

1.0	PHA Information PHA Name: ABBEVILLE HOUSING AUTHORITY PHA Code: <u>GA186</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2010</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>14</u> Number of HCV units: <u>0</u>																										
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input checked="" 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" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 30%;">Participating PHAs</th> <th rowspan="2" style="width: 10%;">PHA Code</th> <th rowspan="2" style="width: 20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width: 20%;">Programs Not in the Consortia</th> <th colspan="2" style="width: 20%;">No. of Units in Each Program</th> </tr> <tr> <th style="width: 10%;">PH</th> <th style="width: 10%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																			
		PH	HCV																								
PHA 1:																											
PHA 2:																											
PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <p style="text-align: center;"><i>See attached</i></p>																										
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. <p>The goals of the Housing Authority of the City of Abbeville is to ensure safe, descent, and affordable housing; create opportunities for resident's self-sufficiency and economic independence; and assure fiscal integrity in all programs.</p> <p>The Housing Authority has achieved PHAS scores that reflect good management in all areas of the Public Housing Program.</p> <p>The Housing Authority recognizes the resident as their ultimate customer. The Authority is continually trying to improve our management and service delivery efforts through oversight, assistance, and selective intervention by highly skilled, diagnostic and result oriented personnel. The Authority has created a problem solving partnership with our residents, the community, and governmental leadership. Thus our Authority maintains our housing units and common areas in the best possible condition.</p> <p style="text-align: center;"><i>See attached</i></p>																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: The Abbeville Housing Authority has not revised any PHA Plan elements since its last Annual Plan submission. (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The PHA Plan for the Abbeville Housing Authority is available for review at the Housing Authority office.																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> The Abbeville Housing Authority is not undertaking any of these activities during the next program year.																										
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.																										
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <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. ATTACHED																										
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. ATTACHED																										

8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <ul style="list-style-type: none"> • The Abbeville Housing Authority serves affordable housing needs in the City of Abbeville and Wilcox County. The median household income in the City of Abbeville is expected to drop significantly by the time the 2010 Census is completed because of the loss to household incomes. The need for affordable housing continues to increase in the City because of the sluggish economy.

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <ul style="list-style-type: none"> • The housing needs of residents within the jurisdiction of the Abbeville Housing Authority are reflective of and consistent with the housing needs outlined in the Consolidated Plan of the State of Georgia. The Housing Authority meets the housing needs of more low-, very-low, and extremely low-income families and individuals throughout Dooly County than any other agency. The Housing Authority will continue to employ effective maintenance and management policies to minimize vacancies and turnover time.
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10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The ABBEVILLE HOUSING AUTHORITY is meeting the Mission and Goals of the Annual Plan. The aim of the Abbeville Housing Authority is to ensure safe, descent, and affordable housing; create opportunities for resident's self-sufficiency and economic independence; and assure fiscal integrity in all programs.</p> <p>The Abbeville Housing Authority recognizes the resident as their ultimate customer. The Authority is continually trying to improve our management and service delivery efforts through oversight, assistance, and selective intervention by highly skilled, diagnostic and result oriented personnel. The Authority has created a problem solving partnership with our residents, the community, and governmental leadership.</p> <p>Thus our Authority maintains our housing units and common areas in the best possible condition.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>A. A substantial deviation from its Five-Year Plan; and a significant amendment or modification to its Five-Year Plan and Annual Plan.</p> <p>B. Changes to rent or admissions policies or organization of the waiting list.</p> <p>C. Additions of non-emergency work items (items not included in the current Annual Statement or Five-Year Action Plan) or change in use of replacement reserve funds under the Capitol Fund.</p> <p>D. Any change with regard to demolition or disposition, designation, homeownership programs, or conversion activities.</p> <p>Any substantial deviation from the mission statement and/or Goals and Objectives presented in the Five-Year Plan that cause changes in the services provided to residents or significant changes to the Agency's financial situation, in excess of \$50,000.00 will be documented in subsequent Agency Plans.</p> <p>An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements offered by HUD.</p> <p>(c) Housing Authority's progress under the MOA for Troubled PHAs:</p> <p>The Housing Authority has completed the terms required by the MOA. The MOA expired in July 2009.</p>
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11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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11.0

- f. No RAB comments. The HAEC has no RAB because of it's size (14 total units).
- g. No one challenged any element of the Agency Plan.

The statements above (11.0: f & g) are hereby certified as to being true and correct this _____ day of April 2010.

Shundra McDuffie, Executive Director
Abbeville Housing Authority

APPENDIX A: VAWA Policy

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. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

5.2 Goals

*The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.*

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score)
 - Improve voucher management: (SEMAP score)
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units:
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing:
 - Provide replacement vouchers:
 - Other: (list below)

- PHA Goal: Increase assisted housing choices
- Objectives:
 - Provide voucher mobility counseling:
 - Conduct outreach efforts to potential voucher landlords
 - Increase voucher payment standards
 - Implement voucher homeownership program:
 - Implement public housing or other homeownership programs:
 - Implement public housing site-based waiting lists:
 - Convert public housing to vouchers:
 - Other: Implement voucher project based assistance.

HUD Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment
- Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements:
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- PHA Goal: Promote self-sufficiency and asset development of assisted households
- Objectives:
 - Increase the number and percentage of employed persons in assisted families:
 - Provide or attract supportive services to improve assistance recipients' employability:
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 - Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
- Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
 - Other: (list below)

Appendix A

ABBEVILLE HOUSING AUTHORITY (AHA)

VAWA Policy

Title VI of the VAWA (Violence Against Women Act) adds a new housing provision that establishes several categories of protected individuals. Under the law victims of domestic violence, dating violence, sexual assault, and stalking are granted protections and cannot be denied or terminated from housing or housing assistance because of activity that is directly related to domestic violence.

1.0 PURPOSE

The purpose of this Policy is to reduce domestic violence, dating violence, and stalking and to prevent homelessness by:

- (a) protecting the safety of victims;
- (b) creating long-term housing solutions for victims;
- (c) building collaborations among victim service providers; and
- (d) assisting AHA to respond appropriately to the violence while maintaining a safe environment for AHA, employees, tenants, applicants, Section 8 participants, program participants and others.

The policy will assist the Abbeville Housing Authority (AHA) in providing rights under the Violence Against Women Act to its applicants, public housing residents, Section 8 participants and other program participants.

This Policy is incorporated into AHA's "Statement of Policies Governing Admission and Continuing Occupancy of Low Rent Housing" and "Methods of Administration" and applies to all AHA housing programs.

2.0 DEFINITIONS

The definitions in this Section apply only to this Policy.

- 2.1 **Confidentiality:** Means that AHA will not enter information provided to AHA by a victim alleging domestic violence, dating violence or stalking into a shared database or provide this information to any related entity except as stated in 3.4.
- 2.2 **Dating Violence:** Violence committed by a person (a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (b) where the existence of such relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; (iii) the frequency of interaction between the persons involved in the relationship.

- 2.3 **Domestic Violence:** Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, committed by a person with whom the victim shares a child in common, committed by a person who is cohabitating with or has cohabitated with the victim as a spouse, committed by a person similarly situated to a spouse of the victim under the domestic or family violence laws of Georgia, or committed by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of Georgia.
- 2.4 **Immediate Family Member:** A spouse, parent, brother or sister, or child of a victim or an individual to whom the victim stands *in loco parentis*; or any other person living in the household of the victim and related to the victim by blood or marriage.
- 2.5 **Perpetrator:** A person who commits an act of domestic violence, dating domestic violence or stalking against a victim.
- 2.6 **Stalking:** (a) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate the victim; (b) to place under surveillance with the intent to kill, injure, harass or intimidate the victim; (c) in the course of, or as a result of such following, pursuit, surveillance, or repeatedly committed acts, to place the victim in reasonable fear of the death of, or serious bodily injury to the victim; or (d) to cause substantial emotional harm to the victim, a member of the immediate family of the victim or the spouse or intimate partner of the victim.
- 2.7 **Bona Fide Claim:** A *bona fide* claim of domestic violence, dating violence or stalking must include incidents that meet the terms and conditions in the above definitions.

3.0 **CERTIFICATION AND CONFIDENTIALITY**

3.1 **Failure to Provide Certification Under 3.2 and 3.3**

The person claiming protection under VAWA shall provide complete and accurate certifications to AHA within 14 business days after the AHA requests in writing that the person completes the certifications. If the person does not provide a complete and accurate certification within the 14 business days, AHA may take action to deny, evict, or terminate voucher assistance.

3.2 **HUD Approved Certification**

For each incident that a person is claiming as abuse, the person shall certify to AHA, owner or manager their victim status by completing a HUD approved certification form. The person shall certify the date, time and description of the incidents, that the incidents are *bona fide* incidents of actual or threatened abuses and meet the requirements of VAWA and this Policy. The person shall provide information to identify the perpetrator including but not limited to the name and, if known, all alias names, date of birth, address, contact information such as postal, e-mail or internet address, telephone or facsimile number or other identification.

3.3 **Other Certifications**

A person who is claiming victim status shall provide to AHA, an owner or manager: (a) documentation signed by the victim and 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, sexual assault, or stalking or the effects of the abuse, in which the professional attests under penalty of perjury to the professional's belief that the incident(s) in question are *bona fide* incidents of abuse; or (b) a federal, state, tribal, territorial, local police or court record.

3.4 **Confidentiality**

AHA shall keep all information provided to AHA under this Section confidential. AHA, owner and manager shall not enter the information into a shared database or provide to any related entity except to the extent that:

- (a) the victim requests or consents to the disclosure in writing;
- (b) the disclosure is required for use in:
 - (i) eviction from public housing; or
- (c) the disclosure is required by applicable law.

4.0 **Appropriate Basis for Denial of Admission, Assistance or Tenancy**

- 4.1 AHA shall not deny participation or admission to a program on the basis of a person's abuse status, if the person otherwise qualifies for admission or assistance.
- 4.2 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 the lease by the victim and shall not be good cause for denying to a victim admission to a program, terminating Section 8 assistance or occupancy rights to the victim, or evicting a tenant who is a victim.
- 4.3 Criminal activity directly related to domestic violence, dating violence, or stalking engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that domestic violence, dating violence or stalking.
- 4.4 Notwithstanding Sections 4.1, 4.2, and 4.3, AHA may bifurcate a lease 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 the violence who is also a tenant or lawful occupant.
- 4.5 Nothing in Sections 4.1, 4.2, and 4.3 shall limit the authority of AHA 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 or possession of property among the household members when the family breaks up.
- 4.6 Nothing in Sections 4.1, 4.2 and 4.3 limits AHA's authority to evict or terminate assistance to any tenant for any violation of a lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However AHA may not hold a victim to a more demanding standard than other tenants in determining whether to evict or terminate.
- 4.7 Nothing in Sections 4.1, 4.2, or 4.3 limits AHA's authority to evict or terminate assistance, or deny admission to a program if the AHA can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property, or others if the tenant family is not evicted or terminated from assistance or denied admission.
- 4.8 Nothing in Sections 4.1, 4.2, or 4.3 limits AHA's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including but not limited to acts of physical violence or stalking against family members or others.

5.0 **Actions Against a Perpetrator**

The victim shall take action to control or prevent the domestic violence, dating violence, or stalking. The action may include, but is not limited to: (a) obtaining and enforcing a restraining or no contact order or order for protection against the perpetrator; (b) obtaining and enforcing a trespass against the perpetrator; (c) enforcing AHA or law enforcement's trespass against the perpetrator; (d) preventing the delivery of the perpetrator's mail to the victim's unit; (e) proving identifying information listed in 3.2; and (f) other reasonable measures. The AHA may, in its sole discretion, take any action against the perpetrator it deems reasonable and within its authority.

6.0 **EPHA Right to Terminate Housing and Housing Assistance Under this Policy**

6.1 Nothing in this Policy will restrict the AHA, owner or manager's right to terminate tenancy for lease violations by a resident who claims VAWA as a defense if it is determined by the AHA, owner or manager that such a claim is false or unfounded.

6.2 Nothing in this Policy will restrict the AHA right to terminate tenancy if the victim tenant (a) allows a perpetrator to violate a court order relating to the act or acts of violence; or (b) if the victim tenant allows a perpetrator who has been barred from AHA property to come onto AHA property including, but not limited to, the victim's unit or any other area under their control.

6.3 Nothing in this Policy will restrict the AHA's right to terminate housing and housing assistance if the victim tenant who claims as a defense to an eviction or termination action relating to domestic violence has engaged in fraud and abuse against a federal housing program; especially where such fraud and abuse can be shown to have existed before the claim of domestic violence was made. Such fraud and abuse includes but is not limited to unreported income and ongoing boarders and lodgers violations, or damage to property.

7.0 **Statements of Responsibility of Tenant Victim, the AHA to the Victim, and to the Larger Community.**

7.1 A tenant victim has no less duty and responsibility under the lease to meet and comply with the terms of the lease than any other tenant not making such a claim. Ultimately all tenants must be able to take personal responsibility for themselves and exercise control over their households in order to continue their housing and housing assistance. The AHA will continue to issue lease violation notices to all residents who violate the lease including those who claim a defense of domestic violence.

7.2 The AHA recognizes the pathologic dynamic and cycle of domestic violence and will work with victims of domestic violence through the Director of Housing office, which will refer victims to local victim support service providers to help victims break the cycle of domestic violence.

7.3 A tenant victim who claims as a defense to a lease violation that the violation is directly related to domestic violence will be referred through the Director of Housing Office to local victim support service providers for counseling. However, the tenant victim must still comply with Sections 3.2 and 3.3.

7.4 A tenant victim must take personal responsibility for exercising control over their household by accepting assistance and complying with the Safety Plan. Failure to do this will be seen as other good cause.

7.5 All damages including lock changes will be the responsibility of the tenant victim. This is in keeping with other agency policies governing tenant caused damages.

8.0 **Notice to Applicants, Participants, Tenants, and Owners.**

AHA shall provide notice to applicants, participants, tenants, managers and owners of their rights and obligations under Section 3.4 Confidentiality and Section 4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy.

9.0 **Reporting Requirements**

AHA shall include in its 5-year plan a statement of goals, objectives, policies or programs that will serve the needs of victims. AHA shall also include a description of activities, services or programs provided or offered either directly or in partnership with other service providers to victims, to help victims obtain or maintain housing or to prevent the abuse or to enhance the safety of victims.

10.0 **Conflict and Scope**

This Policy does not enlarge AHA's duty under any law, regulation or ordinance. If this Policy conflicts with the applicable law, regulation or ordinance, the law, regulation or ordinance shall control. If this Policy conflicts with another AHA policy such as its Statement of Policies, this Policy will control.

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 ABBEVILLE HOUSING AUTHORITY; GA186		Locality (City/County & State) Abbeville, Wilcox, Georgia			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 4	
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
	GA186-1					
B.	Physical Improvements Subtotal	Annual Statement		7,500.00	7,500.00	7,500.00
C.	Management Improvements		2,000.00	2,000.00	2,000.00	2,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		2,500.00	2,500.00	2,500.00	2,500.00
F.	Other		13,500.00	6,000.00	6,000.00	6,000.00
G.	Operations		7,000.00	7,000.00	7,000.00	7,000.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		25,000.00	25,000.00	25,000.00	25,000.00
L.	Total Non-CFP Funds					
M.	Grand Total		25,000.00	25,000.00	25,000.00	25,000.00

Part II: Supporting Pages – Physical Needs Work Statement(s)							
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2011</u> FFY 2011			Work Statement for Year: <u>2012</u> FFY 2012			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	1406 Operations	L/S	7,000.00	1406 Operations	L/S	7,000.00	
	1410 Administration	L/S	2,500.00	1410 Administration	L/S	2,500.00	
	1430 Fees & Cost	L/S	6,000.00	1430 Fees & Cost	L/S	6,000.00	
	1450 Site Improvements: a. Complete additional parking bays	L/S	7,500.00	1460 Dwelling Structures: a. New EE windows	L/S	7,500.00	
Subtotal of Estimated Cost			\$ 23,000.00	Subtotal of Estimated Cost			\$ 23,000.00

*EE = energy efficient

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2013</u> FFY <u>2013</u>			Work Statement for Year: <u>2014</u> FFY <u>2014</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	1406 Operations	L/S	7,000.00	1406 Operations	L/S	7,000.00
	1410 Administration	L/S	2,500.00	1410 Administration	L/S	2,500.00
	1430 Fees & Cost	L/S	6,000.00	1430 Fees & Cost	L/S	6,000.00
	1460 Dwelling Structures: a. EE HVAC b. EE water heaters c. EE windows	L/S	7,500.00	1460 Dwelling Structures: a. Roofing b. VCT floor tile a. EE windows	L/S	7,500.00
	1470 Non-Dwelling Structures: a. Picnic table with shelter (Isabella Street)					
	Subtotal of Estimated Cost		\$ 23,000.00	Subtotal of Estimated Cost		\$ 23,000.00

*EE = energy efficient

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2010</u> FFY <u>2011</u>		Work Statement for Year <u>2011</u> FFY <u>2012</u>	
	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	1408 Management Improvements:		1408 Management Improvements:	
	a. Comm. & staff training	2,000.00	a. Comm. & staff training	2,000.00
		Subtotal of Estimated Cost	\$ 2,000.00	Subtotal of Estimated Cost

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2012</u> FFY <u>2013</u>		Work Statement for Year <u>2013</u> FFY <u>2014</u>	
	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	1408 Management Improvements:		1408 Management Improvements:	
	a. Comm. & staff training	2,000.00	a. Comm. & staff training	2,000.00
		Subtotal of Estimated Cost	\$ 2,000.00	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: Abbeville Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P186501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010

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

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

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

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

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

Part I: Summary					
PHA Name: Abbeville Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P186501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2010 FFY of Grant Approval: 2010			
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	25,000			
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 04/16/2010		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P186501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	OPERATIONS	1406	3	7,000				
	MANAGEMENT IMPROVEMENTS:							
HA-Wide	a. Commissioner & staff Training	1408	3	2,000				
	ADMINISTRATION:							
HA-Wide	Salary & Benefits	1410	3	2,500				
	FEES & COSTS:							
GA186-1	a. Preparation of CFP Budget, Close-out Docs and other related items.	1430	3	3,000				
	b. Program Administration			3,000				
GA186-1	SITE IMPROVEMENTS:							
	a. Complete installation of parking bays	1450	5	6,000				
	NON-DWELLING STRUCTURES:							
	a. Metal carport for parking HA truck	1470	1	1,500				
	TOTAL			25,000				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Abbeville Housing Authority				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	9/15/2012		9/15/2014		
GA186-1	9/15/2012		9/15/2014		

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

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

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: Abbeville Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06S18650109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	2,767		0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	6,000		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	20,000		0	0
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				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06S18650109 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 type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2009				<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	28,767		0	0
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	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06S186501 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	ADMINISTRATION:							
	a. Salary & Benefits for part time Executive Director to adminstrate grant	1410	1	2,767		0	0	
PHA-Wide	FEES & COSTS:							
	a. Architectural, Engineering, & development services fees	1430	1	4,000		0	0	
1	b. Construction Inspections (COW)	1430	1	2,000		0	0	
GA186-1	SITE IMPROVEMENTS:							
	a. Installation of additional concrete parking bays	1450	10	20,000		0	0	
	TOTAL			28,767		0	0	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
GA186-1	03/17/2010	03/17/2010	03/17/2012		

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

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

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: Abbeville Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P18650109 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 type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2009 <input type="checkbox"/> Final Performance and Evaluation Report		
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Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	5,500		5,500	0
3	1408 Management Improvements	1,500		0	
4	1410 Administration (may not exceed 10% of line 21)	2,208		2,208	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	6,000		6,000	2,000
8	1440 Site Acquisition				
9	1450 Site Improvement	7,400		0	0
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				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P18650109 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 type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2009				<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	22,608		13,708	2,000
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 04/16/2010		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P18650109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	OPERATIONS	1406	1	5,500		5,500	0	In progress
	MANAGEMENT IMPROVEMENTS:							
HA-Wide	a. Commissioner & staff Training	1408	1	1,500		0	0	Not started
	ADMINISTRATION:							
HA-Wide	Salary & Benefits	1410	1	2,208		2,208	0	In progress
	FEES & COSTS:							
GA186-1	a. Preparation of CFP Budget, Close-out Docs and other administrative items.	1430	1	4,500		4,500	2,000	In progress
	b. Preparation & submission of 5-Year/ Annual Plan	1430	1	1,500		1,500	0	In progress
	SITE IMPROVEMENTS:							
GA186-1	a. Repairs and modifications to curb & gutters.	1450	1	7,400		0	0	Not started
	b. Install additional parking bays.		4					Not started
	TOTAL			22,608		13,708	2,000	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Abbeville Housing Authority				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	9/14/2011		9/14/2013		
GA186-1	9/14/2011		9/14/2013		

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

Part I: Summary		
PHA Name: Abbeville Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P18650108 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	11,027		11,027	11,027
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	5,700		5,700	5,700
8	1440 Site Acquisition				
9	1450 Site Improvement	6,000		0	0
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				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P18650108 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2008 FFY of Grant Approval: 2008	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2009		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	22,727		22,727	16,727
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 04/16/2010		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P18650108 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	OPERATIONS	1406	1	11,027		11,027	11,027	Completed
	FEES & COSTS:							
GA186-1	a. Preparation of CFP Budget, Close-out Docs and other related items.		1	3,000		3,000	3,000	Completed
	b. Preparation & submission of Annual Plan		1	500		500	500	Completed
	c. Misc. Consulting		1	2,200		2,200	2,200	Completed
	SITE IMPROVEMENTS:							
GA186-1	a. Repairs and modifications to curb & gutters.	1450	1	6,000		0	0	In Progress
	b. Install additional parking bays.							
	TOTAL			22,727		22,727	16,727	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Abbeville Housing Authority				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	6/12/2010	6/30/2010	6/12/2012		
GA186-1	6/12/2010	6/30/2010	6/12/2012		

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

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

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: Abbeville Housing Authority	Grant Type and Number Capital Fund Program Grant No: GA06P18650107 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: 001)
<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 ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	10,913	10,913	10,913	10,913
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	2,300	870	870	870
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4,000	3,830	3,830	3,830
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	6,000	7,600	7,600	7,600
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P18650107 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: 001)	
<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 ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	23,213	23,213	23,213	23,213
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 04/16/2010		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Abbeville Housing Authority		Grant Type and Number Capital Fund Program Grant No: GA06P18650107 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	OPERATIONS	1406	L/S	10,913	8,913	8,913	8,913	Completed
	ADMINISTRATION:							
PHA-Wide	a. Salaries & Benefits	1410	L/S	2,300	870	870	870	Completed
	FEES & COSTS:							
GA186-1	a. Fee for preparing CFP Budget, P & E Reports, Close-out Documents and other related documents	1430	L/S	4,000	5,830	5,830	5,830	Completed
	SITE IMPROVEMENTS:							
GA186-1	a. Repairs and modifications to curb & gutters. b. Install additional parking bays.	1450						
	DWELLING STRUCTURES:							
GA186-1	a. Unit renovations Electrical, Plumbing, Painting, Roofing and Interior	1460	1	6,000	6,000	6,000	6,000	Completed
	b. Emergency repair at #5 Isabella	1460	1	1,600	1,600	1,600	1,600	Completed
	TOTAL			23,213	23,213	23,213	23,213	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Abbeville Housing Authority					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	9/12/2009	12/31/2008	9/12/2011	9/12/2009	
GA186-1	9/12/2009	12/31/2008	9/12/2011	9/12/2009	

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