

<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: <u>ALBANY HOUSING AUTHORITY</u> PHA Code: <u>GA23</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/01/2010</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>1117</u> Number of HCV units: <u>61</u>				
<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.)				
	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:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<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: To professionally serve the city of Albany by providing eligible families with quality, affordable housing; assisting residents in becoming economically and socially self-sufficient through community resources and services; and maintaining the properties according to industry standards				
<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. <ol style="list-style-type: none"> <li>1. To expand the supply of assisted housing by applying for additional rental vouchers; reduce public housing vacancies; leverage private or other public funds to create additional housing opportunities and to acquire or build units or developments.</li> <li>2. To improve the quality of assisted housing with increased customer satisfaction and to renovate or modernize public housing units.</li> <li>3. To provide an improved living environment by implementing measures to deconcentrate poverty that may include replacing older dense properties.</li> <li>4. To promote self-sufficiency and asset development of assisted households by increasing the number and percentage of employed persons in assisted families; providing or attracting supportive services to improve assistance recipients' employability and providing or attracting supportive services to increase independence for the elderly or families with disabilities.</li> <li>5. To ensure equal opportunity and affirmatively further fair housing through providing access to assisted housing and suitable living environment regardless of race, color, religion, national origin, sex, familial status; and to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.</li> </ol> <p>For a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-year plan, see section 10.0</p>				
<b>6.0</b>	<b>PHA Plan Update</b> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: There have been no revisions to the PHA Plan elements since our last Annual Plan submission in 2009.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. Copies of the 5-Year and Annual PHA Plan are located at the central office at 521 Pine Avenue and at 716 Society Avenue; 921 Cherry Avenue; 401 Flint Avenue; 630 Tulsa Land and 526 Landings Lane, Albany, GA or downloading from the website at <a href="http://www.albanyhousingauthority.com">www.albanyhousingauthority.com</a></p> <p>For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p>				

7.0	<p><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></p> <ol style="list-style-type: none"> <li>Hope VI or Mixed Finance Modernization or Development . The Albany Housing Authority may apply for financing.</li> <li>Demolition and/or Disposition. The Albany Housing Authority applied for and was granted approval to demolish two buildings consisting of eight units located in GA023000001 AMP 1 McIntosh. Sealed bids were received and the contract was awarded with a start date of February 22, 2010.</li> </ol> <p>Additionally, the Albany Housing Authority is planning to apply for demolition of the 125 unit McIntosh Homes, the public housing development previously referred to as GA 23-3. This development was initially constructed in 1952. The application for demolition will be submitted in 2011 with actual demolition not expected to begin until on or after September 30, 2011.</p> <ol style="list-style-type: none"> <li>Conversion of Public Housing. The Albany Housing Authority has no plans in this area.</li> <li>Homeownership Programs. The Albany Housing Authority has no plans in this area.</li> <li>Project-based vouchers. The Albany Housing Authority has no plans in this area.</li> </ol>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><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. See attached</p>
8.2	<p><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. See attached.</p>
8.3	<p><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.</p>
9.0	<p><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.</p> <p>The Consolidated plan indicated that 26% of families with housing needs are 30% below the average median income for Dougherty county; 26% of families are more than 30% of median income but less than 50% of the average median income; 33% of families needing affording housing are more than 50% of the average median income but less than 80% of median income with 15% of the elderly needing affordable housing.</p> <p>For all family types, affordability, and quality present the major problems to acquiring housing; size is second followed by supply, accessibility and location. The greatest obstacles indentified by families with disabilities are affordability, supply and accessibility.</p>
9.1	<p><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></p> <p>The AHA will continue to provide quality housing to our residents; will continue to keep units leased; will continue to keep turnover rates low and will continue to keep our properties in good repair. The AHA is currently managing 230 units of city owned property that will house families in the jurisdiction as well as families on the PHA's waiting list.</p>

<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>Goal: Expand the supply of assisted housing. Because HUD has not provided funding for new public housing units or for additional vouchers, we have not been able to utilize these traditional sources to expand the supply of assisted housing. We have worked with a local non profit entity to construct 28 units of assisted housing for the elderly and construction has begun on an additional 24 units, and as mentioned above in 9.1, we are currently managing 230 city owned properties for income eligible residents. We have also been diligent in reducing vacancies of our existing public housing and have consistently maintained a vacancy rate during 2009 below 3%.</p> <p>Goal: Improve the quality of assisted housing. Through the use of Capital Fund Grants, we are continually improving the quality of our housing stock. Significant improvements include: the installation of air conditioning leaving only three developments remaining without air conditioning; the installation of energy efficient windows in several developments and replacing interior doors.</p> <p>Goal: Provide an improved living environment. With the demolition of two buildings in GA023000001 AMP1 McIntosh, we will reduce the density and improve the appearance of the property and provide a safer environment. Only residents and their guests will be permitted to enter the complex through controlled gates. Parking will be available to residents within the complex.</p> <p>Goal: Promote self-sufficiency and asset development of assisted households. Partially as a result of our preference for applicants who are working, 44% of our non-elderly families report employment income as their major source of income. Only 1% of our families rely on TANF (welfare) as their primary source of income. We have partnered with the Council on Aging to bring a meals program to our elderly residents. Meals are served on the second level of our administrative offices and transportation is provided to our tenants to and from their residence.</p> <p>Goal: Ensure equal opportunity and affirmatively further fair housing. We continue to operate our housing program in a manner that promotes access to housing regardless of race, disability, color, religion, national origin, sex, or familial status.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b><u>Definition for Substantial Deviation and Significant Amendment or Modification</u></b></p> <ol style="list-style-type: none"> <li>1. A change to a development account number on the capital fund program in excess of the greater of 10% of the grant amount or \$100,000.</li> <li>2. A change in the selection preferences for admission.</li> </ol>
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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)</p>
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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>				<b>FFY of Grant: 2010</b>	
<b>PHA Name: Albany Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: GA06P02350110 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant Approval:</b>	
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 <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	209,485			
3	1408 Management Improvements	70,000			
4	1410 Administration (may not exceed 10% of line 21)	156,020			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	101,624			
8	1440 Site Acquisition				
9	1450 Site Improvement	153,000			
10	1460 Dwelling Structures	801,571			
11	1465.1 Dwelling Equipment—Nonexpendable	63,000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	5,507			
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

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: 2010		FFY of Grant Approval:	
PHA Name: Albany Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P02350110 Replacement Housing Factor Grant No: Date of CFFP:			
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 <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)	1,560,207			
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	520,571			
Signature of Executive Director		Date		Signature of Public Housing Director	
		6/22/10			

<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

Part II: Supporting Pages		Grant Type and Number			Federal FFY of Grant: 2010			
PHA Name: Albany Housing Authority		Capital Fund Program Grant No: GA06P02350110 CFFP (Yes/ 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>	
GA023000001	Bathroom remodeling, low flow toilets at 23-3	1460	30	50,000				
McIntosh	Replace water heaters at 23-3	1460	75	43,750				
GA023000002	Site Improvements at 23-4	1450	125	150,000				
Holley	Add AC at 23-4	1460	40	250,000				
	Replace exterior doors	1460	40	17,100				
GA023000003	Replace doors at 23-10	1460	75	75,000				
Hudson Malone	Replace toilets with high profile, low flow at 23-10	1460	50	19,000				
GA023000004	Replace interior & exterior doors ar 23-8	1460	40	20,000				
Dennis	Replace windows at 23-8	1460	40	130,242				
	Replace ranges and refrigerators at 23-9	1465.1	31	24,000				
	Replace windows at 23-13	1460	4	8,000				
	Replace ranges and refrigerators at 23-17	1465.1	29	21,750				
	Replace water heaters at 23-17	1460	29	10,150				

<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.

<b>Part II: Supporting Pages</b>								
PHA Name: Albany Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P02350110 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
GA023000005	Replace exterior doors at 23-11	1460	75	75,000				
	Replace kitchen cabinets at 23-14	1460	30	60,000				
	Replace water heaters at 23-16	1460	23	9,329				
	Replace ranges and refrigerators 23-16	1465.1	23	17,250				
			23					
GA023000006	Trim and remove trees at 23-21	1450	40	3,000				
	Repair and/or replace exterior lighting at 23-21	1460	40	9,000				
PHA Wide	Staff training and travel	1408		20,000				
	Computer equipment and software	1408		30,000				
	Maintenance vehicle	1408		20,000				
	Administration	1410		156,020				
	Architectural fees	1430		48,155				
	Inspection costs	1430		53,469				
	Replace floor tile	1460		25,000				
	Community room equipment	1475		5,507				
	Operations	1406		209,485				
	<b>TOTAL ESTIMATED COST</b>			<b>1,560,207</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.

**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		Locality: Albany/Dougherty, Georgia			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name Albany Housing Authority <b>GA023000001 MnIntosh GA023000002 - Holley GA023000003 – Hudson Malone GA023000004 - Dennis GA023000005-Lipsev GA023000006-Ashley Riverside</b>	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	819,350	914,329	909,329	930,329
C.	Management Improvements		70,000	70,000	70,000	70,000
D.	PHA-Wide Non-dwelling Structures and Equipment		30,000	10,507	5,507	5,507
E.	Administration		156,381	156,381	156,381	156,381
F.	Other (fees & costs, site improvement)		274,991	504,505	189,505	188,505
G.	Operations		209,485	209,485	209,485	209,485
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		1,560,207	1,560,207	1,560,207	1,560,207

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2011</u> FFY _____			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	23-1 Thronateeska – replace water heaters	32	14,000	23-1 Thronateeska replace interior doors	32	40,000
Annual	23-1 Thronateeska Resurface parking lots		10,000	23-1 Thronateeska replace exterior doors	32	20,000
Statement	23-2 O.B Hines replace interior doors	56	56,000	23-1 Thronateeska replace resilient flooring	32	40,000
	23-3 McIntosh replace interior doors	10	10,000	23-3 McIntosh bathroom remodeling low flow toilets	25	25,000
	23-3 McIntosh bathroom remodeling low flow toilets	30	25,000	23-3 McIntosh replace resilient flooring	25	10,000
	23-3 McIntosh Add AC	125	249,750			
	23-3 McIntosh replace water heaters	125	45,000	23-3 McIntosh replace windows	125	200,000
	23-4 Holley replace resilient flooring	30	10,000	23-4 Holley Add AC	50	237,329
	23-6 William Binns replace resilient flooring	25	10,000	23-4 Holley replace resilient flooring	30	10,000
	23-7 Golden Age replace bath fixtures low flow toilets	47	25,000	23-4 Holley replace windows	125	250,000
	23-7 Golden Age replace interior doors	66	39,600	23-6 William Binns replace resilient flooring	25	10,000
	23-7 Golden Age replace roofs	66	32,000			
	23-7 Golden Age replace windows	66	20,000			
	23-10 Hudson Malone replace windows		42,500			

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

Work Statement for Year 1 FFY <u>2010</u>	Development Number/Name	Quantity	Estimated Cost	Development Number/Name	Quantity	Estimated Cost
See	23-10 Hudson Malone ranges and refrigerators		21,250	23-13 Grover remodel bathrooms		32,000
Annual	23-10 Hudson Malone replace carpet		20,000	23-11 Lipsey site improvement		30,000
Statement	23-8 Dennis replace resilient flooring		54,000			
	23-9 Holman replace floor tile		10,000			
	23-13 Grover replace flooring		8,000			
	23-11 Lipsey replace flooring		10,000			
	23-11 Lipsey replace playground equipment		30,000			
	23-12 Pate replace floor tile		67,250			
	23-12 Pate drainage		54,979			
	23-14 Wetherbee replace interior doors		10,000			
	23-20 Lane Landings install security fencing		15,000			
	23-20 Lane Landings install drive maintenance storage		15,000			
	PHA Wide – training, travel, computer administration, architect fees, inspection costs, replace floor tile community room equipment		655,878	PHA Wide – training, travel, computer administration, architect fees, inspection costs, replace floor tile community room equipment		655,878

**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**

		Year 2011		Year 2012		
	Subtotal of Estimated Cost	\$ 1,560,207	Subtotal of Estimated Cost	\$ 1,560,207		

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2013</u> FFY _____			Work Statement for Year: <u>2014</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	23-3 McIntosh bathroom remodeling low flow toilets		25,000	23-2O.B Hines bathroom remodeling low flow toilets		10,000
Annual	23-4 Holley Add AC		455,129	23-3 McIntosh Add AC		400,000
Statement	23-4 Holley replace resilient flooring		10,000	23-4 Holley bathroom remodeling for low flow toilet		10,000
	23-6 William Binns replace resilient flooring		10,000	23-4 Holley replace resilient flooring		10,000
	23-6 William Binns replace doors		200,000	23-6 William Binns replace resilient flooring		10,000
	23-7 Golden Age replace bath fixtures, low flow toilets		10,000	23-6 William Binns replace ranges & refrigerators		87,500
	23-10 Hudson Malone replace heat pumps		100,000	23-10 Hudson Malone replace roof		100,000
	23-9 Holman replace resilient flooring		64,000	23-12 Pate replace doors		60,000
	23-9 Holman replace water heater		11,200	23-12 Pate remodel bathrooms		50,000
	23-17 Sherman Oaks replace base cabinets		28,000	23-14 Wetherbee replace windows		45,000
				23-14 Wetherbee replace resilient flooring		55,829
				23-16 Briarwood replace kitchen cabinets		46,000



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

**Part III: Supporting Pages – Management 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	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	N/A			
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
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	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	N/A			
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

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 ALBANY, GA	Grant Type and Number Capital Fund Program Grant No: GA06P023501 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2006 FFY of Grant Approval: 2006
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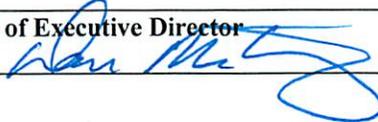
Type of Grant  
 Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement (revision no:5 )  
 Performance and Evaluation Report for Period Ending:     Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	225,000	225,000	225,000	225,000
3	1408 Management Improvements	30,696.80	30,696.80	30,696.80	30,696.80
4	1410 Administration (may not exceed 10% of line 21)	147,848	147,848	147,848	147,848
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	168,499.38	168,505.61	168,505.61	168,505.61
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	903,595.44	903,589.21	903,589.21	903,589.21
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	46,524.38	46,524.38	46,524.38	46,524.38
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

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>					
<b>PHA Name:</b> HOUSING AUTHORITY OF THE CITY OF ALBANY, GA		<b>Grant Type and Number</b> Capital Fund Program Grant No: GA069023501 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:2006</b> <b>FFY of Grant Approval: 2006</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 5                      ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input checked="" 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)	1,522,164	1,522,164	1,522,164	1,522,164
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	612,361.21	612,354.98	612,354.98	612,354.98
<b>Signature of Executive Director</b> 		<b>Date</b> 6/1/2010		<b>Signature of Public Housing Director</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.

<b>Part II: Supporting Pages</b>								
PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY, GA			Grant Type and Number Capital Fund Program Grant No: GA06P023501 CFFP (Yes/ No): 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 5 LANE LANDINGS								
23-12	INSTALL FENCING	1450	1					MOVED
	ADD SIDING	1460	50	67,812	67,812	67,812	67,812	COMPLETE
	REPLACE SCREEN DOORS	1460	50	15,000	15,000	15,000	15,000	COMPLETE
PHA WIDE								
	STAFF TRAINING AND TRAVEL	1408	NA	20,864.56	20,000	20,000	20,000	COMPLETE
	COMPUTER SOFTWARE	1408	NA	9,832.24	10,696.80	10,696.80	10,696.80	COMPLETE
	COMPUTER HARDWARE	1475	NA	30,000	30,000	30,000	30,000	COMPLETE
	MAINTENANCE VEHICLE	1475	1	16,524.38	16,524.38	16,524.38	16,524.38	COMPLETE
	ADMINISTRATION	1410	NA	147,848	147,848	147,848	147,848	COMPLETE
	ARCHITECTURAL FEES	1430	NA	78,499.38	78,499.38	78,499.38	78,499.38	COMPLETE
	INSPECTION COSTS	1430	NA	90,000	90,006.23	90,006.23	90,006.23	COMPLETE
	REPLACE FLOOR TILE	1460						MOVED
	COMMUNITY ROOM FURNITURE	1475						MOVED
	OPERATIONS	1406	NA	225,000	225,000	225,000	225,000	COMPLETE
	TOTAL							
				1,522,164	1,522,164	1,522,164	1,522,164	

<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.

<b>Part II: Supporting Pages</b>								
PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY, GA			Grant Type and Number Capital Fund Program Grant No: GA06P023501 CFFP (Yes/ No): 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>AMP 1 MCINTOSH</b>								
23-1	ADD AC	1460	32					MOVED
	REPLACE WINDOWS	1460	32					MOVED
23-2	CEILING REPAIR	1460	12					MOVED
23-3	INSTALL TV JACKS	1460	125					MOVED
<b>AMP 2 HOLLEY</b>								
23-4	REPLACE KITCHEN CABINETS/FIXT	1460	125	89,824	89,824	89,824	89,824	COMPLETE
	REMODEL BATHS	1460	125	75,000	75,000	75,000	75,000	COMPLETE
23-6	ADD AC	1460	100	612,361.21	612,354.98	612,354.98	612,354.98	COMPLETE
<b>AMP 3 HUDSON MA</b>								
23-10	REMODEL CANOPY/HEAT PUMPS	1460	95					MOVED
23-13	REPLACE KITCHEN CABINETS/BATHS/FIXTURES	1460	16	43,598.23	43,598.23	43,598.23	43,598.23	COMPLETE
<b>AMP 4 DENNIS</b>								
23-9	REPLACE CLOSET DOORS	1460	31					MOVED

<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 I: Summary						
PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY, GA		Grant Type and Number Capital Fund Program Grant No: GA06P023501 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2007 FFY of Grant Approval: 2007	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:3 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <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	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements	31,237.63	23,074.88	23,074.88	23,074.88	
4	1410 Administration (may not exceed 10% of line 21)	162,228	162,228	162,228	162,228	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	140,636.40	167,155.24	167,155.24	167,155.24	
8	1440 Site Acquisition					
9	1450 Site Improvement	4,561	4,561	4,561	4,561	
10	1460 Dwelling Structures	1,067,659.53	1,041,528.35	1,041,528.35	1,032,182.35	
11	1465.1 Dwelling Equipment—Nonexpendable	177,807.44	185,582.53	185,582.53	185,582.53	
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	38,154	38,154	38,154	38,154	
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

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>							
<b>PHA Name:</b> HOUSING AUTHORITY OF THE CITY OF ALBANY, GA		<b>Grant Type and Number</b> Capital Fund Program Grant No: GA069023501 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:2007</b> <b>FFY of Grant Approval: 2007</b>			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <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)	1,622,284	1,622,284	1,622,284	1,612,938		
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	643,905.76	641,904.01	641,904.01	632,558.01		
Signature of Executive Director 		Date 6/1/2010		Signature of Public Housing Director  		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.

<b>Part II: Supporting Pages</b>								
<b>PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY , GA</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: GA06P023501 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2007</b>		
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>AMP 1 MCINTOSH</b>								
23-1	RANGES & REFRIGERATORS	1465	32	30,000	26,528	26,528	26,528	COMPLETE
	ADD AC	1460	32	212,895.32	212,895.32	212,895.32	212,895.32	COMPLETE
	REPLACE WINDOWS	1460	32	149,000	149,966.16	149,966.16	149,966.16	COMPLETE
	SITE IMPROVEMENTS	1450	NA	0	0	0	0	MOVED
23-2	RANGES AND REFRIGERATORS	1465	56	34,236	34,236	34,236	34,236	COMPLETE
	ADD AC	1460	56	0	0	0	0	MOVED
	REPLACE CEILINGS	1460	12	6,250	6,050	6,050	6,050	COMPLETE
	REMODEL BATHS	1460	56	73,708.56	88,101.59	88,101.59	88,101.59	COMPLETE
23-3	STRIPE PARKING	1450	75	2,575	2,575	2,575	2,575	COMPLETE
	INSTALL TV AND TELEPHONE JACKS	1460	125	0	0	0	0	MOVED
	RANGES AND REFRIGERATORS	1465	125	91,846	99,521	99,521	99,521	COMPLETE
<b>AMP 2 HOLLEY</b>								
23-4	REPLACE KITCHEN CABINETS	1460	50	100,000	100,000	100,000	100,000	COMPLETE
	REMODEL BATHROOMS	1460	50	75,000	92,683.77	92,683.77	92,683.77	COMPLETE
23-6	KITCHEN REMODELING	1460	100	165,440.27	165,940.27	165,940.27	165,940.27	COMPLETE
	BATHROOM REMODELING	1460	100	129,426.24	129,426.24	129,426.24	129,426.24	COMPLETE
<b>AMP 3 HUDSON MALONE</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.

<b>Part II: Supporting Pages</b>								
<b>PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY , GA</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: GA06P023501 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2007</b>		
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>	
23-10	REPLACE 20% HEAT PUMPS	1465	20	21,725.44	25,297.53	25,297.53	25,297.53	COMPLETE
	REMODEL CANOPY	1460	1	0	0	0	0	MOVED
	FIRE ALARM PANEL	1460	1	3005	3005	3005	3005	COMPLETE
<b>AMP 4 DENNIS</b>								
23-9	REPLACE CLOSET DOORS	1460	31	0	0	0	0	DELETE
<b>AMP 5</b>								
23-11	STRIPE PARKING LOT	1450	75	0	0	0	0	DELETE
23-12	STRIPE PARKING LOT	1450	50	1,986	1,986	1,986	1,986	COMPLETE
23-14	ADD AC	1460	30	100,000	93,460	93,460	84,114	UNDERWAY
<b>PHA- WIDE</b>								
	STAFF TRAINING	1408		16,237.63	16,237.63	16,237.63	16,237.63	COMPLETE
	COMPUTER SOFTWARE	1408		15,000	6,837.25	6,837.25	6,837.25	COMPLETE
	COMPUTER HARDWARE	1475		15,000	15,000	15,000	15,000	COMPLETE
	MAINTENANCE VEHICLE	1475	1	20,588	20,588	20,588	20,588	COMPLETE
	ADMINISTRATION	1410		162,228	162,228	162,228	162,228	COMPLETE
	ARCHITECTURAL FEES	1430		94,167	116,395.90	116,395.90	116,395.90	COMPLETE
	INSPECTION COSTS	1430		46,469.40	50,759.34	50,759.34	50,759.34	COMPLETE
	REPLACE FLOOR TILE	1460	25	25,000	0	0	0	DELETED
	COMMUNITY ROOM EQUIP OPERATIONS	1475 1406		2,566 0	2,566 0	2,566 0	2,566 0	COMPLETE

<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

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>					
<b>PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY, GEORGIA</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: GA06P023501 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval: 2008</b>
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:2 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <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
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	209,485	209,485	209,485	209,485
3	1408 Management Improvements	30,000	27,938.95	25,757.90	25,757.90
4	1410 Administration (may not exceed 10% of line 21)	157,727	157,727	157,727	157,727
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	146,749	171,423.50	171,423.50	96,478.50
8	1440 Site Acquisition				
9	1450 Site Improvement	218,750	140,105	130,708.77	0
10	1460 Dwelling Structures	736,968	812,999.55	529,250.55	229,305.32
11	1465.1 Dwelling Equipment—Nonexpendable	30,000	30,000	0	0
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	47,589	27,589	26,494	26,494
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  
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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>					
<b>PHA Name:</b> HOUSING AUTHORITY OF THE CITY OF ALBANY, GEORGIA		<b>Grant Type and Number</b> Capital Fund Program Grant No: GA06P023501 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:2008</b> <b>FFY of Grant Approval: 2008</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 2 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <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)	1,577,268	1,577,268	1,250,846.72	745,247.72
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	787,800	656,968	415,204.83	180,427.6
<b>Signature of Executive Director</b> 		<b>Date</b> 6/1/2010		<b>Signature of Public Housing Director</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.

<b>Part II: Supporting Pages</b>								
PHA Name: HOUSING AUTHORITY OF THE CITY OF ALBANY, GEORGIA			Grant Type and Number Capital Fund Program Grant No: GA06P023501 CFFP (Yes/ No): 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 1 MCINTOSH								
23-1	DEMOLITION OF 8 UNITS	1460	8	60,000	66,545	60,000	0	UNDERWAY
	SITE IMPROVEMENTS	1450		218,750	140,105	130,708.77	0	UNDERWAY
23-2	ADD AC	1460	56	277,918	150,000	149,500	0	UNDERWAY
	REPLACE WINDOWS	1460	56	0	254,654	0	0	A&E DESIGN
23-3	RANGES AND REFRIGERATORS	1460	125	0	0			MOVED
	BATHROOM TILE	1460	25	21,476	51,095.72	51,095.72	45,927.72	UNDERWAY
AMP 3 HUDSON MA								
23-7	REPLACE HEAT PUMPS	1465	20	15,000	15,000	0	0	SCHEDULED
23-10	REPLACE HEAT PUMPS	1465	20	15,000	15,000	0	0	SCHEDULED
AMP 4								
23-8	ADD AC	1460	77	349,050	265,704.83	265,704.83	180,427.60	UNDERWAY
AMP 5								
23-14	REPLACE HVAC ADD AC	1460	30	0	0			MOVED
PHA WIDE	STAFF TRAINING AND TRAVEL	1408		20,000	20,000	20,000	20,000	COMPLETED
	COMPUTER SOFTWARE	1408		10,000	7938.95	5757.90	5757.90	UNDERWAY

<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.



<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Albany (GA023)			Grant Type and Number Capital Fund Program Grant No: GA06P02350109 CFFP (Yes/ No): 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
GA023000004 (cont'd)	Replace doors at 23-9	1460	31	17,000	17,000			
Dennis	Replace doors at 23-13	1460	5	5,000	5,000			
GA023000005	Replace interior doors at 23-11	1460	75	55,000	55,000			
	Replace windows at 23-11	1460	75	187,542	0			Moved
PHA wide	Staff training and travel	1408		20,000	20,000			
	Computer software	1408		10,000	10,000			
	Computer hardware	1475		20,000	20,000			
	Maintenance vehicle	1475		20,000	20,000			
	Administration	1410		156,381	156,381			
	Architectural and Engineering	1430		93,280	93,280	65,677.70	851.03	
	Inspection costs	1430		53,469	53,469			
	Operations	1406		223,885	223,885			
	<b>TOTAL</b>			<b>1,563,813</b>	<b>1,563,813</b>	<b>65,677.70</b>	<b>851.03</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.

<b>Part II: Supporting Pages</b>								
PHA Name: Housing Authority of the City of Albany (GA023)		Grant Type and Number Capital Fund Program Grant No: GA06P02350109 CFFP (Yes/ No): 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
GA023000001	Paint/cover bldg. exterior at 23-1	1460	32	28,707	28,707			
McIntosh			32					
	Replace windows at 23-2	1460	56	150,000	0			Moved
	Replace exterior doors ar 23-2	1460	56	44,800	44,800			
	Install columns and railings at 23-2	1460	56	56,000	56,000			
	Parking, fencing, sidewalks, mailboxes, and landscaping at 23-2	1450	NA	30,000	367,542			
	Parking, fencing, sidewalks, mailboxes, and landscaping at 23-3	1450	NA	58,000	58,000			
	Add air conditioning at 23-3	1460	63	115,349	115,349			
GA023000002	Parking, fencing, sidewalks, mailboxes, and landscaping at 23-4	1450	NA	30,000	30,000			
Holley	Replace interior doors at 23-4	1460	125	75,000	75,000			
	Replace water heaters at 23-6	1460	100	35,000	35,000			
GA023000003	Replace heat pumps at 23-7	1460	7	8,400	8,400			
Hudson Malone	Replace heat pumps at 23-10	1460	12	12,000	12,000			
	Replace doors at 23-13	1460	12	24,000	24,000			
GA023000004	Repair/expand parking at office at 23-8	1450	1	15,000	12,768			
Dennis	Repair interior doors at 23-8	1460	77	20,000	22,232			

<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

<b>Part I: Summary</b>					
PHA Name: Housing Authority of the City of Albany (GA023)		Grant Type and Number Capital Fund Program Grant No: GA06P02350109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <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)	1,563,813	1,563,813	65,677.70	851.03
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
		6/1/2010			

<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: 2009 FFY of Grant Approval: 2009	
PHA Name: Housing Authority of the City of Albany (GA023)		Grant Type and Number Capital Fund Program Grant No: GA06P02350109 Replacement Housing Factor Grant No: Date of CFFP:			
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: 3/31/2010 <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
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	223,885	223,885	0	0
3	1408 Management Improvements	30,000	30,000	0	0
4	1410 Administration (may not exceed 10% of line 21)	156,381	156,381	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	146,749	146,749	65,677.70	851.03
8	1440 Site Acquisition				
9	1450 Site Improvement	118,000	468,310	0	0
10	1460 Dwelling Structures	848,798	498,488	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	40,000	40,000	0	0
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.



## ALBANY HOUSING AUTHORITY

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P.O. Box 485  
Albany, GA 31702  
Phone (229) 434-4500  
FAX (229) 434-4502

July 07, 2010

Ms. Ada Holloway, Director  
GA State Office of Public Housing  
U.S. Department of HUD  
Five Points Plaza  
40 Marietta St., 17<sup>th</sup> Floor  
Atlanta, GA 30303-2806

Dear Ms. Holloway:

Attached are the required completed documents for the Agency Plan for the Albany Housing Authority:

1. Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations.
2. Form HUD-50077-CR, Civil Rights Certification
3. Form HUD-50077-SL, Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan
4. Form HUD-50070, Certification for a Drug-Free Workplace with sites for work performance attached
5. Form HUD 50071, Certification of Payments to Influence Federal Transactions
6. Standard Form LLL, Disclosure of Lobbying Activities
7. Challenged Elements

If additional information is required, please feel free to contact me at (229) 434-4500.

Sincerely,

  
Dan McCarthy  
Executive Director

**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  X  5-Year and/or  X  Annual PHA Plan for the PHA fiscal year beginning  10/2010 , 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.

ALBANY HOUSING AUTHORITY

GA023

PHA Name

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2011 - 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)

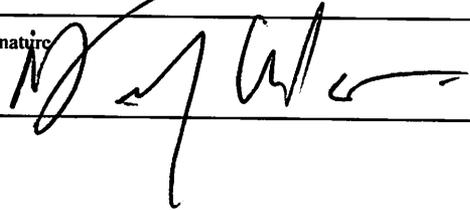
Name of Authorized Official

W. Frank Wilson

Title

Chairman of the Board of Commissioners

Signature



Date

June 22, 2010

**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, Willie Adams, Jr. the Mayor of the City of Albany certify that the Five Year and Annual PHA Plan of the Albany Housing Authority is consistent with the Consolidated Plan of City of Albany, Georgia prepared pursuant to 24 CFR Part 91.

 6/21/2010  
Signed / Dated by Appropriate State or Local Official

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Albany Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

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

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

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

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

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

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

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

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

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

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

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

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the 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.)

SEE ATTACHED SHEETS

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

Dan McCarthy

Title

Executive Director

Signature

X



Date

7/6/2010

**GA023 ALBANY HOUSING AUTHORITY**

**Attachment to Form 50070  
Sites for Work Performance  
All properties are located in Albany, Dougherty County, GA**

**GA023000001**

602 – 624 Stadium Dr. (even numbers)  
715 – 725 Tift Avenue (odd numbers)  
613 – 623 North Davis Street (odd numbers)  
412 – 508 North Davis Street (even numbers)  
617 – 663 Residence Avenue (odd & even numbers)  
618 – 624 North Davis Street (even numbers)  
700 – 706 North Davis Street (even numbers)  
617 – 624 North Madison Street (odd & even numbers)  
700 – 706 North Madison Street (odd & even numbers)  
522 – 687 Society Avenue (odd & even numbers)

**GA023000002**

901 – 941 Cherry Avenue (odd & even numbers)  
900 – 1014 S. Cleveland Street (even numbers)  
900 – 958 Corn Avenue (even numbers)  
901 – 1015 S. Harding Street (odd numbers)  
901 – 963 Holloway Avenue (odd numbers)  
718-A – 724-B Whitney Avenue (even numbers)  
400-A – 410-B S. Van Buren Street (even numbers)  
407-B S. Van Buren Street  
502-A – 512-B S. Van Buren Street (even numbers)  
600-A – 602-B. S. Van Buren Street (even numbers)  
401-A – 415-B McKinley Street (odd numbers)  
501-A – 515-B McKinley Street (odd numbers)  
601-A – 607-B McKinley Street (odd numbers)  
714-A – 721-B Lincoln Avenue (odd & even numbers)  
715-A – 721-B Gordon Avenue (odd numbers)

**GA023000003**

600-613 North Davis Street (odd & even numbers)  
601 – 611 North Madison Street (odd numbers)  
601 – 699 Tift Avenue (odd numbers)  
401 Flint Avenue  
205 – 227 Tift Avenue (odd numbers)

**GA023 ALBANY HOUSING AUTHORITY**

**GA023000004**

504 – 1610 Newton Road (even numbers)  
631 – 646 Tulsa Lane (odd & even numbers)  
636 – 640 Jeffries (even numbers)  
600 – 1819 Gadsen Drive (odd & even numbers)  
2128 West Gordon Avenue  
1106 – 1112 Colquitt Avenue (odd & even numbers)

**GA023000005**

100 – 134 Whittlesey Court (odd & even numbers)  
1800 – 1819 Wetherbee Circle (odd & even numbers)  
1800 – 1826 Seay Court (odd & even numbers)

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Albany Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Dan McCarthy	Title Executive Director
Signature 	Date (mm/dd/yyyy) 07/06/2010

## DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB  
0348-0046

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee 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>  Congressional District, if known:	
<b>6. Federal Department/Agency:</b> Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: 14.850	
<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: DAN MCCARTHY Title: EXECUTIVE DIRECTOR Telephone No.: 229-434-4500      Date: 7/6/2010	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

## **Challenged Elements**

There are NO challenged elements of the Albany Housing Authority Annual Agency Plan and the 5 Year Plan.

**Civil Rights Certification**

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

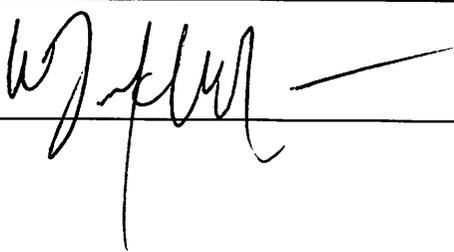
**Civil Rights Certification****Annual Certification and Board Resolution**

*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.

ALBANY HOUSING AUTHORITY  
 \_\_\_\_\_  
 PHA Name

GA023  
 \_\_\_\_\_  
 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  W. Frank Wilson	Title  Chairman of the Board of Commissioners
Signature 	Date 6/22/2010

## **ATTACHMENT H**

### **DESCRIPTION OF ACTIVITIES OFFERED FOR TENANTS RELATED TO VIOLENCE AGAINST WOMEN**

The Albany Housing Authority has amended its Admission and Continued Occupancy Policy to comply with the Violence Against Women and Justice Department Reauthorization Act 2005, Public Law 109-162. Specifically, the policy prohibits the eviction of, and removal of assistance from, certain persons living in public housing or Section-8 assisted housing if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking. Tenants will be protected, as well as members of their immediate families, from losing their HUD- assisted housing as a consequence of the abuse of which they were the victims.

Currently, the Agency does not have a written agreement with other service providers; however, we do receive referrals from the local agencies that provide services and/or temporary shelter for domestic violence victims and we have provided housing to some of these clients. We also refer tenants to the local agencies. The Albany Housing Authority collaborated with the District Attorney's office, the Dougherty County Juvenile Court, the Advocacy and Rape Crisis office, the Dougherty County School System Police Department and the Department of Family and Children Services to sponsor a seminar on "Sexual Assault and Fighting Violence" for our tenants.