

<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>Elgin Housing Authority</u> PHA Code: <u>IL 092</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2010</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>255</u> Number of HCV units: <u>687</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: Our vision for the Housing Authority of Elgin is to be a high performing, vibrant and proactive housing agency with strong public public/private partnership that will promote adequate and affordable housing, economic opportunity and a suitable environment free from discrimination. The Housing Authority of Elgin will be respected and recognized throughout the region for our professional administration, legislative/policy influence, high quality housing and innovative, creative and diverse programs that meets the needs of the residents and improves the quality of life within the Housing Authority of Elgin.				
<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. See attached Mission and Objectives				
<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>Due to ARRA</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.  Display Locations For PHA Plans and Supporting Documents as well as information regarding any activities outlined in this plan can be obtained by contacting the Main administrative office of the EHA, 120 State St., Elgin, IL.				
<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> N/A				
<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. 2010 Annual Plan; 2009 Stimulus Performance and Evaluation Report; 2009 Performance and Evaluation Report; 2008 Performance and Evaluation Report; and 2007 Performance and Evaluation Report				
<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. Capital Fund Program Five-Year Action Plan 2010-2014				
<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. See attached Housing Needs</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> See attached Strategy for Addressing Housing Needs</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. See attached Progress in Meeting Mission and Goals</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p><b>Substantial Deviation from the 5-year Plan:</b> The Public Housing Authority’s (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows: 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 Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.</p> <p><b>Significant Amendment or Modification to the Annual Plan:</b> The Public Housing Authority’s (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows: 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 Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.</p>
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) Resident Advisory Board (RAB) comments.**

**Resident Advisory Board Recommendations**

Resident Advisory Board was in general agreement with policies and Agency Plan documents; with minor maintenance concerns, such as flowers, range hoods, mailboxes, and screen doors, which the Housing Authority of Elgin is handling with day-to-day work orders.

**11.0 (g) Challenged Elements**

There were no elements within the EHA annual plan that were challenged by residents, staff, Board of Commissioners or the general public.

## **5.2 Goals and Objectives**

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

PHA Goal: Expand the supply of assisted housing

Objectives:

- Reduce public housing vacancies

PHA Goal: Improve the quality of assisted housing

Objectives:

- Increase customer satisfaction
- Renovate or modernize public housing units

PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling
- Conduct outreach efforts to potential voucher landlords

### **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

### **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:

- 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.

### **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:

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

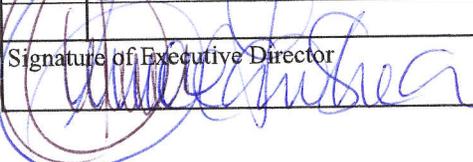
U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
<b>PHA Name:</b> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-10</u>		<b>FFY of Grant:</b> <u>2010</u> <b>FFY of Grant Approval:</b> _____	
Replacement Housing Factor Grant No: _____					
<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>	10,612.00			
3	1408 Management Improvements	40,800.00			
4	1410 Administration (may not exceed 10% of line 21)	38,200.00			
5	1411 Audit	1,100.0			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	21,000.00			
10	1460 Dwelling Structures	254,294.00			
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)	382,006.00			
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  
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Part I: Summary				
PHA Name: Elgin Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-10</u>		Replacement Housing Factor Grant No:
			FFY of Grant: <u>2010</u>	FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated      Expended
Signature of Executive Director 		Date <u>1/15/10</u>	Signature of Public Housing Director Date	

<b>Part II: Supporting Pages</b>								
PHA Name: Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06P092501-10 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u> ):		<b>Federal FFY of Grant:</b> <b>2010</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	3%	10,612.00				
	<b>Sub total</b>			<b>10,612.00</b>				
HA Wide Management Improvements	A. Resident & Staff training B. Upgrade computer software	1408 1408	8 EA 20 %	28,000.00 12,800.00				
	<b>Sub total</b>			<b>40,800.00</b>				
HA Wide Admin Cost	Partial salary of staff involved in CFP	1410	10%	38,200.00				
	<b>Sub total</b>			<b>38,200.00</b>				
HA Wide Audit	CFP audit fees	1411	100%	1,100.00				
	<b>Sub total</b>			<b>1,100.00</b>				
HA Wide Fees and Cost	A/E Services	1430	100%	16,000.00				
	<b>Sub total</b>			<b>16,000.00</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: Elgin Housing Authority      IL06P029501-10					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 <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IL 92-2	3/31/2012		3/31/2014		
IL 92-4	3/31/2012		3/31/2014		
HA Wide	3/31/2012		3/31/2014		

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 4/30/2012

<b>Part I: Summary</b>						
PHA Name/Number Elgin Housing Authority/IL 092		Locality (City/County & State) Elgin/Kane 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	275,294.00	275,294.00	275,294.00	275,294.00
C.	Management Improvements		40,800.00	40,800.00	40,800.00	40,800.00
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		38,200.00	38,200.00	38,200.00	38,200.00
F.	Other		17,100.00	17,100.00	17,100.00	17,100.00
G.	Operations		10,612.00	10,612.00	10,612.00	10,612.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		382,006.00	382,006.00	382,006.00	382,006.00
L.	Total Non-CFP Funds					
M.	Grand Total		382,006.00	382,006.00	382,006.00	382,006.00

<b>Part I: Summary (Continuation)</b>						
PHA Name/Number Elgin Housing Authority/IL 092		Locality (City/County & State) Elgin/Kane 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 92-2		207,500	87,500.00	87,500.00	48,000.00
	IL 92-3			187,794	187,794.00	70,000.00
	IL 92-4		66,794			157,294.00
	HA Wide					
	<b>Sub-total</b>		<b>274,294.00</b>	<b>275,294.00</b>	<b>275,294.00</b>	<b>275,294.00</b>





<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year: 3 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
<b>See</b>	<b>HA Wide Operations</b>		<b>HA Wide Operations</b>	
<b>Annual</b>	Housing Operations	10,612.00	Housing Operations	10,612.00
<b>Statement</b>	<b>Subtotal</b>	<b>10,612.00</b>	<b>Subtotal</b>	<b>10,612.00</b>
	<b>HA Wide Management Improvements</b>		<b>HA Wide Management Improvements</b>	
	A. Resident & staff training	28,000.00	A. Resident & staff training	28,000.00
	B. Upgrade computer software	12,800.00	B. Upgrade computer software	12,800.00
	<b>Subtotal</b>	<b>40,800.00</b>	<b>Subtotal</b>	<b>40,800.00</b>
	<b>HA Wide Admin Cost</b>		<b>HA Wide Admin Cost</b>	
	Partial salary of staff involved in CFP	38,200.00	Partial salary of staff involved in CFP	38,200.00
	<b>Subtotal</b>	<b>38,200.00</b>	<b>Subtotal</b>	<b>38,200.00</b>
	<b>HA Wide Audit</b>		<b>HA Wide Audit</b>	
	CFP audit fees	1,100.00	CFP audit fees	1,100.00
	<b>Subtotal</b>	<b>1,100.00</b>	<b>Subtotal</b>	<b>1,100.00</b>
	<b>HA Wide Fees &amp; Cost</b>		<b>HA Wide Fees &amp; Cost</b>	
	A/E Services	16,000.00	A/E Services	16,000.00
	<b>Subtotal</b>	<b>16,000.00</b>	<b>Subtotal</b>	<b>16,000.00</b>
	Subtotal of Estimated Cost	\$106,712.00	Subtotal of Estimated Cost	\$106,712.00

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year: 5 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
<b>See</b>	<b>HA Wide Operations</b>		<b>HA Wide Operations</b>	
<b>Annual</b>	Housing Operations	10,612.00	Housing Operations	10,612.00
<b>Statement</b>	<b>Subtotal</b>	<b>10,612.00</b>	<b>Subtotal</b>	<b>10,612.00</b>
	<b>HA Wide Management Improvements</b>		<b>HA Wide Management Improvements</b>	
	A. Resident & staff training	28,000.00	A. Resident & staff training	28,000.00
	B. Upgrade computer software	12,800.00	B. Upgrade computer software	12,800.00
	<b>Subtotal</b>	<b>40,800.00</b>	<b>Subtotal</b>	<b>40,800.00</b>
	<b>HA Wide Admin Cost</b>		<b>HA Wide Admin Cost</b>	
	Partial salary of staff involved in CFP	38,200.00	Partial salary of staff involved in CFP	38,200.00
	<b>Subtotal</b>	<b>38,200.00</b>	<b>Subtotal</b>	<b>38,200.00</b>
	<b>HA Wide Audit</b>		<b>HA Wide Audit</b>	
	CFP audit fees	1,100.00	CFP audit fees	1,100.00
	<b>Subtotal</b>	<b>1,100.00</b>	<b>Subtotal</b>	<b>1,100.00</b>
	<b>HA Wide Fees &amp; Cost</b>		<b>HA Wide Fees &amp; Cost</b>	
	A/E Services	16,000.00	A/E Services	16,000.00
	<b>Subtotal</b>	<b>16,000.00</b>	<b>Subtotal</b>	<b>16,000.00</b>
	Subtotal of Estimated Cost	\$106,712.00	Subtotal of Estimated Cost	\$106,712.00

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<b>Part I: Summary</b>					
<b>PHA Name:</b> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06S092501-09</u>		<b>FFY of Grant:</b> <u>2009</u> <b>FFY of Grant Approval:</b> <u>2009</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: 9/30/2009 <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)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	139,390.50		100,378.00	100,378.00
10	1460 Dwelling Structures	348,618.50		283,608.29	261,279.60
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)	488,009.00		383,986.29	361,657.60
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.

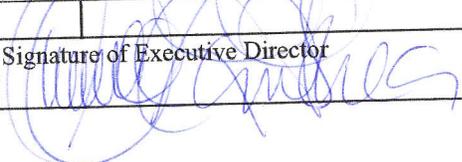
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<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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<b>Part I: Summary</b>			
<b>PHA Name:</b> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06S092501-09</u>	
		Replacement Housing Factor Grant No:	
		<b>FFY of Grant:</b> <u>2009</u> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2009 <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b> <b>Summary by Development Account</b>		<b>Total Estimated Cost</b>	
		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b> <b>Revised <sup>2</sup></b> <b>Obligated</b> <b>Expended</b>	
Signature of Executive Director 		Signature of Public Housing Director Date 1/15/10	

<b>Part II: Supporting Pages</b>											
PHA Name: Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: IL06S092501-09 Replacement Housing Factor Grant No:				CFFP (Yes/ <b>No</b> ):				<b>Federal FFY of Grant:</b> <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 <sup>2</sup>				
IL 92-3	Site improvements – sidewalks replaced	1450	LS	14,545.50		13,853.00	13,853.00	Completed			
	Parking lots	1450	LS	86,525.00		86,525.00	86,525.00	Completed			
	Erosion 583/591 – AMP II	1450	100%	38,320.00		0.00	0.00	0% Completed			
	<b>Sub total</b>			<b>139,390.50</b>		<b>100,378.00</b>	<b>100,378.00</b>				
IL 92-4	Storm doors – AMP II	1460	100%	68,094.75		68,094.75	68,094.75	Completed			
	Rehab Owasco	1460	100%	58,961.00		58,071.54	58,071.54	Completed			
	Owasco 583 inside wall – AMP II	1460	100%	6,600.00		6,600.00	6,600.00	Completed			
	Furnaces – Owasco – AMP II	1460	100%	7,000.00		7,000.00	7,000.00	Completed			
	Bathrooms walls/floor – AMP II	1460	100%	62,774.75		6,109.00	0.00	0% Completed			
	Plumbing (CPT) (Swissler)	1460	100%	77,500.00		77,500.00	61,280.31	79% Completed			
	Gas & water piping (Allweather)	1460	100%	7,455.00		0.00	0.00	0% Completed			
	Roof @ watch	1460	100%	18,494.00		18,494.00	18,494.00	Completed			
	Siding (Vinyl Tech)	1460	100%	34,889.00		34,889.00	34,889.00	Completed			
	CPT chimney vent	1460	100%	6,850.00		6,850.00	6,850.00	Completed			
	<b>Sub total</b>			<b>348,618.50</b>		<b>283,608.29</b>	<b>261,279.60</b>				
	<b>Grand Total</b>			<b>488,009.00</b>		<b>383,986.29</b>	<b>361,657.60</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: Elgin Housing Authority      IL06S029501-09					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	
IL 92-3	3/17/2010		3/17/2012		
IL 92-4	3/17/2010		3/17/2012		
HA Wide	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.

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> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-09</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: 9/30/2009 <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>	10,612.00		0.00	0.00	
3	1408 Management Improvements	40,800.00		0.00	0.00	
4	1410 Administration (may not exceed 10% of line 21)	38,200.00		0.00	0.00	
5	1411 Audit	1,100.00		0.00	0.00	
6	1415 Liquidated Damages					
7	1430 Fees and Costs	16,000.00		0.00	0.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	38,000.00		0.00	0.00	
10	1460 Dwelling Structures	241,810.00		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)	386,522.00		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>				
<b>PHA Name:</b> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-09</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2009</u> FFY of Grant Approval: <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: 9/30/2009 <input type="checkbox"/> Final Performance and Evaluation Report				
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b> <b>Expended</b>
Signature of Executive Director 		Date 1/15/10		Signature of Public Housing Director Date

<b>Part II: Supporting Pages</b>								
PHA Name: Elgin Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P092501-09 Replacement Housing Factor Grant No:			CFPP (Yes/ <u>No</u> ):		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 Operations	Housing Operations	1406	3%	10,612.00		0.00	0.00	0% Complete
	<b>Sub total</b>			<b>10,612.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Management Improvements	A. Resident training	1408	2 EA	2,000.00		0.00	0.00	0% Complete
	B. Resident training	1408	2 EA	2,000.00		0.00	0.00	0% Complete
	C. Staff training	1408	8 EA	18,400.00		0.00	0.00	0% Complete
	D. Staff training	1408	8 EA	18,400.00		0.00	0.00	0% Complete
	<b>Sub total</b>			<b>40,800.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Admin Cost	Partial salary of staff involved in CFP	1410	10%	38,200.00		0.00	0.00	0% Complete
	<b>Sub total</b>			<b>38,200.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Audit	CFP audit fees	1411	100%	1,100.00		0.00	0.00	0% Complete
	<b>Sub total</b>			<b>1,100.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Fees and Cost	A/E Services for CFP program	1430	100%	16,000.00		0.00	0.00	0% Complete
	<b>Sub total</b>			<b>16,000.00</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: Elgin Housing Authority      IL06P029501-09					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	
IL 92-2	9/15/2011		9/15/2013		
IL 92-3	9/15/2011		9/15/2013		
IL 92-4	9/15/2011		9/15/2013		
HA Wide	9/15/2011		9/15/2013		

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> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-08</u>		<b>FFY of Grant:</b> <u>2008</u> <b>FFY of Grant Approval:</b> <u>2008</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: 9/30/2009 <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>	10,612.00		0.00	0.00
3	1408 Management Improvements	40,800.00		36,214.67	32,226.63
4	1410 Administration (may not exceed 10% of line 21)	38,200.00		0.00	0.00
5	1411 Audit	1,100.00		0.00	0.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,000.00		10,207.59	10,207.59
8	1440 Site Acquisition				
9	1450 Site Improvement	18,000.00		10,504.40	10,504.40
10	1460 Dwelling Structures	264,822.00		61,715.40	60,545.40
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)	385,534.00		118,642.06	113,484.02
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.

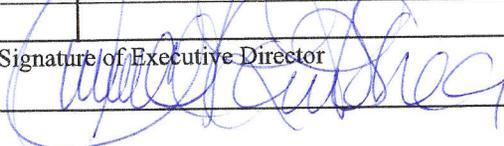
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<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>				
<b>PHA Name:</b> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: IL06P092501-08		<b>FFY of Grant:</b> 2008 <b>FFY of Grant Approval:</b> 2008
		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: 9/30/2009				<input type="checkbox"/> Final Performance and Evaluation Report
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost<sup>1</sup></b>
		<b>Original</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b> <b>Expended</b>
Signature of Executive Director		Date		Signature of Public Housing Director      Date
		1/15/10		

<b>Part II: Supporting Pages</b>								
PHA Name: Elgin Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P092501-08 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u> ):		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 <sup>2</sup>	
HA Wide Operations	Housing Operations	1406	3%	10,612.00		0.00	0.00	0% completed
	<b>Subtotal</b>			<b>10,612.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Management Improvements	A. Resident training program C. Staff training D. Upgrade computer systems	1408 1408 1408	100% 100% 20%	4,000.00 24,000.00 12,800.00		3,600.00 21,814.67 10,800.00	3,600.00 17,826.63 10,800.00	90% completed 74% completed 84% completed
	<b>Subtotal</b>			<b>40,800.00</b>		<b>36,214.67</b>	<b>32,226.63</b>	
HA Wide Administration Cost	Partial salary and benefits of staff involved in CFP	1410	10%	38,200.00		0.00	0.00	0% completed
	<b>Subtotal</b>			<b>38,200.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Audit	CFP Audit Fee	1411	100%	1,100.00		0.00	0.00	0% completed
	<b>Subtotal</b>			<b>1,100.00</b>		<b>0.00</b>	<b>0.00</b>	
HA Wide Fees & Cost	A/E Services	1430	100%	12,000.00		10,207.59	10,207.59	85% completed
	<b>Subtotal</b>			<b>12,000.00</b>		<b>10,207.59</b>	<b>10,207.59</b>	
IL 92-2	Site improvements phase	1450	20%	10,000.00		10,000.00	10,000.00	completed
	<b>Subtotal</b>			<b>10,000.00</b>		<b>10,000.00</b>	<b>10,000.00</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.

<b>Part II: Supporting Pages</b>								
PHA Name: Elgin Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P092501-08 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u> ):		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>	
IL 92-3	Renovate bathroom	1460	99 Units	264,822.00		61,715.40	60,545.40	23% completed
	<b>Subtotal</b>			<b>264,822.00</b>		<b>61,715.40</b>	<b>60,545.40</b>	
IL 92-4	Site Improvement	1450	20%	8,000.00		504.40	504.40	6% completed
	<b>Subtotal</b>			<b>8,000.00</b>		<b>504.40</b>	<b>504.40</b>	
	<b>Grand Total</b>			<b>385,534.00</b>		<b>118,642.06</b>	<b>113,484.02</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: Elgin Housing Authority			IL06P092501-08		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 92-2	6/12/2010		6/12/2012		
IL 92-3	6/12/2010		6/12/2012		
IL 92-4	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> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-07</u>		<b>FFY of Grant:</b> <u>2007</u> <b>FFY of Grant Approval:</b> <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: 9/30/2009 <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>	10,612.00		10,612.00	10,612.00
3	1408 Management Improvements	40,800.00		40,800.00	40,514.80
4	1410 Administration (may not exceed 10% of line 21)	38,200.00		38,200.00	31,217.42
5	1411 Audit	1,100.00		1,100.00	1,100.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	16,000.00		16,000.00	16,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	17,595.80		17,595.80	16,395.80
10	1460 Dwelling Structures	257,698.20		257,698.20	220,767.26
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)	382,006.00		382,006.00	336,607.28
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.

<b>Part I: Summary</b>					
<b>PHA Name:</b> Elgin Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>IL06P092501-07</u>		Replacement Housing Factor Grant No:	
				<b>FFY of Grant:</b> <u>2007</u> <b>FFY of Grant Approval:</b> <u>2007</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: 9/30/2009				<input type="checkbox"/> Final Performance and Evaluation Report	
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

<b>Part II: Supporting Pages</b>								
PHA Name: Elgin Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P092501-07 Replacement Housing Factor Grant No:			CFPP (Yes/ <u>No</u> ):		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	20%	10,612.00		10,612.00	10,612.00	completed
	<b>Subtotal</b>			<b>10,612.00</b>		<b>10,612.00</b>	<b>10,612.00</b>	
HA Wide Management Improvements	A. Resident training program B. Staff training C. Upgrade computer systems	1408 1408 1408	100% 100% 20%	4,000.00 24,000.00 12,800.00		4,000.00 24,000.00 12,800.00	4,000.00 23,714.80 12,800.00	completed 99% completed completed
	<b>Subtotal</b>			<b>40,800.00</b>		<b>40,800.00</b>	<b>40,514.80</b>	
HA Wide Administration Cost	Partial salary and benefits of staff involved in CFP	1410	10%	38,200.00		38,200.00	31,217.42	82% completed
	<b>Subtotal</b>			<b>38,200.00</b>		<b>38,200.00</b>	<b>31,217.42</b>	
HA Wide Audit	CFP Audit Fee	1411	100%	1,100.00		1,100.00	1,100.00	completed
	<b>Subtotal</b>			<b>1,100.00</b>		<b>1,100.00</b>	<b>1,100.00</b>	
HA Wide Fees & Cost	A/E Services	1430	100%	16,000.00		16,000.00	16,000.00	completed
	<b>Subtotal</b>			<b>16,000.00</b>		<b>16,000.00</b>	<b>16,000.00</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.

<b>Part II: Supporting Pages</b>								
PHA Name: Elgin Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06P092501-07 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u> ):		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>	
IL 92-3	A. Site improvements phase 1	1450	10%	17,595.80		17,595.80	16,395.80	93% completed
Clifford/Owasco	<b>Subtotal</b>			<b>17,595.80</b>		<b>17,595.80</b>	<b>16,395.80</b>	
IL 92-4	A. Replace windows	1460	35 Units	175,907.60		175,907.60	175,907.60	completed
	B. Replace roofs	1460	1 Bldg	5,000.00		5,000.00	5,000.00	completed
	C. Rehab Apts	1460	10 Units	76,790.60		76,790.60	39,859.66	52% completed
	<b>Subtotal</b>			<b>257,698.20</b>		<b>257,698.20</b>	<b>220,767.26</b>	
	<b>Grand Total</b>			<b>382,006.00</b>		<b>382,006.00</b>	<b>336,607.28</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: Elgin Housing Authority      IL06P092501-07					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	
IL 92-3	9/12/2009	5/31/2009	9/12/2011		
IL 92-4	9/12/2009	5/31/2009	9/12/2011		
HA Wide	9/12/2009	5/31/2009	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.

## 9.0 Housing Needs

### Housing Needs of Families in the Jurisdiction by Family Type

Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income <= 30% of AMI	2,809	5	5	5	3	3	2
Income >30% but <=50% of AMI	3,204	5	5	5	3	3	2
Income >50% but <80% of AMI	6,602						
Elderly	111	5	5	4	3	2	4
Families with Disabilities	226	5	5	5	4	3	4
Race/ethnicity Black	3,427	5	5	5	3	3	2
Race/ethnicity White	2,405	5	5	5	3	3	2
Race/ethnicity Hispanic	120	5	5	5	3	3	2
Race/ethnicity Asian	60	5	5	5	3	3	2

The EHA used the following sources of information to conduct this analysis and all materials are available for public inspection.

- 2005 Consolidated Plan of the Jurisdiction
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset 2000

### Housing Needs of Families on the Public Housing Waiting List

The waiting list is open.

	Number of families	Percent of total families	Annual Turnover
Waiting list total	2,337		57
Extremely low income <=30% AMI	2,057	88	
Very low income (>30% but <=50% AMI)	234	10	
Low income (>50% but <80% AMI)	46	2	
Families with children	2,244	96	
Elderly families	23	1	
Families with Disabilities	70	3	
Race/ethnicity Black	1,962	84	
Race/ethnicity White	158	6.7	
Race/ethnicity Hispanic	52	2.2	
Race/ethnicity Asian	165	7.1	
Characteristics by Bedroom Size			
1 Bedroom	36	1.5	1
2 Bedroom	1,091	46.7	33
3 Bedroom	943	40.3	20
4 Bedroom	246	10.5	2
5 Bedroom	19	.8	1
5+ Bedroom	2	.2	-

### Housing Needs of Families on the Section 8 tenant-based assistance Waiting List

The waiting list has been closed for 33 months and the EHA does not expect to reopen the list in the EHA Plan year.

The EHA does not permit specific categories of families onto the waiting list, even if generally closed.

	Number of families	Percent of total families	Annual Turnover
Waiting list total	2,258		38
Extremely low income <=30% AMI	1,648	73	
Very low income (>30% but <=50% AMI)	596	26.4	
Low income (>50% but <80% AMI)	14	.6	
Families with children	1,716	76	
Elderly families	226	10	
Families with Disabilities	316	14	
Race/ethnicity White	361	16	
Race/ethnicity Black	1739	77	
Race/ethnicity Hispanic	135	6	
Race/ethnicity Asian	23	1	

## **9.1. Strategy for Addressing Needs**

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

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

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

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

**Strategy 1: Target available assistance to families at or below 50% of AMI**

- Employ admissions preferences aimed at families who are working

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of EHA resources among families of races and ethnicities with disproportionate needs:**

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs

**Strategy 2: Conduct activities to affirmatively further fair housing**

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations

The factors listed below, influenced the EHA's selection of the strategies it will pursue:

- Funding constraints and staffing constraints
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the EHA
- Influence of the housing market on EHA programs

## **10.0 (a) Progress in meeting Mission and Goals**

The EHA 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.

We are continuing to address all vacancies very aggressively and our PHAS and SEMAP scores indicate that other operational issues are being satisfactorily addressed.

Capital funds have been utilized to provide modernization of our property and our FY 2010 application will continue that effort, plus in response to HUD email regarding the Carbon Monoxide Alarm Detector Act, the HAE has purchased carbon monoxide detectors and completed installation in all units by December 21, 2006.

PHA has implemented local preferences to improve the living environment by deconcentration, promoting income mixing, and improving security throughout our developments.

The EHA created and continues to facilitate self-sufficiency programs to improve resident employability as well as solicit support services for the elderly and families with disabilities.

The Community Service program has been re-instated per HUD notification and each adult member of every household has been notified as to their status. New market value flat rents are being updated, to replace the original market value flat rents.

We are confident that the EHA will be able to continue to meet and accommodate all our goals and objectives for FY 2010.

The EHA desires to continue with asset management.

The EHA had no findings from its most recent audit.

## **Statement of Financial Resources**

### **Financial Resources: Planned Sources and Uses**

<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2010 grants)</b>		
a) Public Housing Operating Fund	636,531	
b) Public Housing Capital Fund	382,006	
c) Annual Contributions for Section 8 Tenant-Based Assistance	9,067,304	
<b>2. Prior Year Federal Grants (unobligated funds only)</b>		
IL06S092501-09	104,023	Modernization
IL06P092501-09	386,522	Modernization
IL06P092501-08	266,892	
<b>3. Public Housing Dwelling Rental Income</b>		
	574,041	Housing Operations
<b>4. Other income</b>		
Laundry, Late charges and Section 8 Rent	145,540	Housing Operations
<b>Total resources</b>	<b>11,562,859</b>	

# 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 HAE to respond appropriately to the violence while maintaining a safe environment for HAE, employees, tenants, applicants, Section 8 participants, program participants and others.

The policy will assist the Housing Authority of Elgin (HAE) 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 HAE's "Admission and Continued Occupancy Policy" and "Section 8 Administration Plan" and applies to all HAE housing programs.

## 2.0 Definitions

The definitions in this Section apply only to this Policy.

- 2.1 **Confidentiality:** Means that HAE will not enter information provided to HAE 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.

## Violence Against Women Act (VAWA) Policy

- 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 HAE.

### **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 HAE, 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, HAE, 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.

## Violence Against Women Act (VAWA) Policy

### 3.2 HUD Approved Certification

For each incident that a person is claiming as abuse, the person shall certify to HAE, 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 HAE, 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

HAE, the owner and managers shall keep all information provided to HAE under this Section confidential. HAE, 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:
  - (i) eviction from public housing under 42 U.S.C. §1437 l(5)&(6)(See Section 4 in this Policy)
  - (ii) termination of Section 8 assistance under 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)(See Section 4 in this Policy); or (c) the disclosure is required by applicable law.

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

- 4.1 HAE 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.

## Violence Against Women Act (VAWA) Policy

- 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 Section 8 assistance or 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, HAE, 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 HAE, 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 HAE, 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 HAE, 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 HAE, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the HAE, 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 HAE, 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.

## Violence Against Women Act (VAWA) Policy

- 4.9 A Section 8 recipient who moves out of an assisted dwelling unit to protect their health or safety and who: (a) is a victim under this Policy; (b) reasonably believes he or she was imminently threatened by harm from further violence if he or she remains in the unit; and (c) has complied with all other obligations of the Section 8 program may receive a voucher and move to another Section 8 jurisdiction.

### **5.0 Actions Against a Perpetrator**

The HAE 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 HAE 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.

### **6.0 HAE Right to Terminate Housing and Housing Assistance Under this Policy**

- 6.1 Nothing in this Policy will restrict the HAE, 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 HAE, owner or manager that such a claim is false.
- 6.2 Nothing in this Policy will restrict the HAE 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 HAE property to come onto HAE 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).
- 6.3 Nothing in this Policy will restrict the HAE 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 HAE to the Victim, and to the Larger Community.**

## Violence Against Women Act (VAWA) Policy

- 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 HAE 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 HAE 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.
- 7.3 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.
- 7.4 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.

### **8.0 Notice to Applicants, Participants, Tenants and Section 8 Managers and Owners.**

HAE 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.

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

### **9.0 Reporting Requirements**

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

## Violence Against Women Act (VAWA) Policy

### **10.0 Conflict and Scope**

This Policy does not enlarge HAE'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 HAE policy such as its Statement of Policies or Section 8 Administration Plan, this Policy will control.

### **11.0 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.

# HOUSING AUTHORITY OF ELGIN

