

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**

1.0	PHA Information PHA Name: _____ Housing Authority of the City of Atkins _____ PHA Code: AR141 _____ PHA Type: <input checked="" 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): 09/30/2010 _____					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 26 _____ Number of HCV units: _____					
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>The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</p> <p>The PHA's mission is: At all times develop and operate each development solely for the purpose of providing decent, safe and sanitary housing for eligible families in a manner that promotes serviceability, economy efficiency and stability of the developments, and the economic and social well-being of residents.</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>Increase the availability of decent, safe and affordable housing. Reduce public housing vacancies. Improve the quality of assisted housing. Increase customer satisfaction. Ensure equal opportunity and affirmatively further fair housing. Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability.</p> <p>The PHA feels it has met its goals and objectives for the previous 5-year plan. We feel we have improved the quality of our housing stock.</p>					

	<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: None (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. Atkins Housing Authority, 301 Avenue 5 NW, Atkins, AR 72823</p> <p>Waiting list are community wide and any person interested in applying for admission to Public Housing may apply at office located at 301 Avenue 5 NW, Atkins, AR 72823</p> <p>Financial Resources:</p> <table border="0"> <tr> <td>1. PHA Operating Fund</td> <td>\$73,296.0</td> </tr> <tr> <td>2. 2009 CFG</td> <td>\$ 37,655.00</td> </tr> <tr> <td>3. PHA Rental Income</td> <td>\$51,396.00</td> </tr> <tr> <td>TOTAL RESOURCES</td> <td>\$162,347.00</td> </tr> </table> <p>6.0 Rent Determination: (Same as last plan)</p> <p>Operation and Management: (Same as last plan)</p> <p>Grievance Procedures: (Same as last plan)</p> <p>Community Service: (Same as last plan)</p> <p>Safety and Crime Prevention: (Same as last plan)</p> <p>PHA Pet Policy: (Same as last plan)</p> <p>Civil Rights Certification: (Included)</p> <p>Fiscal Year Audit: (Significant Deficiencies, External Financial Reporting)</p> <p>Asset Management: (N/A)</p> <p>Violence Against Woman Act: (Included)</p>	1. PHA Operating Fund	\$73,296.0	2. 2009 CFG	\$ 37,655.00	3. PHA Rental Income	\$51,396.00	TOTAL RESOURCES	\$162,347.00
1. PHA Operating Fund	\$73,296.0								
2. 2009 CFG	\$ 37,655.00								
3. PHA Rental Income	\$51,396.00								
TOTAL RESOURCES	\$162,347.00								
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p>								
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>								
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>								
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>								
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>								

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.

Housing Needs of Families on PHA waiting list:

Waiting List Total: 22

Extremely low income: 22

Families with children: 8

9.0 Bedroom Size:

1 BR 10

2BR 11

3BR 1

Strategy: (Same as in last plan)

Progress in Meeting Mission and Goals:

PHA feels it is meeting its Mission and Goals in providing safe, decent and affordable housing, also in improving the quality of our housing.

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.**
(Same as last plan)

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

(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.

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

A.. Substantial Deviation from the five year plan

The Atkins Housing Authority will consider the following to be changes in its agency plan necessary and sufficient to require a full review by resident advisory board before a corresponding changes in the agency plan can be adopted.

10.0

1. Any alteration of the PHA's mission statement
2. Any change or amendment to a strategic goal
3. Any change or amendment to a stated strategic objective except in case where the changes result's from the objective having been met.
4. Any introduction of new strategic goal or new strategic objective
5. Any alteration in the Capital Fund Program that affects an expenditure greater than twenty percent of CFG annual budget for that year in defining the above the Housing Authority intends by "Strategic Goal and Strategic Objective" specifically those items will be considered "substantial deviation" from plan. Furthermore, the PHA considers the following changes to require a public process before amending said changes and that these items are "significant amendments or modifications" to the agency plan.

B. Significant Amendment or modification to the annual plan

1. Change to rent or admissions policies or organization of the waiting list
2. Additions on on-emergency work items (items not to included in current annual statement of 5-year action plan) or change in use of replacement reserve funds under the capital fund.
3. Any change with regard to demolition, designation, home ownership program or conversion activities. An exception of this definition will be made for any of the above that are adopted to reflect change in HUD regulatory requirements such change will not be considered significant amendments by HUD

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: Housing Authority of the City of Atkins (AR141)		Grant Type and Number Capital Fund Program Grant No: AR37P14150110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	3766.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	6050.00			
10	1460 Dwelling Structures	20156.00			
11	1465.1 Dwelling Equipment—Nonexpendable	5833.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	850.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	37655.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	17400.00			
Signature of Executive Director Sue Bice <i>Sue Bice</i>		Date 4-27-10	Signature of Public Housing Director		Date

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

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Akins (AR141)			Grant Type and Number Capital Fund Program Grant No: AR37P14150110 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	
Ehemann-141	Cut tree	1450	1	50.00				
Town Hill-141	Replace chain link fence with 6' wooden fence 290ft.	1450	1	6000.00				
Town Hill-141	Replace 12 commodes with water saving, handicapped height ones, replace all supply lines both bathro and kitchen, replace all shut off valves, install new flanges on all commodes and labor to install.	1460	12	6356.00				
TownHill-141	Replace 11 back screen doors	1460	11	3300.00				
Ehemann-141	Replace 14 entry doors on front of units.	1460	14	10500.00				
PHA-Wide	Purchase new hot water heaters, refrigerator, stoves	1465.1	6	5833.00				
PHA-Wide	Purchase Flammable liquid storage cabinet for gas/paint	1475	1	850.00				
PHA-Wide	Fee- Environmental review for 5 year plan	1430		1000.00				
PHA-Wide	Administration	1410		3766.00				

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2001

Part I: Summary						
PHA Name/Number Housing Authority of the City of Atkins (AR141)			Locality (City/County & State) Atkins, Pope, AR		X <input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY_2011_____	Work Statement for Year 3 FFY_2012_____	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY_2014_____
B.	Physical Improvements Subtotal	Annual Statement	12789.00	28889.00	33889.00	33889.00
C.	Management Improvements		4500.00			
D.	PHA-Wide Non-dwelling Structures and Equipment		16600.00	5000.00		
E.	Administration		3766.00	3766.00	3766.00	3766.00
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		37655.00	37655.00	37655.00	37655.00

Capital Fund Program—Five-Year Action Plan

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Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year <u>2011</u> FFY 2011			Work Statement for Year: <u>2012</u> 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	PHA-Wide-141, purchase wood storage buildings, 20x30, purchase 8-30x71 round tables for com ro 1470		16600.00	Ehemann-141 Replace kitchen sinks and supply lines for kitchen/baths 1460		3586.00
Annual	PHA-Wide 141 Purchase new computer, printer for office 1408		4500.00	Ehemann-141 Replace kitchen counter tops, approx. 18' per unit 1460		5200.00
Statement	PHA-Wide 141 Purchase hot water heaters, refrigerators, stoves 1465.1		6389.00	Town Hill-141 Replace lower kitchen cabinets in 4 units—6 cabinets per unit 1460		10000.00
	PHA-Wide Administration 1410		3766.00	Town Hill- 141 Replace kitchen sinks 1460		3000.00
	Town Hill-Ehemann 141 New light fixtures , new ceiling fans 1460		6400.00	Town Hill-141 Replace counter tops , approx. 18' per unit 1460		5000.00
				PHA-Wide Purchase stoves, refrigerators 1465.1		2103.00
				PHA-Wide New riding lawn mower 1475		5000.00
				PHA-Wide Administration 1410		3766.00

Capital Fund Program—Five-Year Action Plan

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Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year <u>2013</u> FFY 2013			Work Statement for Year: <u>2014</u> 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	Ehemann-141 Replace closet doors, approx. 38 doors in 14 units 1460		3800.00	Ehemann-141 Re-roof 7 buildings 1460		25000.00
Annual	Town Hill-141 Replace closet doors in 12 units, approx 76 doors --1460		7600.00	Town Hill-141 Replace floorings in 2 units 1460		8789.00
Statement	Town Hill-141 Re-roof 6 buildings-1460		20000.00	Town Hill- 141 Cut tree 1450		50.00
	Ehemann- 141 Cut tree 1450		50.00	PHA-Wide Refrigerators 1465.1		50.00
	PHA-Wide Purchase hot-water heaters 1465.1		2439.00	PHA-Wide Administration 1410		3766.00
	PHA-Wide Administration 1410		3766.00			

