

<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>Scott County Housing Authority</u> PHA Code: <u>IL 073</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>01/01/2010</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>105</u> Number of HCV units: <u>0</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
	PHA 1:				PH HCV
	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: 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.				
<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. <b>HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.</b> SCHA Goal: Expand the supply of assisted housing Objectives: Reduce public housing vacancies: SCHA Goal: Improve the quality of assisted housing Objectives: Improve public housing management and increase customer satisfaction <b>HUD Strategic Goal: Improve community quality of life and economic vitality</b> SCHA Goal: Provide an improved living environment Objective: Implement public housing security improvements				
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b><i>Due to ARRA Stimulus funding.</i></b> (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. <b><i>Available at 143 South Walnut, Winchester, IL</i></b>				
<b>7.0</b>	<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>				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
<b>8.1</b>	<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. <b><i>See attached 2010 Annual Plan; 2009 Stimulus Performance and Evaluation Report; 2009 Performance and Evaluation Report; 2008 Performance and Evaluation Report; 2007 Performance and Evaluation Report; and 2006 Performance and Evaluation Report</i></b>				
<b>8.2</b>	<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. <b><i>See attached Five-Year Action Plan</i></b>				
<b>8.3</b>	<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.				

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><i>See attached</i></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><i>See attached</i></p>
10.0	<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>The PHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of our public housing policies.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>A. Substantial Deviation from the 5-Year Plan  The Scott County Housing Authority's Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> <li>• changes to rent or admissions policies or organization of the waiting list;</li> <li>• additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and</li> <li>• Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.</li> </ul> <p>b. Significant Amendment or Modification to the Annual Plan  The Scott County Housing Authority's Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> <li>• changes to rent or admissions policies or organization of the waiting list;</li> <li>• additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and</li> <li>• Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.</li> </ul>
11.0	<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>

- 11.0
- (f) RAB had no comments
  - (g) No elements of Agency Plan were challenged.

**CARBON MONOXIDE DETECTOR UPDATE**

The Scott County Housing Authority has met the requirements of the Carbon Monoxide Alarm Detector Act by completing the installation of carbon monoxide detectors as of December 28, 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**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-10</u>			<b>Replacement Housing Factor Grant No:</b>	<b>FFY of Grant:</b> <u>2010</u> <b>FFY of Grant Approval:</b>
<b>Type of Grant</b> <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>	14,212.00				
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	3,000.00				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	28,424.00				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	96,485.00				
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 <sup>4</sup>					
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)	142,121.00				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

<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.

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Part I: Summary					
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-10</u>		<b>Replacement Housing Factor Grant No:</b>  <b>FFY of Grant:</b> <u>2010</u> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <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
Signature of Executive Director <i>Julie Bettengo</i>		Date 10-14-09		Signature of Public Housing Director  Date	



Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Scott County 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)	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	Reasons for Revised Target Dates <sup>1</sup>
IL 73-3B	12/31/2012		12/31/2014		
HA Wide	12/31/2012		12/31/2014		

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.

**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 Scott County Housing Authority, IL 073		Locality (City/County & State) Winchester/Scott County//Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	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	Annual Statement	96,485.00	96,485.00	96,485.00	96,485.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		3,000.00	3,000.00	3,000.00	3,000.00
F.	Other		28,424.00	28,424.00	28,424.00	28,424.00
G.	Operations		14,212.00	14,212.00	14,212.00	14,212.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		142,121.00	142,121.00	142,121.00	142,121.00
L.	Total Non-CFP Funds					
M.	Grand Total		142,121.00	142,121.00	142,121.00	142,121.00

<b>Part I: Summary (Continuation)</b>						
PHA Name/Number Scott County Housing Authority, IL 073		Locality (City/County & State) Winchester/Scott County//Illinois			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	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
		Annual Statement				
	IL 73-1			96,485.00	25,881.00	30,000.00
	IL 73-2		50,485.00		27,302.00	18,000.00
	IL 73-3A		46,000.00			48,485.00
	IL 73-9C				43,302.00	









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**Expires 4/30/2011**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06S073501-09</u>			<b>Replacement Housing Factor Grant No:</b>	<b>FFY of Grant:</b> <u>2009</u> <b>FFY of Grant Approval:</b> <u>2009</u>
<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:    ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <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					
4	1410 Administration (may not exceed 10% of line 21)	6,000.00		0.00	0.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	37,482.00		0.00	0.00	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	123,927.00		0.00	0.00	
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 <sup>4</sup>					
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)	167,409.00		0.00	0.00	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

<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.

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

<b>Part I: Summary</b>					
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL06S073501-09</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2009</u>	
				FFY of Grant Approval: <u>2009</u>	
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: 6/30/09				<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
Signature of Executive Director <i>Julie Hettinger</i>		Date <u>10-14-09</u>		Signature of Public Housing Director	
				Date	

<b>Part II: Supporting Pages</b>										
PHA Name: Scott County Housing Authority			Grant Type and Number Capital Fund Program Grant No: IL06S073501-09 Replacement Housing Factor Grant No:			CFPP (Yes/No): No			Federal FFY of Grant: <b>2009</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 <sub>2</sub>	Funds Expended <sub>2</sub>			
HA Wide	Administration	1410		6,000.00		0.00	0.00	0% Complete		
	A/E Fees, Mod. Consult & PNA	1430		37,482.00		0.00	0.00	0% Complete		
				<b>43,482.00</b>		<b>0.00</b>	<b>0.00</b>			
IL 73-2	Blown in insulation	1460		11,547.00		0.00	0.00	0% Complete		
	Replace and add lighting	1460		4,000.00		0.00	0.00	0% Complete		
	<b>Sub total</b>			<b>15,547.00</b>		<b>0.00</b>	<b>0.00</b>			
IL 73-3	Blown in insulation	1460		45,707.00		0.00	0.00	0% Complete		
	Replace and add lighting	1460		31,000.00		0.00	0.00	0% Complete		
	<b>Sub total</b>			<b>76,707.00</b>		<b>0.00</b>	<b>0.00</b>			
IL 73-9	Replace and add lighting	1460		31,673.00		0.00	0.00	0% Complete		
	<b>Sub total</b>			<b>31,673.00</b>		<b>0.00</b>	<b>0.00</b>			
	<b>Grand Total</b>			<b>167,409.00</b>		<b>0.00</b>	<b>0.00</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.

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Scott County 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 <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	3/17/2010		3/17/2012			
IL 73-2	3/17/2010		3/17/2012			
IL 73-3	3/17/2010		3/17/2012			
IL 73-9	3/17/2010		3/17/2012			

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.

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<b>Part I: Summary</b>					
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-09</u>		Replacement Housing Factor Grant No:	
				<b>FFY of Grant:</b> <u>2009</u>	
				<b>FFY of Grant Approval:</b> <u>2009</u>	
<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: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09				<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>	14,212.00		0.00	0.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	3,000.00		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	28,000.00		0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	96,909.00		0.00	0.00
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 <sup>4</sup>				
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)	142,121.00		0.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<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.

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PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-09</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2009</u>	
				FFY of Grant Approval: <u>2009</u>	
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: 6/30/09				<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
Signature of Executive Director <i>Julie Bettenger</i>		Date <i>10-14-09</i>		Signature of Public Housing Director Date	





Annual Statement/Performance and Evaluation Report  
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**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-08</u>		<b>FFY of Grant:</b> <u>2008</u> <b>FFY of Grant Approval:</b> <u>2008</u>	
Replacement Housing Factor Grant No:					
<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:    ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <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>	13,225.00		0.00	0.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	3,000.00		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	27,000.00		0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	89,031.00			
10	1460 Dwelling Structures			0.00	0.00
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 <sup>4</sup>				
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)	132,256.00		0.00	0.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<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>				
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-08</u>		Replacement Housing Factor Grant No:  FFY of Grant: <u>2008</u> FFY of Grant Approval: <u>2008</u>
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <input type="checkbox"/> Revised Annual Statement (revision no: ) <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
Signature of Executive Director <i>Julie Hollinger</i>		Date <u>10-14-09</u>		Signature of Public Housing Director  Date

<b>Part II: Supporting Pages</b>								
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P073501-08 Replacement Housing Factor Grant No:			CFFP (Yes/No): No		Federal FFY of Grant: <b>2008</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 <sub>2</sub>	Funds Expended <sub>2</sub>	
HA Wide Operations	Housing Operations	1406	10%	13,225.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>13,225.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP	1410	2%	3,000.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>3,000.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Fees & Cost	A/E Services	1430	100%	27,000.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>27,000.00</b>		<b>0.00</b>	<b>0.00</b>	
IL 73-1	Replace sewer lines	1450	1,000 LF	30,000.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>30,000.00</b>		<b>0.00</b>	<b>0.00</b>	
IL 73-2	Replace sewer lines	1450	1,000 LF	30,000.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>30,000.00</b>		<b>0.00</b>	<b>0.00</b>	
IL 73-3A	Replace sewer lines	1450	1000 LF	29,031.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>29,031.00</b>		<b>0.00</b>	<b>0.00</b>	
	<b>Grand Total</b>			<b>132,256.00</b>		<b>0.00</b>	<b>0.00</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.

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Scott County 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 <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
IL 73-1	6/12/2010		6/12/2012			
IL 73-2	6/12/2010		6/12/2012			
IL 73-3A	6/12/2010		6/12/2012			
HA Wide	6/12/2010		6/12/2012			

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**

<b>Part I: Summary</b>					
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-07</u>		<b>FFY of Grant:</b> <u>2007</u> <b>FFY of Grant Approval:</b> <u>2007</u>	
Replacement Housing Factor Grant No:					
<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: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <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>	13,508.00		0.00	0.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	3,000.00		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	27,017.00		750.00	750.00
8	1440 Site Acquisition				
9	1450 Site Improvement	91,562.00		20,967.13	0.00
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 <sup>4</sup>				
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)	135,087.00		21,717.13	750.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<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.

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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>					
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-07</u>		Replacement Housing Factor Grant No:	
				FFY of Grant: <u>2007</u>	
				FFY of Grant Approval: <u>2007</u>	
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: 6/30/09 <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
Signature of Executive Director <i>Julie Hettenger</i>		Date <i>10-14-09</i>		Signature of Public Housing Director Date	

<b>Part II: Supporting Pages</b>								
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P073501-07 Replacement Housing Factor Grant No:			CFFP (Yes/No): No		Federal FFY of Grant: <b>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 <sub>2</sub>	Funds Expended <sub>2</sub>	
HA Wide Operations	Housing Operations	1406	10%	13,508.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>13,508.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP	1410	2%	3,000.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>3,000.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Fees & Cost	A/E Services	1430	100%	27,017.00		750.00	750.00	3% Complete
	<b>Subtotal</b>			<b>27,017.00</b>		<b>750.00</b>	<b>750.00</b>	
IL 73-3A	Replace sewer lines	1450	300 LF	22,930.00		20,962.13	0.00	0% Complete
	<b>Subtotal</b>			<b>22,930.00</b>		<b>20,962.13</b>	<b>0.00</b>	
IL 73-3B	Replace sewer lines	1450	2280 LF	68,632.00		0.00	0.00	0% Complete
	<b>Subtotal</b>			<b>68,632.00</b>		<b>0.00</b>	<b>0.00</b>	
	<b>Grand Total</b>			<b>135,087.00</b>		<b>21,717.13</b>	<b>750.00</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.

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Scott County 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 <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	9/12/2009		9/12/2011			
IL 73-3A	9/12/2009		9/12/2011			
IL 73-3B	9/12/2009		9/12/2011			

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**

<b>Part I: Summary</b>					
<b>PHA Name:</b> Scott County Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-06</u>		<b>FFY of Grant:</b> <u>2006</u> <b>FFY of Grant Approval:</b> <u>2006</u>	
Replacement Housing Factor Grant No:					
<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: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/09 <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>	12,800.00		12,800.00	12,800.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	3,000.00		3,000.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,800.00		20,800.00	6,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	85,586.00		85,586.00	42,775.13
10	1460 Dwelling Structures	9,787.00		9,787.00	9,787.00
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 <sup>4</sup>				
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)	131,973.00		131,973.00	71,362.13
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				

<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>				
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL06P073501-06</u>		Replacement Housing Factor Grant No:  FFY of Grant: <u>2006</u> FFY of Grant Approval: <u>2006</u>
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: <u>6/30/09</u> <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
Signature of Executive Director <i>Julie Bettinger</i>		Date <u>10-14-09</u>		Signature of Public Housing Director  Date

<b>Part II: Supporting Pages</b>								
PHA Name: Scott County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P073501-06 Replacement Housing Factor Grant No:			CFFP (Yes/No): No		Federal FFY of Grant: <b>2006</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>	
HA Wide Operations	Housing Operations	1406	10%	12,800.00		12,800.00	12,800.00	Completed
	<b>Subtotal</b>			<b>12,800.00</b>		<b>12,800.00</b>	<b>12,800.00</b>	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP	1410	2%	3,000.00		3,000.00	0.00	0% Complete
	<b>Subtotal</b>			<b>3,000.00</b>		<b>3,000.00</b>	<b>0.00</b>	
HA Wide Fees & Cost	A/E Services	1430	100%	20,800.00		20,800.00	6,000.00	29% Complete
	<b>Subtotal</b>			<b>20,800.00</b>		<b>20,800.00</b>	<b>6,000.00</b>	
IL 73-1	A. Replace sidewalks	1450	4300 SF	21,396.00		21,396.00	21,396.00	Completed
	B. install dryer vents	1460	100%	4,851.00		4,851.00	4,851.00	Completed
	<b>Subtotal</b>			<b>26,247.00</b>		<b>26,247.00</b>	<b>26,247.00</b>	
IL 73-2	A. Replace sidewalks	1450	4200 SF	21,397.00		21,397.00	21,379.00	99% Complete
	B. install dryer vents	1460		4,936.00		4,936.00	4,936.00	Completed
	<b>Subtotal</b>			<b>26,333.00</b>		<b>26,333.00</b>	<b>26,315.00</b>	
IL 73-9	A. Replace sidewalks	1450	4200 SF	21,396.00		21,396.00	0.00	0% Complete
	<b>Subtotal</b>			<b>21,396.00</b>		<b>21,396.00</b>	<b>0.00</b>	
IL 73-10	A. Replace sidewalks	1450	4200 SF	21,397.00		21,397.00	0.00	0% Complete
	<b>Subtotal</b>			<b>21,397.00</b>		<b>21,397.00</b>	<b>0.00</b>	
	<b>Grand Total</b>			<b>131,973.00</b>		<b>131,973.00</b>	<b>71,362.13</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.

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Scott County Housing Authority				IL06P073501-06		Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	6/30/2008	6/30/2008	7/17/2010			
IL 73-1	6/30/2008	6/30/2008	7/17/2010			
IL 73-2	6/30/2008	6/30/2008	7/17/2010			

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.

## **9.0 Statement of Housing Needs**

<b>Housing Needs of Families on the Public Housing Waiting List</b>			
	Number of families	Percentage of total families	Annual Turnover
Waiting list total	34		50
Extremely low income <=30% AMI	32	94	
Very low income (>30% but <=50% AMI)	2	6	
Low income (>50% but <80% AMI)			
Families with children	30	88	
Elderly families	2	6	
Families with Disabilities	2	6	
Race/ethnicity White	32	94	
Race/ethnicity Black	2	6	
<b>Characteristics by Bedroom Size</b>			
1 Bedroom	14	41	16
2 Bedroom	15	44	17
3 Bedroom	4	12	15
4 Bedroom	1	3	2
The waiting list is open			

## **9.1 Strategy for Addressing Needs**

### **Strategies**

**Need: Shortage of affordable housing for all eligible populations**

**Strategy 1. Maximize the number of affordable units available to the SCHAs within its current resources by:**

Employing effective maintenance and management policies to minimize the number of public housing units off-line. Reduce turnover time for vacated public housing units, and reduce time to renovate public housing units.

**Strategy 2: Increase the number of affordable housing units by:**

**Need: Specific Family Types: Families at or below 50% of median**

**Target available assistance to families at or below 50% of AMI**

Employ admissions preferences aimed at families who are working and adopt rent policies to support and encourage work.

### **Reasons for Selecting Strategies**

The factors listed below influenced the SCHAs' selection of the strategies it will pursue.

Funding and staffing constraints

Limited availability of sites for assisted housing

Influence of the housing market on SCHAs programs

## Violence Against Women Act (VAWA) Policy

Title VI of the VAWA 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. 2005 VAWA Pub. L. 109-162; Stat. 2960 signed into law on January 5, 2006 and codified at 42 U.S.C. §1437d(l) and 1435f(d), (0) & 1 and (u)

### 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 SCHA to respond appropriately to the violence while maintaining a safe environment for SCHA, employees, tenants, applicants, program participants and others.

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

This Policy is incorporated into SCHA's "Admission and Continued Occupancy Policy" and applies to all SCHA housing programs.

### 2.0 Definitions

The definitions in this Section apply only to this Policy.

- 2.1 **Confidentiality:** Means that SCHA will not enter information provided to SCHA by a victim alleging domestic violence 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. 42 U.S.C. §1437d (u)(3)(A), § 13925.

- 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 Illinois, 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 Illinois. 42 U.S.C. §1437d(u)(3)(B), § 13925.
- 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. 42 U.S.C. § 1437d(u)(3)(D), § 13925.
- 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. 42 U.S.C. §1437d(u)(3)(C), § 13925.
- 2.7 **Bona Fide Claim:** A *bonafide* claim of domestic violence, dating violence or stalking must include incidents that meet the terms and conditions in the above definitions.
- 2.8 **Victim:** Is a person who is the victim of domestic violence, dating violence, or stalking under this Policy and who has timely and completely completed the certification under 3.2 and 3.3 or as requested by SCHA.

### 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 SCHA, owner or manager within 14 business days after the party 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, SCHA, owner or manager may take action to deny or terminate participation or tenancy. 42 U.S.C. §14371 (5) & (6); 42 U.S.C. § 1437F(c)(9); 42 U.S.C. §1437f(d)(l)(B)(ii)&(iii); 42 U.S.C. §1437f(o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20) or for other good cause.

### **3.2 HUD Approved Certification**

For each incident that a person is claiming as abuse, the person shall certify to SCHA, 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 *bonafide* 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 Confirmation of Certification**

A person who is claiming victim status shall provide to SCHA, 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 or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. §1746) the professional's belief that the incident(s) in question are *bonafide* incidents of abuse; or (b) a federal, state, tribal, territorial, local police or court record.

### **3.4 Confidentiality**

SCHA, the owner and managers shall keep all information provided to SCHA under this Section confidential. SCHA, 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 request or consents to the disclosure in writing;
- (b) the disclosure is required for eviction from public housing under 42 U.S.C. §1437 l(5)&(6)(See Section 4 in this Policy)

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

- 4.1 SCHA 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 of assistance.
- 4.2 An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be 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 occupancy rights, or evicting a tenant.

- 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 of that domestic violence, dating violence or stalking.
- 4.4 Notwithstanding Sections 4.1, 4.2, and 4.2, SCHA, an owner or manager 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. 42 U.S.C. §1437d(l)(6)(B)
- 4.5 Nothing in Sections 4.1, 4.2, and 4.3 shall limit the authority of SCHA, an owner or manager, 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 SCHA, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However SCHA, owner or manager may not hold a victim to a more demanding standard.
- 4.7 Nothing in Sections 4.1, 4.2, and 4.3 limits SCHA, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the SCHA, owner or manager 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 SCHA, an owner or manager'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.

#### **4.9 Actions Against a Perpetrator**

The SCHA may evict, terminate assistance, deny admission to a program or trespass a perpetrator from its property under this Policy. 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 SCHA or law enforcement's trespass of the perpetrator; (d) preventing the delivery of the perpetrator's mail to the victim's unit; (e) providing identifying information listed in 3.2; and (f) other reasonable measures.

#### **5.0 SCHA Right to Terminate Housing and Housing Assistance Under this Policy**

- 5.1 Nothing in this Policy will restrict the SCHA, 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 SCHA, owner or manager that such a claim is false.
- 5.2 Nothing in this Policy will restrict the SCHA 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 SCHA property to come onto SCHA property including but not limited to the victim's unit or any other area under their control; or (c) if the victim tenant fails to cooperate with an established safety strategy as designed by a local victim support service provider (see 7.2).
- 5.3 Nothing in this Policy will restrict the SCHA 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.

#### **6.0 Statements of Responsibility of Tenant Victim, the SCHA to the Victim, and to the Larger Community.**

- 6.1 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 SCHA will continue to issue lease violation notices to all residents who violate the lease including those who claim a defense of domestic violence.

- 6.2 SCHA recognizes the pathologic dynamic and cycle of domestic violence and a victim of domestic violence will be referred to local victim support service providers to help victims break the cycle of domestic violence through counseling, referral and development of a safety strategy.
- 6.3 A tenant victim must take personal responsibility for exercising control over their household by accepting assistance and complying with the safety strategy or plan to best of victim's ability and reason under the circumstances. Failure to do this may be seen as other good cause.
- 6.4 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.

## **7.0 Notice to Applicants, and Participants.**

SCHA 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.

- 7.1 If the SCHA, owner or manager knows that an applicant to or participant in a SCHA housing program is the victim of dating violence, domestic violence or stalking, the SCHA, owner or manager shall inform that person of this Policy and the person's rights under it.

## **8.0 Reporting Requirements**

SCHA shall include in its 5-year plan a statement of goals, objectives, policies or programs that will serve the needs of victims. SCHA 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.

## **9.0 Conflict and Scope**

This Policy does not enlarge SCHA'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 SCHA policy such as its Statement of Policies, this Policy will control.

## **10.0 Amendment**

The Executive Director may amend this policy when it is reasonably necessary to effectuate the Policy's intent, purpose or interpretation. The proposed amendment along with the rationale for the amendment shall be submitted to the Executive Director for consideration. Where reasonably necessary, the Executive Director may approve the amendment. The amendment shall be effective and incorporated on the date that the Executive Director signs the amendment.