		294.88	294.88
13	1475 Non-dwelling Equipment	5,000		653.98	653.98
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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

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

Part I: Summary						
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37P01050108 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2008 FFY of Grant Approval:	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/08				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	93,559.00		78,517.12	78,517.12	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director			Date 8/28/2009	Signature of Public Housing Director		
				Date 8/28/2009		

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Northwest Regional Housing Authority			Grant Type and Number Capital Fund Program Grant No: AR37P01050108 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406		3,644		3,644	3,644	100%
"	Management Improvements	1408		1,000				
"	Technical Salaries	1410 02		7,356		9,356	9,356	100%
"	Employee Benefits	1410 09		1,000				
"	Travel/Training	1410 10		500				
"	Advertising/Sundry	1410 19		500				
"	Audit	1411		1,000				
"	Fees & Costs, Outside Contractors	1430		10,000				
"	Energy Efficiency, Light Bulbs	1450 01		4,800	800			
"	Trim Trees & Landscaping	1450 02		3,000		12,096	12,096	100%
"	Motion Sensor Lights	1450 03		5,000	1,000			
"	Power Wash Building	1450 04		4,000				
"	Carpet/Ceramic Tiles	1460 01		40,759	25,000			
"	Dwelling Equipment-Non Expendable	1465.1		1,000		1,559.97	1,559.97	100%
"	Storage Building	1470 01		5,000	3,000			
"	Remodel Community Room	1475 01		5,000	4,000			
"	Office Furniture & Equipment	1475 02		0	1,000	653.98	653.98	100%

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary		
PHA Name: Northwest Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37S010501-09 ARRA Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/08 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,500		3333.50	3333.50
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	110,927		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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

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

Part I: Summary						
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37S010501-09 ARRA Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval:	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	118,427		3333.50	3333.50	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director			Date 8/28/2009	Signature of Public Housing Director		
				Date 8/28/2009		

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary	
PHA Name: Northwest Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37P01050109 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2009 FFY of Grant Approval:	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	13,000			
3	1408 Management Improvements	5,000			
4	1410 Administration (may not exceed 10% of line 21)	10,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	30,000			
10	1460 Dwelling Structures	19,155			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	25,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary						
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37P01050109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval:	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	109,655				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date 8/28/2009		Signature of Public Housing Director		
				Date 8/28/2009		

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37P01050109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operation	1406		13,000				
"	Management Improvement	1408		5,000				
"	Tenhnical Salaries	1410 02		7,000				
"	Employee Benefits	1410 09		1,000				
"	Travel/Training	1410 10		1,000				
"	Advertising/Sundry	1410 19		1,000				
"	Fees & Costs, Outside Contractor	1430		7,500				
"	Fence Toddler Area	1450 01		5,000				
"	Outside Security	1450 02		5,000				
"	Security System	1450 03		20,000				
"	Remodel Kitchens (10)	1460 01		10,000				
"	Bath Vanities (10)	1460 02		9,155				
"	Replace PHA Van	1475		25,000				

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary	
PHA Name: Northwest Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: AR37P01050110 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2010 FFY of Grant Approval:	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	13,000			
3	1408 Management Improvements	5,000			
4	1410 Administration (may not exceed 10% of line 21)	10,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000			
10	1460 Dwelling Structures	20,000			
11	1465.1 Dwelling Equipment—Nonexpendable	2,000			
12	1470 Non-dwelling Structures	19,655			
13	1475 Non-dwelling Equipment	20,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary						
PHA Name: Northwest Regional Housing Authority		Grant Type and Number Capital Fund Program Grant No: AR37P01050110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010 FFY of Grant Approval:	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	109,655				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director			Date 08/28/2009		Signature of Public Housing Director	
					Date 08/28/2009	

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Northwest Regional Housing Authority			Grant Type and Number Capital Fund Program Grant No: AR37P01050110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operation	1406		13,000				
"	Management Improvement	1408		5,000				
"	Technical Salaries	1410 02		7,000				
"	Employee Benefits	1410 09		1,000				
"	Travel/Training	1410 10		1,000				
"	Advertising/Sundry	1410 19		1,000				
"	Fees & Costs, Outside Contractors	1430		10,000				
"	Replace Sidewalks	1450 01		5,000				
"	Curb Ramps	1450 02		5,000				
"	Remodel Kitchens	1460 01		20,000				
"	Fire Extinguishers	1465.1		2,000				
"	Maintenance Shop	1470		19,655				
"	Maintenance Equipment	1475		20,000				

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

² To be completed for the Performance and Evaluation Report.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number		Locality (City/County & State)			<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B.	Physical Improvements Subtotal	Annual Statement	5,000	7,000	5,000	5,000
C.	Management Improvements		5,000	5,000	5,000	5,000
D.	PHA-Wide Non-dwelling Structures and Equipment		25,000	38,000	25,000	25,000
E.	Administration		13,000	10,000	10,000	10,000
F.	Other		32,000	20,000	40,000	40,000
G.	Operations		10,000	10,000	10,000	10,000
H.	Demolition					
I.	Development		10,000	10,000	5,000	5,000
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		100,000	100,000	100,000	100,000

Part I: Summary (Continuation)						
PHA Name/Number		Locality (City/county & State)			<input type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
		Annual Statement				
	PHA Wide		100,000	100,000	100,000	100,000

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____			Work Statement for Year: _____ FFY _____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See						
Annual						
Statement						
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____			Work Statement for Year: _____ FFY _____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See						
Annual						
Statement						
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

