

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: NEWTON HOUSING AUTHORITY OF THE CITY OF PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing PHA Fiscal Year Beginning: (MM/YYYY): 07/01/2010 PHA Code: GA109 <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8)	2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 42 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.)	<table border="1"> <thead> <tr> <th>Participating PHAs</th> <th>PHA Code</th> <th>Program(s) Included in the</th> <th>Programs Not in the</th> <th>No. of Units in Each Program</th> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Participating PHAs	PHA Code	Program(s) Included in the	Programs Not in the	No. of Units in Each Program	PH	HCV	PHA 1:							PHA 2:							PHA 3:							5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.	5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: To serve low and moderate income citizens by providing adequate, affordable housing, free from discrimination, and by promoting stable family relationships and providing opportunities for increased self sufficiency through our programs and through partnerships with other agencies in the area.	5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. 1. Increase the availability of decent, safe, and affordable housing as needed including more handicapped units if needed. We have built one handicapped duplex with capital fund money in addition to the other handicapped units we already had. 2. Improve the quality of living, bring the PHAS score back to high performer, renovate public housing units and make them more marketable. 3. We are promoting self sufficiency through a diploma program, also through classes in carpentry and janitorial work which includes finding jobs for the persons involved, and we are building good affordable houses for homeownership for low and moderate income persons. 4. We will continue to implement public housing security improvements by expanding lighting, continuing police contracts, working on neighborhood appearance, planting more flowers and signs, improve appearance through trash control, using advisory council to provide information on problem areas. In the past five years we have built a Community Funds which gives us a place to have advisory meetings and we are now using this for a tutorial program. We are in process of beginning additional programs at this building. We have repaved the street in Bates Village, have repainted all houses in Bates Village, have referenced Norris and Williford Homes, have upgraded heating and air conditioning with stimulus money with more energy efficient units, replaced exterior doors and screen doors and stoves and refrigerators (using energy star refrigerators). We have been high performers before and are working toward that goal again through a more intense inspection program to identify persons who are abusing the property and finding problems before they exacerbate.	6.0	PHA Plan Update (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. MAIN OFFICE OF THE AUTHORITY AT 51 HILLIARD STREET, CAMILLA, GA. 31730	7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.	8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
Participating PHAs	PHA Code	Program(s) Included in the	Programs Not in the	No. of Units in Each Program	PH	HCV																																											
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<p>8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFP financing.</p>	<p>8.2 Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>	<p>8.3 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>	<p>9.0 Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. SSEE ATTACHED</p>	<p>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. We will continue to monitor the need for handicapped units and provide them either by building with Capital Funds or by converting regular units to handicapped units with capital funds. We are working with a non profit which we created to build homes for homeownership for low and moderate income persons.</p>	<p>10.0 Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. We continue to update our existing units and recently put upgraded HVAC units in 14 units. We will continue this trend and have replaced all refrigerators with energy star refrigerators. We will continue to work with non profit for homeownership. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" 1. Changes to rent or admissions policies or organization of the waiting list. 2. Addition of non replacement work items exceeding \$40,000 (items not included in the current Annual Statement of the 5 Year Action Plan) or change in use of the replacement reserve funds under the Capital Fund. 3. Any change with regard to demolition or disposition, designations, homeownership programs or conversion activities.</p>	<p>11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only) (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only) (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only) (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only) (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)</p>
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Lease Addendum

**NOTICE OF TENANT'S RIGHTS UNDER
SECTION 607 OF THE VIOLENCE AGAINST WOMEN
AND DEPARTMENT OF JUSTICE REAUTHORIZATION ACT OF 2005**

Federal Law requires Management to give notice of your rights under Section 607 of the Violence Against Women and the Department of Justice Reauthorization Act of 2005. ("The Act").

For purposes of this notice, the following definitions apply:

- (a) "domestic violence" has the same meaning giving that term in Section 40002 of the Violence Against Women Act of 1994;
- (b) the term "dating violence" has the same meaning giving that term in Section 40002 of the Violence Against Women Act of 1994;
- (c) the term "stalking" means:
 - (i) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or
 - (ii) to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and
 - (iii) in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to that person, a member of the immediate family of that person, or the spouse or intimate partner of that person. The term "immediate family member" means, with respect to a person--
 - (A) a spouse, (brother or sister, or child) of that person, or an individual to whom that person stands in loco parentis; or
 - (B) any other person living in the household of that person and related to that person by blood or marriage.

Federal Law provides that Management shall not deny admission to any applicant on basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking if the applicant otherwise qualifies for assistance or admission.

The Act further provides that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as a serious or repeated violation of a lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of the victim of such violence.

Furthermore, criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of Tenant's household or any guest(s) or other person under the Tenant's control, shall not be cause for termination of the tenancy or occupancy rights, if the Tenant or immediate member of the Tenant's family is a victim of that domestic violence, dating violence, or stalking; and provided that Management may bifurcate a lease in order to evict, remove, or terminate assistance to any individual who is a Tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a Tenant or lawful occupant.

The Act does not limit the Management's authority, when notified, to honor court orders addressing rights of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution of possession of property among the household members in cases where a family breaks up. Furthermore, the act does not limit the Management's authority to evict a Tenant for any violation of the lease not premised on the act or acts of violence in question against a Tenant or a member of the Tenant's household, provided that Management does not subject an individual who is or has been a victim of domestic violence, dating violence, or stalking to a more demanding standard than other tenants in determining whether to evict or terminate.

The Act does not limit Management's authority to terminate the tenancy of any Tenant if Management can demonstrate an actual and eminent threat to other tenants or those employed at or providing service to the property if that Tenant's tenancy is not terminated.

The Act does not supersede any provision of any federal, state, or local law that provides greater protection than this section for victims of domestic violence, dating violence, or stalking.

Management may request that an individual claiming the protection of the Act certify via HUD approved certification form that such individual is a victim of domestic violence, dating violence, or stalking, and that the incident or incidents in question are bona fide incidents of such actual or threatened abuse and meet the requirements set forth in the aforementioned paragraphs. The certification shall include the name of the perpetrator. The individual shall provide such certification within fourteen (14) business days after the public housing agency requests such certification.

If the individual does not provide the certification within fourteen (14) business days after the public housing agency has requested such certification in writing, in that circumstance, the Act does not limit the authority of Management to evict any tenant or lawful occupant that commits violations of the lease. Management may extend the fourteen (14) day deadline at its discretion.

And individual may satisfy the certification requirement by providing the requesting public housing agency with documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence, or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. §1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation; or by producing a Federal, State, tribal, territorial, or local police or court record.

The Act does not require Management to demand that an individual produce official documentation or physical proof of the individual status as a victim of domestic violence, dating violence, or stalking in order to receive any of the benefits of the Act. At Management's discretion, it may provide for benefits to an individual based solely on the individual statement or other collaborating evidence.

You should be aware that all information provided to Management (or other public housing agency) pursuant to the Act, including the fact that an individual is a victim of domestic violence, dating violence, or stalking, must be retained in confidence and shall neither be entered into any shared database nor provided to any related entity, except to the extent that disclosure is requested or consented to by the individual in writing or required for use in an eviction proceeding or otherwise required by applicable law.

This Notice is provided to you pursuant to the Act referenced above which requires that all public housing agencies must provide notice to tenants assisted under Section 6 of the United States Housing Act of 1937 of their right under the Act, including their right to confidentiality and the limits thereof.

(Signed) _____
Head of Household

Date: _____

Housing Authorities of Cities of Camilla and Newton (GA096 and GA109)
Effective April 1, 2006

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		FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Newton		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: GA06P10950109 Replacement Housing Factor Grant No: Date of CFP:			

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) Final Performance and Evaluation Report		Total Actual Cost ¹
			Original	Total Estimated Cost Revised ²	
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³		60,420		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonependable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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

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

Part I: Summary		FFY of Grant: 2009	
PHA Name: Newton Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P10950109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

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)	60,420			
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
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 <i>Richard G. Williams</i>		Date 4/13/10	Signature of Public Housing Director		Date

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

Part I: Summary		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Newton	Grant Type and Number Capital Fund Program Grant No: GA06P1095012010 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
			Original	Total Estimated Cost Revised ²
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) ³		60,420	
3	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)			
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement			
10	1460 Dwelling Structures			
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities ⁴			

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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

Part I: Summary		FFY of Grant: 2010 2010	
PHA Name: Newton Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P109501 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

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)	60,420			
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
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				
Signatures of Executive Director		Date	Signature of Public Housing Director		Date
<i>[Signature]</i>		4/13/10	<i>[Signature]</i>		

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.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary

PHA Name/Number		Locality (Newton, Baker, Georgia)			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number and Name	Work Statement for Year 1 FFY 2010	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	Approved Statement					
C. Management Improvements						
D. PHA-Wide Non-dwelling Structures and Equipment						
E. Administration						
F. Other						
G. Operations		60,420				
H. Demolition						
I. Development						
J. Capital Fund Financing – Debt Service						
K. Total CFP Funds						
L. Total Non-CFP Funds						
M. Grand Total		60,420	60,420	60,420	60,420	

1. Statement of Housing Needs

[24 CFR Part 903.79 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	593	5	2	2	2	3	1
Income >30% but <=50% of AMI	218	3	2	2	2	2	1
Income >50% but <80% of AMI	210	2	4	2	2	2	1
Elderly	173	3	1	2	2	1	1
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	752	4	2	2	2	3	1
Race/Ethnicity	18	5	2	2	2	2	1
Race/Ethnicity							
Race/Ethnicity							