

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Housing Authority of the City of Hammond</u> PHA Code: <u>IN010</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>458</u> Number of HCV units: <u>639</u>					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
PHA 1:						
PHA 2:						
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The Mission of the Hammond Housing Authority is to operate solely for the purpose of providing decent, safe and sanitary dwellings within the financial reach of families of low and moderate income as to promote service, efficiency and economy and in such manner as to achieve the economic advancement and social well being of the residents, ensuring that the facilities owned are a marketable asset to the community while identifying and addressing housing needs of the City of Hammond.					
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. See Attachments A and B.					
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. (a) There have not been any significant revisions to the previous PHA Plan. The minor modifications are as follows: 1. Revised Admissions and Continued Occupancy Policy 2. Revised Tenant Accounts Receivable Policy 3. Revised Procurement Policy 4. Revised Housing Choice Voucher Administrative Plan 5. Revised Public Housing Lease (b) A copy of the PHA Plan may be obtained at: Administration Office Turner Park Office 1402 173 rd Street 4923 Hohman Avenue Hammond, IN 46324 Hammond, IN 46320					
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. See Attachment C.					
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. See Attachment D.					

8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. See Attachment E.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. See Attachment F.
9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. See Attachment G.
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" (a) See Attachment B. (b) See Attachment H.
11.0	Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

ATTACHMENT A
Housing Authority of the City of Hammond (HHA)
Goals & Objectives Statement

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

The Housing Authority of the City of Hammond will expand the supply of housing by:

- Maintaining an average lease-up rate for its Section 8 rental assistance program of 98%.
- Maintaining an average lease-up rate for its Public Housing rental assistance program of 98%.
- Leveraging private and public funds to maintain affordable housing opportunities by demolishing distressed public housing units in order to rebuild affordable housing units; and rehabilitating outdated public housing units.

The Housing Authority of the City of Hammond will improve the quality of housing by:

- Continually evaluating and improving Public Housing and Voucher management practices.
- Publishing a monthly newsletter to notify residents of important program information, and other topics of interest.

The Housing Authority of the City of Hammond will increase housing choices by:

- Maintaining a list of available units from property owners who wish to work with the Section 8 Housing Choice Voucher Program. Lists of available units will be updated, providing participants in search of housing with a supply of available units to choose from.
- Developing a database that pinpoints housing with features accessible to persons with disabilities in the Authority's jurisdiction.
- Partnering with a developer to assist in the development of new affordable housing communities.
- Development of a homeownership program under the Section 8 Housing Choice Voucher Homeownership Program. Participants will benefit from partnerships with State, county and non-profit agencies to provide essential counseling and down payment assistance loans.

Goal: Improve community quality of life and economic vitality.

The Housing Authority of the City of Hammond will provide an improved living environment for its program participants by:

- Promoting income mixing in public housing by assuring access for lower income families into higher income developments.
- Continuing to improving the quality of its public housing and affordable housing stock through preventative maintenance inspections and rehabilitation when necessary.
- Ensuring the accessibility of public housing units by making at least 5% of its units accessible to wheelchair users.

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

The Housing Authority of the City of Hammond will promote the self-sufficiency of participating households by:

- Providing no-cost financial education to FSS program participants.
- Partnering with other agencies, such as Work One, HHA's Housing Counselor, United Neighborhoods, Inc., and the Area Career Center, to provide supportive services to participating households.

Goal: Ensure Equal Opportunity in Housing.

- The Housing Authority of the City of Hammond is committed to providing access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability. Furthermore, the Housing Authority of the City of Hammond will provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability. Finally, the Housing Authority of the City of Hammond will do its utmost to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.
- Implement Limited English Proficiency (LEP) into the ACOP policy.
- Implement Violence Against Women Act (VAWA) into the ACOP policy.

ATTACHMENT B
Housing Authority of the City of Hammond (HHA)
Annual Progress Report

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

Progress Report:

The Housing Authority of the City of Hammond has expanded the supply of housing by:

- Maintained an average lease-up rate for its Section 8 rental assistance program of 98%.
- Maintained an average lease-up rate for its Public Housing rental assistance program of 98%.
- Leveraged private and public funds to maintain affordable housing opportunities by demolishing distressed public housing units and rebuilding 68 new units of affordable housing.

The Housing Authority of the City of Hammond has also improved the quality of housing by:

- Continually evaluated and improved Public Housing and Voucher management practices.
- Published a monthly newsletter to notify residents of important program information, and other topics of interest.

The Housing Authority of the City of Hammond has increased housing choices by:

- Maintained a list of available units from property owners who wish to work with the Section 8 Housing Choice Voucher Program. Lists of available units are updated, providing participants in search of housing with a supply of available units to choose from.
- In development for a database that pinpoints housing with features accessible to persons with disabilities in the Authority's jurisdiction.
- Partnered with a developer to assist in the development of new affordable housing communities on Authority property.
- In development for a homeownership program under the Section 8 Housing Choice Voucher Homeownership Program. Participants will benefit from partnerships with State, county and non-profit agencies to provide essential counseling and down payment assistance loans.

Goal: Improve community quality of life and economic vitality.

Progress Report:

The Housing Authority of the City of Hammond has provided an improved living environment for its program participants by:

- Promoted income mixing in public housing by assuring access for lower income families into higher income developments.
- Continued improving the quality of its public housing and affordable housing stock through preventative maintenance inspections and rehabilitation when necessary.
- Ensured the accessibility of public housing units by making at least 5% of its units accessible to wheelchair users.

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

Progress Report:

The Housing Authority of the City of Hammond has promoted the self-sufficiency of participating households by:

- Provided no-cost financial education to FSS program participants.
- Partnered with other agencies, such as Work One, HHA's Housing Counselor, United Neighborhoods, Inc., and the Area Career Center, to provide supportive services to participating households.

Goal: Ensure Equal Opportunity in Housing.

Progress Report:

- The Housing Authority of the City of Hammond has committed to providing access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability. Furthermore, the Housing Authority of the City of Hammond provided a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability. Finally, the Housing Authority of the City of Hammond did its utmost to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.
- Implemented Limited English Proficiency (LEP) into the ACOP policy.
- Implemented Violence Against Women Act (VAWA) into the ACOP policy.

ATTACHMENT C
Housing Authority of City of Hammond (HHA)
Special Public Housing Programs

General Disposition

The Housing Authority of the City of Hammond is continuing with its revitalization of Columbia Center by moving forward with its third and fourth phases of mixed finance development. The Authority, via its instrumentality, Hammond Elderly Housing, Inc., has received a Low Income Housing Tax Credit (LIHTC) award to rehabilitate 110 distressed units in 58 buildings. These buildings are located on 8 parcels as defined by our master plan PUD all within Columbia Center. Another 65 units in 15 buildings will either be demolished and new units re-built on the property or they will be rehabilitated. An additional use of the CFRC award will be to purchase 14 fully serviced lots known as The Villas and the construction of 14 duplex buildings for a total of 28 additional housing units.

NEIGHBORHOOD STABILIZATION PROGRAM

Currently, the Authority has a NSP-2 application pending approval. If awarded, the Authority will be able to jump-start the purchase of multiple foreclosed properties in order to rehabilitate them for rental, and/or resale to eligible low-income families. If not awarded the NSP-2 funding, the Authority will continue with the buying HUD Dollar houses in order to rehabilitate them for rental or resale to eligible families.

SECTION 8 HOME OWNERSHIP PROGRAM

The Housing Authority of the City of Hammond is developing a Section 8 Home Ownership Program. We hope to successfully convert 5 voucher participants to home ownership during the next fiscal period.

PROJECT BASED SECTION 8 VOUCHERS

It is the intent of the Housing Authority of the City of Hammond to “project base” up to 20% of its tenant-based Section 8 Vouchers within the City of Hammond in the coming year (FY2010). Project based vouchers are an appropriate option for promoting access to affordable housing to homeless and extremely low-income individuals with multiple barriers and to those with special needs requirements. The supply of units for tenant-based assistance is very limited and project-basing is needed to assure the availability of units in the coming years.

ATTACHMENT D
Housing Authority of the City of Hammond (HHA)
Capital Improvements Plan

The main objective of the Modernization Department is to ensure the long-term viability for the Hammond Housing Authority's physical assets such as buildings, major systems, equipment and grounds.

The Authority makes extensive use of a Physical Needs Assessment that was prepared by a third party consultant in April 2008. Annual and 5 year plans are based on this report. The assessment covers all properties from 2008 through 2027. With the receipt of ARRA funds this year, the Authority has been able to accelerate its schedule as related to the Physical Needs Assessment. This will allow the Authority to complete all work related to the PNA approximately 10 years early. A new PNA will now be scheduled for 2015.

The Hammond Housing Authority is continuing with its revitalization of Columbia Center by moving forward with its third phase of mixed finance development. The Authority, via its instrumentally, Hammond Elderly Housing, has received a LIHTC award to rehabilitate 110 units in 58 buildings. These buildings are located on 8 parcels as defined by our master plan PUD all within Columbia Center.

The Hammond Housing Authority has received \$10,000,000 in CFRC Funds to assist in the third phase of revitalization (see description above) and to continue further with its revitalization of Columbia Center's fourth phase of mixed finance development. The Authority via its instrumentally, Hammond Elderly Housing intends upon award to rehab 11 units in 6 buildings, construct 2 – 2 unit buildings and demolish 9 2 story buildings containing 54 units and construct 18 duplex buildings (36 units). All work is located on 2 parcels as defined by our master plan PUD all within Columbia Center. An additional use of the CFRC award will be to purchase 14 fully serviced lots known as The Villas and the construction of 14 duplex buildings for a total of 28 additional housing units.

On September 17, 2009, HHA received approval from HUD-SAC to dispose of 112 units in 59 buildings to our instrumentally, Hammond Elderly Housing. An additional disposition application is being prepared for HUD-SAC to dispose of 65 units in 15 buildings to its instrumentally, Hammond Elderly Housing for the fourth phase of redevelopment.

ATTACHMENT E
Housing Authority of the City of Hammond (HHA)
Capital Fund Financing Program (CFFP)

The Authority will not be entering into a CFFP to repay debt.

ATTACHMENT F
Housing Authority of the City of Hammond (HHA)
Housing Needs

The housing needs of low-income, very low-income, and extremely low-income families who reside in the HHA jurisdiction are as follows:

- Additional affordable and/or subsidized units are needed so that families can truly afford the unit and meet basic needs.
- Fair distribution and development of affordable housing.
- Rehabilitation of existing sub-standard housing to create safe and decent housing units as the Columbia Center housing stock is more than 70 years old.
- Development of 4 bedroom “Granny” units for multi-generational families.
- Socioeconomic integration by including affordable units in all new developments.

ATTACHMENT G
Housing Authority of the City of Hammond (HHA)
Strategy For Addressing Housing Needs

In the fiscal year 2010, the Housing Authority of the City of Hammond will use all reasonable efforts to provide safe, decent, and affordable housing to extremely low-income, very low-income, and low-income residents of the City of Hammond and the surrounding area.

- HHA has housing units under redevelopment/construction.
- HHA plans to purchase housing units of mixed income.
- Provide opportunities for homeownership through Section 8 Homeownership Program.
- Continue to see opportunities to partner with for-profit and non-profit developers.
- Continue to expand the project-based voucher program.
- Preserve affordable housing through the purchase of Project Based Section 8 units in the affordable housing market.

Attachment H
Housing Authority of the City of Hammond
Definitions of “Substantial Deviation from the 5-Year Plan” and “Significant Amendment
or
Modification to the 5-Year Plan and Annual Plan”

Any of the following actions will be considered a *Substantial Deviation from the 5-Year Plan*:

- A change in the PHA’s approved mission statement; and
- A significant, non-emergency change in the PHA’s approved goals and objectives.

Any of the following actions will be considered a *Significant Amendment or Modification to the 5-Year Plan and Annual Plan*:

- Changes to rent or admissions policies or organization of the waiting list;
- Additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) exceeding \$25,000 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.

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the City of Hammond

Program/Activity Receiving Federal Grant Funding

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

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

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

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

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

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

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

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

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

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

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

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

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

1402 173rd Street
Hammond, IN 46324

4923 Hohman Avenue
Hammond, IN 46320

1607 173rd Street
Hammond, IN 46324

7329 Columbia Circle West
Hammond, IN 46324

Check here if there are workplaces on file that are not identified on the attached sheets.

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

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

Name of Authorized Official

Maria C. Becerra

Title

Executive Director

Signature

X



Date

October 16, 2009

**Certification of Payments
to Influence Federal Transactions**

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

Applicant Name

Housing Authority of the City of Hammond

Program/Activity Receiving Federal Grant Funding

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

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

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

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

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

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

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

Name of Authorized Official

Maria C. Becerra

Title

Executive Director

Signature



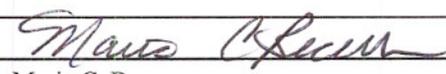
Date (mm/dd/yyyy)

October 16, 2009

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Hammond Housing Authority 1402 173rd Street Hammond, IN 46324 Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ _____	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>Maria C. Becerra</u> Title: <u>Executive Director</u> Telephone No.: <u>(219) 989-3265, ext. 303</u> Date: <u>10/16/2009</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan**

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

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Thomas M. McDermott, Jr. the Mayor of the City of Hammond certify that the Five Year and Annual PHA Plan of the Hammond Housing Authority is consistent with the Consolidated Plan of City of Hammond, Indiana prepared pursuant to 24 CFR Part 91.


9/20/2009

Signed / Dated by Appropriate State or Local Official

Resident Advisory Board (RAB) Comments

No comments or recommendations were received from the Resident Advisory Board. The meetings were held as follows:

Columbia Center Resident Advisory Board Meeting	July 15, 2009
Turner Park Resident Advisory Board Meeting	July 16, 2009

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or ___ Annual PHA Plan for the PHA fiscal year beginning 2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Housing Authority of the City of Hammond
 PHA Name

IN010
 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 10 - 20 14

Annual PHA Plan for Fiscal Years 20 10 - 20 10

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Dr. Leo A. Bryant	Chairman / Board of Commissioners
Signature	Date
	October 16, 2009

Civil Rights Certification

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

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

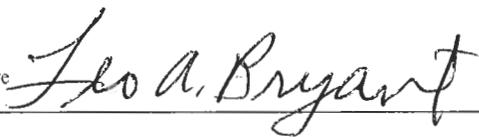
The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of the City of Hammond

PHA Name

IN010

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official Dr. Leo A. Bryant	Title Chairman / Board of Commissioners
Signature 	Date October 16, 2009

Part I: Summary						
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-06 Date of CFFP: 9/13/2007			Replacement Housing Factor Grant No:	FFY of Grant: 2006 FFY of Grant Approval: 2006
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:6 Dated 7/3/08) Updated 8/11/09 <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 20) ³	\$229,156.00	\$229,156.00	\$229,156.00	\$229,156.00	
3	1408 Management Improvements	\$107,624.00	\$107,624.00	\$107,624.00	\$107,624.00	
4	1410 Administration (may not exceed 10% of line 20)	\$144,578.00	\$114,578.00	\$116,923.78	\$116,923.78	
5	1411 Audit	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$80,000.00	\$35,379.41	\$35,379.41	\$35,379.41	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$27,000.00	\$152,951.72	\$152,951.72	\$146,376.37	
10	1460 Dwelling Structures	\$425,422.00	\$436,191.38	\$433,845.60	\$433,845.60	
11	1465.1 Dwelling Equipment-Nonexpendable	\$20,000.00	\$22,122.38	\$22,122.38	\$21,655.38	
12	1470 Non-dwelling Structures	\$10,700.00	\$10,941.61	\$10,941.61	\$10,941.61	
13	1475 Non-dwelling Equipment	\$104,300.00	\$104,024.00	\$104,024.00	\$104,024.00	
14	1485 Demolition	\$91,941.00	\$0.00	\$0.00	\$0.00	
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00	
16	1495.1 Relocation Cost	\$30,000.00	\$27,752.50	\$27,752.50	\$27,752.50	
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00	
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00	
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00	
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$1,272,721.00	\$1,242,721.00	\$1,242,721.00	\$1,235,678.65	
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	
22	Amount of line 20 Related to Section 504 Activities	\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00	
23	Amount of line 20 Related to Security -- Soft Costs	\$55,000.00	\$55,000.00	\$55,000.00	\$55,000.00	
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00	
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director <i>Maria Becerra</i>		Date 10/16/09	Signature of Public Housing Director		Date	

¹ To be completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-06 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvmts	Security Personnel Staff Training 3) Item 3	1408 " "	Total 1408	\$105,000.00	\$105,000.00	\$105,000.00	\$105,000.00	
				\$2,624.00	\$2,624.00	\$2,624.00	\$2,624.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
				\$107,624.00	\$107,624.00	\$107,624.00	\$107,624.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$144,578.00	\$114,578.00	\$116,923.78	\$116,923.78	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$80,000.00	\$35,379.41	\$35,379.41	\$35,379.41	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition (CC Old Administration B	1485		\$91,941.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$30,000.00	\$27,752.50	\$27,752.50	\$27,752.50	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:		Grant Type and Number				Federal FY of Grant:			
Hammond Housing Authority		Capital Fund Program Grant No. IN36P010501-06 CFFP (Yes/No): No Replacement Housing Factor Grant No:				2006			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
IN010-01 Columbia Center	Site: Tree trimming CC Gas & Elect Service Relocation Playground	1450	1 Lot	\$5,500.00	\$4,400.00	\$4,400.00	\$0.00		
		1450	1 Lot	\$0.00	\$86,823.00	\$86,823.00	\$81,476.49		
		1450	1	\$750.00	\$0.00	\$0.00	\$0.00		
		Total Site:			\$6,250.00	\$91,223.00	\$91,223.00	\$81,476.49	
		Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
	Total M&E:			\$0.00	\$0.00	\$0.00	\$0.00		
		Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
	Total B.E.:			\$0.00	\$0.00	\$0.00	\$0.00		
		Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
	Total DUs:			\$0.00	\$0.00	\$0.00	\$0.00		
	Dwelling Equipment: Stoves & Refrigerators	1465.1	5	\$5,000.00	\$7,122.38	\$7,122.38	\$6,655.38		
Total D.E.:			\$5,000.00	\$7,122.38	\$7,122.38	\$6,655.38			
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00		
Total ICAs:			\$0.00	\$0.00	\$0.00	\$0.00			
	Site-Wide Facilities: Maintenance Building Fence Maintenance Building Flooring	1470	1	\$5,300.00	\$5,295.00	\$5,295.00	\$5,295.00		
			1	\$5,400.00	\$5,646.61	\$5,646.61	\$5,646.61		
Total SWFs:			\$10,700.00	\$10,941.61	\$10,941.61	\$10,941.61			
	Nondwelling Equipment: Maintenance Vans Computer Software	1475 1475	2	\$36,000.00	\$35,746.00	\$35,746.00	\$35,746.00		
			1	\$60,000.00	\$60,000.00	\$60,000.00	\$60,000.00		
	Total NDE:			\$96,000.00	\$95,746.00	\$95,746.00	\$95,746.00		
Total, Columbia			Project Total:	\$117,950.00	\$205,032.99	\$205,032.99	\$194,819.48		

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-06 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2006			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
IN010-02 Turner Park	Site:								
	TP Patio fencing	1450	1	\$20,000.00	\$21,956.00	\$21,956.00	\$21,956.00		
	Playground	1450	1	\$750.00	\$0.00	\$0.00	\$0.00		
	TP Sidewalks	1450	1	\$0.00	\$9,000.00	\$9,000.00	\$9,000.00		
	TP Townhomes asphalt removal	1450	1	\$0.00	\$15,310.00	\$15,310.00	\$15,310.00		
	TP Hi-Rise Patio Landscaping	1450	1	\$0.00	\$15,462.72	\$15,462.72	\$18,633.88		
				Total Site:	\$20,750.00	\$61,728.72	\$61,728.72	\$64,899.88	
	Mechanical and Electrical:								
	None	1460			\$0.00	\$0.00	\$0.00	\$0.00	
				Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior:								
	None	1460			\$0.00	\$0.00	\$0.00	\$0.00	
				Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units:								
	TP Townhome Roofing	1460	80 units		\$45,022.00	\$168,378.53	\$166,032.75	\$174,292.75	
	TP Hi-rise Remodel	1460	119 units		\$380,400.00	\$222,812.85	\$222,812.85	\$222,812.85	
	TP Clean Outs	1460		80	\$0.00	\$45,000.00	\$45,000.00	\$36,740.00	
				Total DUs:	\$425,422.00	\$436,191.38	\$433,845.60	\$433,845.60	
	Dwelling Equipment:								
	TP HI-Rise A/C Units	1465.1	30		\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	
				Total D.E.:	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	
	Interior Common Areas:								
	None	1470			\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00		
Site-Wide Facilities:									
None	1470			\$0.00	\$0.00	\$0.00	\$0.00		
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment:									
Elect. Cart for Maintenance	1475	1		\$8,300.00	\$8,278.00	\$8,278.00	\$8,278.00		
			Total NDE:	\$8,300.00	\$8,278.00	\$8,278.00	\$8,278.00		
Total, Turner			Project Total:	\$469,472.00	\$521,198.10	\$518,852.32	\$522,023.48		

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN010-01 Columbia Center	07/18/08		07/18/10		
IN010-002 Turner Park	07/18/08		07/18/10		
PHA Wide	07/18/08		07/18/10		

¹Obligation and expenditure end date 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

PHA Name/Number		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No: __
Hammond Housing Authority		Anytown, USA				
A.	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	FFY	2006	FFY 2007	FFY 2008	FFY 2009	FFY 2010
	XX Y-01, Anywhere Homes	Annual Statement	\$0	\$0	\$0	\$0
	XX Y-02, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-03, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-04, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-05, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-06, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-07, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-08, Anywhere Homes		\$0	\$0	\$0	\$0
	HA-Wide Physical Activities		\$0	\$0	\$0	\$0
B.	Physical Improvements Subtotal		\$0	\$0	\$0	\$0
C.	Management Improvements		\$0	\$0	\$0	\$0
D.	PHA-Wide Non-dwelling Structures and Equipment		\$0	\$0	\$0	\$0
E.	Administration		\$0	\$0	\$0	\$0
F.	Other		\$0	\$0	\$0	\$0
G.	Operations		\$0	\$0	\$0	\$0
H.	Demolition		\$0	\$0	\$0	\$0
I.	Development		\$0	\$0	\$0	\$0
J.	Capital Fund Financing -- Debt Service		\$0	\$0	\$0	\$0
K.	Total CFP Funds		\$0	\$0	\$0	\$0
L.	Total Non-CFP Funds		\$0	\$0	\$0	\$0
M.	Grand Total		\$0	\$0	\$0	\$0

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2006	Work Statement for Year 4 FFY 2009			Work Statement for Year 5 FFY 2010		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements		
	Site:			Site:		
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
			\$0			

Capital Fund Program - Five-Year Action Plan

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

Part III: Supporting Pages -- Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2006	Work Statement for Year 4 FFY 2009		Work Statement for Year 5 FFY 2010	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	\$0	Subtotal of Estimated Cost	\$0

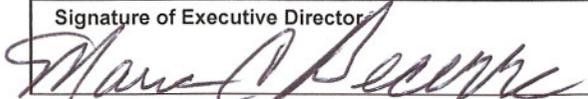
Part I: Summary		
PHA Name: Hammond Housing Authority	Grant Type and Number Capital Fund Program Grant No. IN36P010501-07 Date of CFFP: <u>9/13/2007</u>	FFY of Grant: <u>2007</u> FFY of Grant Approval: <u>2007</u>
		Replacement Housing Factor Grant No:

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: **6 Dated 9/4/09**)
 UPDATED 10/8/09

Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) ³	\$120,747.00	\$120,747.00	\$120,747.00	\$120,747.00
3	1408 Management Improvements	\$55,000.00	\$55,000.00	\$55,000.00	\$55,000.00
4	1410 Administration (may not exceed 10% of line 20)	\$120,747.00	\$120,747.00	\$120,747.00	\$68,851.12
5	1411 Audit	\$2,000.00	\$2,000.00	\$2,000.00	\$2,000.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$34,960.95	\$34,960.95	\$34,960.95	\$34,960.95
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$572,505.01	\$572,104.01	\$572,104.01	\$80,267.45
10	1460 Dwelling Structures	\$54,005.02	\$54,005.02	\$54,005.02	\$54,005.02
11	1465.1 Dwelling Equipment-Nonexpendable	\$17,610.00	\$17,610.00	\$17,610.00	\$17,610.00
12	1470 Non-dwelling Structures	\$49,502.38	\$49,502.38	\$49,502.38	\$49,502.38
13	1475 Non-dwelling Equipment	\$74,333.58	\$74,333.58	\$74,333.58	\$71,811.26
14	1485 Demolition	\$104,424.57	\$104,825.57	\$104,825.57	\$104,825.57
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Cost	\$1,639.49	\$1,639.49	\$1,639.49	\$1,639.49
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$1,207,475.00	\$1,207,475.00	\$1,207,475.00	\$661,220.24
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security -- Soft Costs	\$55,000.00	\$55,000.00	\$55,000.00	\$55,000.00
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director 	Date <u>10-16-09</u>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-07 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvmts	Security Personnel	1408		\$55,000.00	\$55,000.00	\$55,000.00	\$55,000.00	
	Staff Training	"		\$0.00	\$0.00	\$0.00	\$0.00	
	3) Item 3	"		\$0.00	\$0.00	\$0.00	\$0.00	
	Total 1408			\$55,000.00	\$55,000.00	\$55,000.00	\$55,000.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$120,747.00	\$120,747.00	\$120,747.00	\$68,851.12	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$34,960.95	\$34,960.95	\$34,960.95	\$34,960.95	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition (CC Old Administration Bldg)	1485		\$104,424.57	\$104,825.57	\$104,825.57	\$104,825.57	
"	Relocation expenses	1495.1		\$1,639.49	\$1,639.49	\$1,639.49	\$1,639.49	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:		Grant Type and Number				Federal FY of Grant:			
Hammond Housing Authority		Capital Fund Program Grant No. IN36P010501-07 CFFP (Yes/No): No Replacement Housing Factor Grant No:				2007			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
IN010-01 Columbia Center	Site: Tree trimming CC Parking Lot Expansion Playground	1450	1 Lot	\$2,958.45	\$2,958.45	\$2,958.45	\$2,958.45		
		1450	1 Lot	\$77,309.00	\$77,309.00	\$77,309.00	\$77,309.00		
		1450	1	\$0.00	\$0.00	\$0.00	\$0.00		
			Total Site:		\$80,267.45	\$80,267.45	\$80,267.45	\$80,267.45	
	Mechanical and Electrical: None	1460			\$0.00	\$0.00	\$0.00	\$0.00	
				Total M&E:		\$0.00	\$0.00	\$0.00	\$0.00
	Building Exterior: None	1460			\$0.00	\$0.00	\$0.00	\$0.00	
				Total B.E.:		\$0.00	\$0.00	\$0.00	\$0.00
	Dwelling Units: Repairs to 1305 North Dr.	1460		1 Porch	\$31,324.00	\$31,324.00	\$31,324.00	\$31,324.00	
				Total DUs:		\$31,324.00	\$31,324.00	\$31,324.00	\$31,324.00
	Dwelling Equipment: Stoves & Refrigerators	1465.1		10	\$2,660.00	\$2,660.00	\$2,660.00	\$2,660.00	
				Total D.E.:		\$2,660.00	\$2,660.00	\$2,660.00	\$2,660.00
	Interior Common Areas: None	1470			\$0.00	\$0.00	\$0.00	\$0.00	
				Total ICAs:		\$0.00	\$0.00	\$0.00	\$0.00
	Site-Wide Facilities: Maintenance Shop Services Administration Bldg. Windows	1470		1	\$27,322.38	\$27,322.38	\$27,322.38	\$27,322.38	
				54 windows	\$22,180.00	\$22,180.00	\$22,180.00	\$22,180.00	
				Total SWFs:		\$49,502.38	\$49,502.38	\$49,502.38	\$49,502.38
Nondwelling Equipment: Snow Blower Computer Software	1475	1		\$894.50	\$894.50	\$894.50	\$894.50		
	1475	1		\$72,544.58	\$72,544.58	\$72,544.58	\$70,022.26		
	Total NDE:			\$73,439.08	\$73,439.08	\$73,439.08	\$70,916.76		
Total, Columbia			Project Total:	\$237,192.91	\$237,192.91	\$237,192.91	\$234,670.59		

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name:		Grant Type and Number				Federal FY of Grant:			
Hammond Housing Authority		Capital Fund Program Grant No. IN36P010501-07 CFFP (Yes/No): No Replacement Housing Factor Grant No:				2007			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
IN010-02 Turner Park	Site: Playground TP Parking Lots/site work/sidewalks	1450	1	\$0.00	\$0.00	\$0.00	\$0.00		
			1	\$492,237.56	\$491,836.56	\$491,836.56	\$0.00		
				Total Site:	\$492,237.56	\$491,836.56	\$491,836.56		\$0.00
	Mechanical and Electrical: None	1460			\$0.00	\$0.00	\$0.00		\$0.00
			Total M&E:			\$0.00	\$0.00		\$0.00
	Building Exterior: None	1460			\$0.00	\$0.00	\$0.00		\$0.00
			Total B.E.:			\$0.00	\$0.00		\$0.00
	Dwelling Units: TP Townhome Roofing TP Townhome Exterior Painting TP Hi-rise Roofing TP Hi-Rise Solar Panels	1460	80 units	\$22,681.02	\$22,681.02	\$22,681.02	\$22,681.02		
			80 Units	\$0.00	\$0.00	\$0.00	\$0.00		
			20,000 sf	\$0.00	\$0.00	\$0.00	\$0.00		
			1 lot	\$0.00	\$0.00	\$0.00	\$0.00		
			Total DUs:			\$22,681.02	\$22,681.02		\$22,681.02
	Dwelling Equipment: TP HI-Rise A/C Units	1465.1	50	\$14,950.00	\$14,950.00	\$14,950.00	\$14,950.00		
			Total D.E.:			\$14,950.00	\$14,950.00		\$14,950.00
	Interior Common Areas: None	1470			\$0.00	\$0.00	\$0.00		\$0.00
			Total ICAs:			\$0.00	\$0.00		\$0.00
	Site-Wide Facilities: TP Phone System	1470	1	\$0.00	\$0.00	\$0.00	\$0.00		
Total SWFs:			\$0.00	\$0.00	\$0.00	\$0.00			
Nondwelling Equipment: Snow Blower	1475	1	\$894.50	\$894.50	\$894.50	\$894.50			
		Total NDE:			\$894.50	\$894.50	\$894.50	\$894.50	
Total, Turner		Project Total:		\$530,763.08	\$530,362.08	\$530,362.08	\$38,525.52		

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN010-01 Columbia Center	09/12/09	09/09/09	09/12/11		
IN010-002 Turner Park	09/12/09	09/09/09	09/12/11		
PHA Wide	09/12/09	09/09/09	09/12/11		

¹Obligation and expenditure end date 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

Part I: Summary						
PHA Name/Number		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No: __
Hammond Housing Authority		Anytown, USA				
A.	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	FFY	2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011
	XX Y-01, Anywhere Homes	Annual Statement	\$0	\$0	\$0	\$0
	XX Y-02, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-03, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-04, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-05, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-06, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-07, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-08, Anywhere Homes		\$0	\$0	\$0	\$0
	HA-Wide Physical Activities		\$0	\$0	\$0	\$0
	Physical Improvements		\$0	\$0	\$0	\$0
B.	Subtotal		\$0	\$0	\$0	\$0
C.	Management Improvements		\$0	\$0	\$0	\$0
D.	PHA-Wide Non-dwelling Structures and Equipment		\$0	\$0	\$0	\$0
E.	Administration		\$0	\$0	\$0	\$0
F.	Other		\$0	\$0	\$0	\$0
G.	Operations		\$0	\$0	\$0	\$0
H.	Demolition		\$0	\$0	\$0	\$0
I.	Development		\$0	\$0	\$0	\$0
J.	Capital Fund Financing -- Debt Service		\$0	\$0	\$0	\$0
K.	Total CFP Funds		\$0	\$0	\$0	\$0
L.	Total Non-CFP Funds		\$0	\$0	\$0	\$0
M.	Grand Total		\$0	\$0	\$0	\$0

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)							
Work Statement for Year 1 FFY 2007	Work Statement for Year 4 FFY 2010			Work Statement for Year 5 FFY 2011			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements			
	Site:			Site:			
	None		\$0	None		\$0	
	Total Site:		\$0	Total Site:		\$0	
	Mechanical and Electrical:			Mechanical and Electrical:			
	None		\$0	None		\$0	
	Total M&E:		\$0	Total M&E:		\$0	
	Building Exterior:			Building Exterior:			
	None		\$0	None		\$0	
	Total B.E.:		\$0	Total B.E.:		\$0	
	Dwelling Units:			Dwelling Units:			
	None		\$0	None		\$0	
	Total DUs:		\$0	Total DUs:		\$0	
	Dwelling Equipment:			Dwelling Equipment:			
	None		\$0	None		\$0	
	Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:				
None		\$0	None		\$0		
Total ICAs:		\$0	Total ICAs:		\$0		
Site-Wide Facilities:			Site-Wide Facilities:				
None		\$0	None		\$0		
Total SWFs:		\$0	Total SWFs:		\$0		
Nondwelling Equipment:			Nondwelling Equipment:				
None		\$0	None		\$0		
Total NDE:		\$0	Total NDE:		\$0		
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost			\$0

Part I: Summary					
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-08 Date of CFFP: _____		Replacement Housing Factor Grant No: _____	
				FFY of Grant: 2008	FFY of Grant Approval: 2008
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 Dated 9/4/09) UPATED 10/8/09	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) ³	\$117,159.00	\$117,159.00	\$0.00	\$0.00
3	1408 Management Improvements	\$60,000.00	\$60,000.00	\$55,895.00	\$16,662.67
4	1410 Administration (may not exceed 10% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$20,000.00	\$20,117.09	\$20,117.09	\$20,117.09
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$26,930.00	\$26,930.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$5,499.00	\$5,499.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$35,000.00	\$5,642.93	\$5,642.93
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$897,747.00	\$862,629.91	\$496,650.00	\$148,254.73
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$39,264.00	\$39,264.00	\$0.00	\$0.00
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$1,171,599.00	\$1,171,599.00	\$583,305.02	\$195,677.42
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$2,475.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security -- Soft Costs	\$55,000.00	\$55,000.00	\$55,000.00	\$15,684.47
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director 		Date 10-16-09		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-08 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	Security	1408	Total 1408	\$55,000.00	\$55,000.00	\$55,000.00	\$15,767.67	
	Staff Training	1408		\$5,000.00	\$5,000.00	\$895.00	\$895.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
				\$60,000.00	\$60,000.00	\$55,895.00	\$16,662.67	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$20,000.00	\$20,117.09	\$20,117.09	\$20,117.09	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition (Columbia Center))	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$897,747.00	\$862,629.91	\$496,650.00	\$148,254.73	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-08 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN010-01 Columbia Center	Site: Landscaping & Utilities	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: Stoves & Refrigerators	1465.1		\$650.00	\$650.00	\$0.00	\$0.00	
			Total D.E.:	\$650.00	\$650.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment: Computer/software/Phones	1475		\$0.00	\$35,000.00	\$5,642.93	\$5,642.93		
		Total NDE:	\$0.00	\$35,000.00	\$5,642.93	\$5,642.93		
Total, Columbia Center		Project Total:		\$650.00	\$35,650.00	\$5,642.93	\$5,642.93	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-08 CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN010-02 Turner Park	Site: Landscaping	1450	1 lot	\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: TP Townhome Hot Water Tanks	1460	10	\$3,040.00	\$3,040.00	\$0.00	\$0.00	
			Total M&E:	\$3,040.00	\$3,040.00	\$0.00	\$0.00	
	Building Exterior: TP Townhome Entry Doors	1460	20 Units	\$7,600.00	\$7,600.00	\$0.00	\$0.00	
	TP Townhome Re-Glaze Windows	1460	20 Units	\$2,162.00	\$2,162.00	\$0.00	\$0.00	
	TP Townhome Roofing	1460	14 buildings	\$0.00	\$0.00	\$0.00	\$0.00	
	Hi-Rise Roofing	1460	1 bldg	\$0.00	\$0.00	\$0.00	\$0.00	
	Hi-Rise Power Wash	1460	1 bldg	\$4,800.00	\$4,800.00	\$0.00	\$0.00	
	Hi-Rise Re-Glaze Windows	1460	20 Units	\$1,905.00	\$1,905.00	\$0.00	\$0.00	
			Total B.E.:	\$16,467.00	\$16,467.00	\$0.00	\$0.00	
	Dwelling Units: TP Hi-Rise Entry & Closet Doors	1460	20 Units	\$4,948.00	\$4,948.00	\$0.00	\$0.00	
	TP Hi-Rise Allowance for ADA	1460		\$1,475.00	\$1,475.00	\$0.00	\$0.00	
	TP Townhome Allowance for ADA	1460		\$1,000.00	\$1,000.00	\$0.00	\$0.00	
			Total DUs:	\$7,423.00	\$7,423.00	\$0.00	\$0.00	
	Dwelling Equipment: Hi-Rise AC Units	1465.1	20	\$3,029.00	\$3,029.00	\$0.00	\$0.00	
	Hi-Rise Rangehoods	1465.1	10	\$1,820.00	\$1,820.00	\$0.00	\$0.00	
			Total D.E.:	\$4,849.00	\$4,849.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
		Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Turner Park		Project Total:	\$31,779.00	\$31,779.00	\$0.00	\$0.00		

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN10-1 Columbia Center	06/13/10		06/13/12		
IN10-2 Turner Park	06/13/10		06/13/12		
PHA Wide	06/13/10		06/13/12		

¹Obligation and expenditure end date 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

Part I: Summary						
PHA Name/Number Hammond Housing Authority		Locality (City/County & State) Hammond, Lake County, Indiana			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No: __
A.	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	FFY	2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
	XX Y-01, Anywhere Homes	Annual Statement	\$0	\$0	\$0	\$0
	XX Y-02, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-03, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-04, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-05, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-06, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-07, Anywhere Homes		\$0	\$0	\$0	\$0
	XX Y-08, Anywhere Homes		\$0	\$0	\$0	\$0
	HA-Wide Physical Activities		\$0	\$0	\$0	\$0
B.	Physical Improvements Subtotal		\$0	\$0	\$0	\$0
C.	Management Improvements		\$0	\$0	\$0	\$0
D.	PHA-Wide Non-dwelling Structures and Equipment		\$0	\$0	\$0	\$0
E.	Administration		\$0	\$0	\$0	\$0
F.	Other		\$0	\$0	\$0	\$0
G.	Operations		\$0	\$0	\$0	\$0
H.	Demolition		\$0	\$0	\$0	\$0
I.	Development		\$0	\$0	\$0	\$0
J.	Capital Fund Financing -- Debt Service		\$0	\$0	\$0	\$0
K.	Total CFP Funds		\$0	\$0	\$0	\$0
L.	Total Non-CFP Funds		\$0	\$0	\$0	\$0
M.	Grand Total		\$0	\$0	\$0	\$0

Capital Fund Program - Five-Year Action Plan

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

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

Work Statement for Year 1 FFY 2008	Work Statement for Year 4 FFY 2011			Work Statement for Year 5 FFY 2012			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements			
	Site:			Site:			
	None		\$0	None		\$0	
	Total Site:		\$0	Total Site:		\$0	
	Mechanical and Electrical:			Mechanical and Electrical:			
	None		\$0	None		\$0	
	Total M&E:		\$0	Total M&E:		\$0	
	Building Exterior:			Building Exterior:			
	None		\$0	None		\$0	
	Total B.E.:		\$0	Total B.E.:		\$0	
	Dwelling Units:			Dwelling Units:			
	None		\$0	None		\$0	
	Total DUs:		\$0	Total DUs:		\$0	
	Dwelling Equipment:			Dwelling Equipment:			
	None		\$0	None		\$0	
	Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:				
None		\$0	None		\$0		
Total ICAs:		\$0	Total ICAs:		\$0		
Site-Wide Facilities:			Site-Wide Facilities:				
None		\$0	None		\$0		
Total SWFs:		\$0	Total SWFs:		\$0		
Nondwelling Equipment:			Nondwelling Equipment:				
None		\$0	None		\$0		
Total NDE:		\$0	Total NDE:		\$0		
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost			\$0

Capital Fund Program - Five-Year Action Plan

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

Part III: Supporting Pages -- Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2008	Work Statement for Year 4 FFY 2011		Work Statement for Year 5 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	\$0	Subtotal of Estimated Cost	\$0

Part I: Summary						
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. _____ Date of CFFP: _____			Replacement Housing Factor Grant No: IN36R010501-08	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"/> Revised Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 20) ³	\$0.00	\$0.00	\$0.00	\$0.00	
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00	
4	1410 Administration (may not exceed 10% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00	
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00	
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00	
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00	
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00	
17	1499 Development Activities ⁴	\$102,845.00	\$0.00	\$0.00	\$0.00	
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00	
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00	
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$102,845.00	\$0.00	\$0.00	\$0.00	
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00	
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00	
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00	
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director <i>Marc C. Becker</i>		Date <i>10-16-09</i>		Signature of Public Housing Director		Date

¹ To be completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. CFFP (Yes/No): No Replacement Housing Factor Grant No: IN36R010501-08				Federal FY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	None	1408	Total 1408	\$0.00	\$0.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$102,845.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name:		Grant Type and Number				Federal FY of Grant:		
Hammond Housing Authority		Capital Fund Program Grant No.		CFFP (Yes/No): No		2008		
		Replacement Housing Factor Grant No: IN36R010501-08						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Columbia Center			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. CFFP (Yes/No): No Replacement Housing Factor Grant No: IN36R010501-08			Federal FY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-2 Turner Park	Site: None	1450	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Turner Park			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN10-1 Columbia Center	TBD		TBD		

¹Obligation and expenditure end date 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

Part I: Summary			Locality (City/County & State)		<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No: __
PHA Name/Number Hammond Housing Authority			Hammond, Lake County, Indiana			
A.	Development Number and Name FFY	Work Statement for Year 1 2008	Work Statement for Year 2 FFY 2009	Work Statement for Year 3 FFY 2010	Work Statement for Year 4 FFY 2011	Work Statement for Year 5 FFY 2012
	IN10-1 Columbia Center	Annual Statement	\$0	\$0	\$0	\$0
	IN10-02 Turner Park		\$0	\$0	\$0	\$0
	HA-Wide Physical Activities		\$0	\$0	\$0	\$0
B.	Physical Improvements Subtotal		\$0	\$0	\$0	\$0
C.	Management Improvements		\$0	\$0	\$0	\$0
D.	PHA-Wide Non-dwelling Structures and Equipment		\$0	\$0	\$0	\$0
E.	Administration		\$0	\$0	\$0	\$0
F.	Other		\$0	\$0	\$0	\$0
G.	Operations		\$0	\$0	\$0	\$0
H.	Demolition		\$0	\$0	\$0	\$0
I.	Development		\$102,845	\$102,845	\$102,845	\$102,845
J.	Capital Fund Financing -- Debt Service		\$0	\$0	\$0	\$0
K.	Total CFP Funds		\$102,845	\$102,845	\$102,845	\$102,845
L.	Total Non-CFP Funds		\$0	\$0	\$0	\$0
M.	Grand Total		\$102,845	\$102,845	\$102,845	\$102,845

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2008	Work Statement for Year 2 FFY 2009			Work Statement for Year 3 FFY 2010		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements		
	HA-WIDE Site:			HA-WIDE Site:		
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	ON-DEMAND Mech. and Electrical:			ON-DEMAND Mech. and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	ON-DEMAND Building Exterior:			ON-DEMAND Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	ON-DEMAND Dwelling Units:			ON-DEMAND Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	HA-WIDE Dwelling Equipment:			HA-WIDE Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
HA-WIDE Interior Common Areas:			HA-WIDE Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
HA-WIDE Site-Wide Facilities:			HA-WIDE Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
HA-WIDE Nondwelling Equipment:			HA-WIDE Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
			\$0			

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2008	Work Statement for Year 4 FFY 2011			Work Statement for Year 5 FFY 2012		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements		
	Site:			Site:		
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
\$0			\$0	\$0		

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2008	Work Statement for Year 2 FFY 2009			Work Statement for Year 3 FFY 2010		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-1 Columbia Center			IN10-1 Columbia Center		
	Site:		\$0	Site:		\$0
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
			\$0			

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2008	Work Statement for Year 4 FFY 2011			Work Statement for Year 5 FFY 2012		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-1 Columbia Center			IN10-1 Columbia Center		
	Site:			Site:		
	None		\$0	None		\$0
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
None		\$0	None		\$0	
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
			\$0			

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2008	Work Statement for Year 2 FFY 2009			Work Statement for Year 3 FFY 2010		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-2 Turner Park			IN10-2 Turner Park		
	Site:		\$0	Site:		\$0
	None			None		
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
			\$0			

Part II: Supporting Pages -- Physical Needs Work Statement(s)							
Work Statement for Year 1 FFY 2008	Work Statement for Year 4 FFY 2011			Work Statement for Year 5 FFY 2012			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	IN10-2 Turner Park Site: None		\$0	IN10-2 Turner Park Site: None		\$0	
	Total Site:		\$0	Total Site:		\$0	
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: None		\$0	
	Total M&E:		\$0	Total M&E:		\$0	
	Building Exterior: None		\$0	Building Exterior: None		\$0	
	Total B.E.:		\$0	Total B.E.:		\$0	
	Dwelling Units: None		\$0	Dwelling Units: None		\$0	
	Total DUs:		\$0	Total DUs:		\$0	
	Dwelling Equipment: None		\$0	Dwelling Equipment: None		\$0	
	Total D.E.:		\$0	Total D.E.:		\$0	
	Interior Common Areas: None		\$0	Interior Common Areas: None		\$0	
	Total ICAs:		\$0	Total ICAs:		\$0	
	Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		\$0	
	Total SWFs:		\$0	Total SWFs:		\$0	
	Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		\$0	
	Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost			\$0

Capital Fund Program - Five-Year Action Plan

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

Part III: Supporting Pages -- Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2008	Work Statement for Year 2 FFY 2009		Work Statement for Year 3 FFY 2010	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	\$0	Subtotal of Estimated Cost	\$0

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Part III: Supporting Pages -- Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2008	Work Statement for Year 4 FFY 2011		Work Statement for Year 5 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Major Work Categories	Estimated Cost
See Annual Statement				
	Subtotal of Estimated Cost	\$0	Subtotal of Estimated Cost	\$0

Part I: Summary		
PHA Name: Hammond Housing Authority	Grant Type and Number Capital Fund Program Grant No. IN36P010501-09 Date of CFFP: _____	Replacement Housing Factor Grant No: FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant		UPDATED 10/8/09
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input checked="" type="checkbox"/> Revised Annual Statement
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) ³	\$117,159.00	\$98,214.00	\$0.00	\$0.00
3	1408 Management Improvements	\$60,000.00	\$55,000.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$5,000.00	\$5,000.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$20,000.00	\$68,750.00	\$68.63	\$68.63
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$84,958.00	\$210,000.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$162,822.00	\$360,180.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$6,849.00	\$35,000.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$25,000.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$50,000.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Cost	\$100,000.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$521,083.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$93,728.00	\$75,000.00	\$0.00	\$0.00
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$1,171,599.00	\$982,144.00	\$68.63	\$68.63
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director 	Date 10-16-09	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	Security	1408	Total 1408	\$55,000.00	\$50,000.00	\$0.00	\$0.00	
	Staff Training	1408		\$5,000.00	\$5,000.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
				\$60,000.00	\$55,000.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$20,000.00	\$68,750.00	\$68.63	\$68.63	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$521,083.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name:		Grant Type and Number				Federal FY of Grant:		
Hammond Housing Authority		Capital Fund Program Grant No. IN36P010501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:				2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: Tree Trimming	1450		\$5,000.00	\$10,000.00	\$0.00	\$0.00	
			Total Site:	\$5,000.00	\$10,000.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: Stoves & Refrigerators	1465.1		\$2,000.00	\$10,000.00	\$0.00	\$0.00	
			Total D.E.:	\$2,000.00	\$10,000.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: Computers	1475		\$0.00	\$50,000.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$50,000.00	\$0.00	\$0.00		
Total, Columbia Center		Project Total:		\$7,000.00	\$70,000.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
IN10-2 Turner Park	Site: Landscaping/sidewalks/fenceing	1450	1 lot	\$79,958.00	\$200,000.00	\$0.00	\$0.00		
			Total Site:	\$79,958.00	\$200,000.00	\$0.00	\$0.00		
	Mechanical and Electrical: Townhome Hot Water Tanks	1460	10	\$17,790.00	\$60,000.00	\$0.00	\$0.00		
	Hi-rise Programable Temp Controls	1460	118 units	\$14,750.00	\$0.00	\$0.00	\$0.00		
	Townhome Programable Temp Con	1460	80	\$10,000.00	\$10,000.00	\$0.00	\$0.00		
				Total M&E:	\$42,540.00	\$70,000.00	\$0.00	\$0.00	
	Building Exterior: Townhome Entry Doors	1460	20 Units	\$7,600.00	\$30,400.00	\$0.00	\$0.00		
	Townhome Re-Glaze Windows	1460	20 Units	\$2,162.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Roofing	1460	1 bldg	\$90,152.00	\$200,000.00	\$0.00	\$0.00		
	Hi-Rise Power Wash	1460	1 bldg	\$4,800.00	\$4,800.00	\$0.00	\$0.00		
	Hi-Rise Re-Glaze Windows	1460	20 Units	\$1,905.00	\$0.00	\$0.00	\$0.00		
				Total B.E.:	\$106,619.00	\$235,200.00	\$0.00	\$0.00	
	Dwelling Units: Hi-Rise Entry & Closet Doors	1460	119	\$4,948.00	\$54,980.00	\$0.00	\$0.00		
	Hi-Rise Allowance for ADA	1460		\$1,475.00	\$0.00	\$0.00	\$0.00		
	Townhome Allowance for ADA	1460		\$1,000.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Multi-purpose Room Rehab	1460	1 room	\$6,240.00	\$0.00	\$0.00	\$0.00		
				Total DUs:	\$13,663.00	\$54,980.00	\$0.00	\$0.00	
	Dwelling Equipment: Hi-Rise AC Units	1465.1	20	\$3,029.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Rangehoods	1465.1	119	\$1,820.00	\$25,000.00	\$0.00	\$0.00		
				Total D.E.:	\$4,849.00	\$25,000.00	\$0.00	\$0.00	
	Interior Common Areas: Kitchen/Nutrition Center Rehab	1470	1 Room	\$0.00	\$25,000.00	\$0.00	\$0.00		
				Total ICAs:	\$0.00	\$25,000.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00		
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00			
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Turner Park			Project Total:	\$247,629.00	\$610,180.00	\$0.00	\$0.00		

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority				Federal FY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN10-1 Columbia Center	09/14/11		09/14/13		
IN10-2 Turner Park	09/14/11		09/14/13		
PHA Wide	09/14/11		09/14/13		

¹Obligation and expenditure end date 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

Part I: Summary						
PHA Name/Number		Locality (City/County & State)			<input type="checkbox"/> Original 5-Year Plan	<input checked="" type="checkbox"/> Revision No: <u>1</u>
Hammond Housing Authority		Hammond, Lake County, Indiana				
A.	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	FFY	2009	FFY 2010	FFY 2011	FFY 2012	FFY 2013
	IN10-1 Columbia Center	Annual Statement	\$22,000	\$22,000	\$22,000	\$22,000
	IN10-02 Turner Park	Annual Statement	\$74,500	\$129,900	\$111,000	\$111,500
	HA-Wide Physical Activities	Annual Statement	\$0	\$0	\$0	\$0
B.	Physical Improvements Subtotal	Annual Statement	\$96,500	\$151,900	\$133,000	\$133,500
C.	Management Improvements	Annual Statement	\$60,000	\$60,000	\$60,000	\$60,000
D.	PHA-Wide Non-dwelling Structures and Equipment	Annual Statement	\$0	\$0	\$0	\$0
E.	Administration	Annual Statement	\$0	\$0	\$0	\$0
F.	Other	Annual Statement	\$200,000	\$200,000	\$200,000	\$200,000
G.	Operations	Annual Statement	\$98,214	\$98,214	\$98,214	\$98,214
H.	Demolition	Annual Statement	\$0	\$0	\$0	\$0
I.	Development	Annual Statement	\$527,430	\$472,030	\$490,930	\$490,430
J.	Capital Fund Financing -- Debt Service	Annual Statement	\$0	\$0	\$0	\$0
K.	Total CFP Funds	Annual Statement	\$982,144	\$982,144	\$982,144	\$982,144
L.	Total Non-CFP Funds	Annual Statement	\$0	\$0	\$0	\$0
M.	Grand Total	Annual Statement	\$982,144	\$982,144	\$982,144	\$982,144

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010			Work Statement for Year 3 FFY 2011		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-WIDE Physical Improvements			HA-WIDE Physical Improvements		
	HA-WIDE Site:			HA-WIDE Site:		
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	ON-DEMAND Mech. and Electrical:			ON-DEMAND Mech. and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	ON-DEMAND Building Exterior:			ON-DEMAND Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	ON-DEMAND Dwelling Units:			ON-DEMAND Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	HA-WIDE Dwelling Equipment:			HA-WIDE Dwelling Equipment:		
None		\$0	None		\$0	
Total D.E.:		\$0	Total D.E.:		\$0	
HA-WIDE Interior Common Areas:			HA-WIDE Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
HA-WIDE Site-Wide Facilities:			HA-WIDE Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
HA-WIDE Nondwelling Equipment:			HA-WIDE Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 4 FFY 2012			Work Statement for Year 5 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements		
	Site:			Site:		
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010			Work Statement for Year 3 FFY 2011		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-1 Columbia Center			IN10-1 Columbia Center		
	Site:			Site:		
	Tree trimming		\$6,000	Tree trimming		\$6,000
	Site lighting		\$15,000	Site lighting		\$15,000
	Total Site:		\$21,000	Total Site:		\$21,000
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	Refrigerators & Stoves		\$1,000	Refrigerators & Stoves		\$1,000
Total D.E.:		\$1,000	Total D.E.:		\$1,000	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$22,000	Subtotal of Estimated Cost		

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 4 FFY 2012			Work Statement for Year 5 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-1 Columbia Center			IN10-1 Columbia Center		
	Site:			Site:		
	Tree Trimming		\$6,000	Tree Trimming		\$6,000
	Site lighting		\$15,000	Site Lighting		\$15,000
	Total Site:		\$21,000	Total Site:		\$21,000
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
Refrigerators & Stoves		\$1,000	Refrigerators & Stoves		\$1,000	
Total D.E.:		\$1,000	Total D.E.:		\$1,000	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$22,000	Subtotal of Estimated Cost		
Subtotal of Estimated Cost			\$22,000	Subtotal of Estimated Cost		

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010			Work Statement for Year 3 FFY 2011		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-2 Turner Park Site: Landscaping		\$10,000	IN10-2 Turner Park Site: Landscaping		\$10,000
				Hi-Rise Parking Lot Paving & Sidewalks		\$46,000
				Playground Equipment		\$3,500
				Site Furniture		\$2,000
				Town Home Parking Lots & Sidewalks		\$2,400
	Total Site:		\$10,000	Total Site:		\$63,900
	Mechanical and Electrical: Hi-Rise Fire Alarm Controls upgrades		\$9,500	Mechanical and Electrical: Replace Boiler Controls		\$4,500
	Total M&E:		\$9,500	Total M&E:		\$4,500
	Building Exterior: None		\$0	Building Exterior: None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units: Hi-Rise Glazing Allowance		\$2,000	Dwelling Units: Hi-Rise Glazing Allowance		\$2,000
	Hi-Rise ADA Allowance		\$1,500	Hi-Rise ADA Allowance		\$1,500
	Town Home Glazing Allowance		\$2,000	Town Home Glazing Allowance		\$2,000
	Town Home ADA Allowance		\$1,500	Town Home ADA Allowance		\$1,500
	Town Home Flooring		\$46,000	Town Home Flooring		\$46,000
Total DUs:		\$53,000	Total DUs:		\$53,000	
Dwelling Equipment: Refrigerators & Stoves		\$2,000	Dwelling Equipment: Refrigerators & Stoves		\$2,000	
Total D.E.:		\$2,000	Total D.E.:		\$2,000	
Interior Common Areas: None		\$0	Interior Common Areas: Office Rehab		\$6,500	
Total ICAs:		\$0	Total ICAs:		\$6,500	
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost		\$74,500	Subtotal of Estimated Cost		\$129,900	

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2009	Work Statement for Year 4 FFY 2012			Work Statement for Year 5 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-2 Turner Park			IN10-2 Turner Park		
	Site: Landscaping		\$10,000	Site: Landscaping		\$10,000
	Total Site:		\$10,000	Total Site:		\$10,000
	Mechanical and Electrical: None		\$0	Mechanical and Electrical: Town Home Furnaces		\$38,000
	Total M&E:		\$0	Total M&E:		\$38,000
	Building Exterior: None		\$0	Building Exterior: None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	Hi-Rise Glazing Allowance		\$2,000	Hi-Rise Glazing Allowance		\$2,000
	Hi-Rise ADA Allowance		\$1,500	Hi-Rise ADA Allowance		\$1,500
	Town Home Glazing Allowance		\$2,000	Town Home Glazing Allowance		\$2,000
	Town Home ADA Allowance		\$1,500	Town Home ADA Allowance		\$1,500
	Town Home Flooring		\$46,000	Town Home Flooring		\$46,000
	Total DUs:		\$53,000	Total DUs:		\$53,000
	Dwelling Equipment: Refrigerators & Stoves		\$2,000	Dwelling Equipment: Refrigerators & Stoves		\$2,000
	Total D.E.:		\$2,000	Total D.E.:		\$2,000
	Interior Common Areas:			Interior Common Areas:		
	Paint Corridors		\$20,000	Hi-Rise Lobby Furniture		\$8,500
	Replace Corridor Flooring		\$26,000			
	Total ICAs:		\$46,000	Total ICAs:		\$8,500
Site-Wide Facilities: None		\$0	Site-Wide Facilities: None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment: None		\$0	Nondwelling Equipment: None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$111,000	Subtotal of Estimated Cost		
				\$111,500		

Capital Fund Program - Five-Year Action Plan

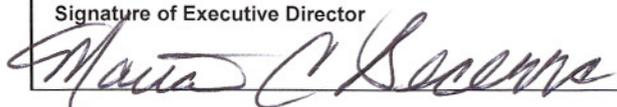
U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Part III: Supporting Pages -- Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010		Work Statement for Year 3 FFY 2011	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Major Work Categories	Estimated Cost
See Annual Statement	Security	\$55,000	Security	\$55,000
	Staff Training	\$5,000	Staff Training	\$5,000
	Subtotal of Estimated Cost	\$60,000	Subtotal of Estimated Cost	\$60,000

Capital Fund Program - Five-Year Action Plan

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

Part III: Supporting Pages -- Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2009	Work Statement for Year 4 FFY 2012		Work Statement for Year 5 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Major Work Categories	Estimated Cost
See Annual Statement	Security	\$55,000	Security	\$55,000
	Staff Training	\$5,000	Staff Training	\$5,000
	Subtotal of Estimated Cost	\$60,000	Subtotal of Estimated Cost	\$60,000

Part I: Summary						
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. _____ Replacement Housing Factor Grant No: IN36R010501-09 Date of CFFP: _____			FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 20) ³	\$0.00	\$0.00	\$0.00	\$0.00	
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00	
4	1410 Administration (may not exceed 10% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00	
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00	
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00	
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00	
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00	
17	1499 Development Activities ⁴	\$290,350.00	\$0.00	\$0.00	\$0.00	
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00	
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00	
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$290,350.00	\$0.00	\$0.00	\$0.00	
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00	
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00	
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00	
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director 		Date 10-16-09		Signature of Public Housing Director		
				Date		

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

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. CFFP (Yes/No): No Replacement Housing Factor Grant No: IN36R010501-09				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	None	1408	Total 1408	\$0.00	\$0.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$290,350.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. CFFP (Yes/No): No Replacement Housing Factor Grant No: IN36R010501-09			Federal FY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Columbia Center			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. CFFP (Yes/No): No Replacement Housing Factor Grant No: IN36R010501-09				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-2 Turner Park	Site: None	1450	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Turner Park			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN10-1 Columbia Center	TBD		TBD		

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

Part I: Summary						
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36S010501-09 Date of CFFP: _____			Replacement Housing Factor Grant No: _____	
					FFY of Grant: 2009	
					FFY of Grant Approval: 2009	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement		UPDATED 10/8/09
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 20) ³	\$0.00	\$0.00	\$0.00	\$0.00	
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00	
4	1410 Administration (may not exceed 10% of line 20)	\$161,319.00	\$0.00	\$0.00	\$0.00	
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$117,923.00	\$0.00	\$112,923.00	\$83,336.09	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$221,122.00	\$0.00	\$0.00	\$0.00	
10	1460 Dwelling Structures	\$685,801.00	\$0.00	\$0.00	\$0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	\$58,029.00	\$0.00	\$0.00	\$0.00	
12	1470 Non-dwelling Structures	\$50,000.00	\$0.00	\$0.00	\$0.00	
13	1475 Non-dwelling Equipment	\$190,000.00	\$0.00	\$3,071.42	\$3,071.42	
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00	
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00	
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00	
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00	
19	1502 Contingency (may not exceed 8% of line 20)	\$129,000.00	\$0.00	\$0.00	\$0.00	
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$1,613,194.00	\$0.00	\$115,994.42	\$86,407.51	
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00	
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00	
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00	
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director		Date		Signature of Public Housing Director		Date
		10-16-09				

¹ To be completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36S010501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	Security	1408	Total 1408	\$0.00	\$0.00	\$0.00	\$0.00	
	Staff Training	1408		\$0.00	\$0.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$161,319.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$117,923.00	\$0.00	\$112,923.00	\$83,336.09	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36S010501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: none	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: New electronic sign	1475		\$20,000.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$20,000.00	\$0.00	\$0.00	\$0.00		
Total, Columbia Center		Project Total:		\$20,000.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name:		Grant Type and Number				Federal FY of Grant:			
Hammond Housing Authority		Capital Fund Program Grant No. IN36S010501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:				2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
IN10-2 Turner Park	Site:								
	Landscaping/paving/sidewalks	1450	1 lot	\$50,000.00	\$0.00	\$0.00	\$0.00		
	Site Security Lighting	1450	5 pole lights	\$25,000.00	\$0.00	\$0.00	\$0.00		
	Fencing	1450	1200 ft.	\$15,000.00	\$0.00	\$0.00	\$0.00		
	Playground Upgrade	1450	1 lot	\$71,122.00	\$0.00	\$0.00	\$0.00		
	Post lighting at driveway entries	1450	12	\$60,000.00	\$0.00	\$0.00	\$0.00		
				Total Site:	\$221,122.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical:								
	Townhome Hot Water Tanks	1460	10	\$68,000.00	\$0.00	\$0.00	\$0.00		
	Solar Attic Fans	1460	80	\$50,000.00	\$0.00	\$0.00	\$0.00		
	Replace Air Handler - Hi-Rise	1460	1	\$10,000.00	\$0.00	\$0.00	\$0.00		
				Total M&E:	\$128,000.00	\$0.00	\$0.00	\$0.00	
	Building Exterior:								
	Replace Townhome Screen Doors	1460	160 doors	\$29,600.00	\$0.00	\$0.00	\$0.00		
	Replace Mail Boxes - Town Homes	1460	80	\$10,000.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Roofing Security Lights	1460	1 bldg	\$50,000.00	\$0.00	\$0.00	\$0.00		
	Replace Plastic Downspouts	1460	80	\$15,000.00	\$0.00	\$0.00	\$0.00		
	Replace all Hose Bibs	1460	80	\$10,000.00	\$0.00	\$0.00	\$0.00		
	Sprinklers for Hi-Rise Patio	1460	1	\$8,000.00	\$0.00	\$0.00	\$0.00		
	Remove O/H door Hi-rise Add Dlb	1460	1	\$10,000.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Drive Canopy	1460	1	\$150,000.00	\$0.00	\$0.00	\$0.00		
	Replace Plastic Downspouts	1460	80	\$21,401.00	\$0.00	\$0.00	\$0.00		
				Total B.E.:	\$304,001.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units:								
	Hi-Rise Entry & Closet Doors	1460	119	\$63,800.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Curtains in Studios	1460	63	\$10,000.00	\$0.00	\$0.00	\$0.00		
	Townhome New Kitchen Cabinets	1460	80	\$180,000.00	\$0.00	\$0.00	\$0.00		
				Total DUs:	\$253,800.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment:								
	Hi-Rise AC Units	1465.1	20	\$3,029.00	\$0.00	\$0.00	\$0.00		
	Hi-Rise Ranges	1465.1	119	\$55,000.00	\$0.00	\$0.00	\$0.00		
				Total D.E.:	\$58,029.00	\$0.00	\$0.00	\$0.00	
Interior Common Areas:									
New Access System for Hi-Rise	1470	1	\$50,000.00	\$0.00	\$0.00	\$0.00			
			Total ICAs:	\$50,000.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment:									
Hi-Rise New Garbage Chute	1475	1	\$150,000.00	\$0.00	\$0.00	\$0.00			
Exercise equipment			\$2,338.20	\$0.00	\$2,338.20	\$2,338.20			
Furniture	1475	1	\$17,661.80	\$0.00	\$733.22	\$733.22			
			Total NDE:	\$170,000.00	\$0.00	\$3,071.42	\$3,071.42		
Total, Turner Park			Project Total:	\$1,184,952.00	\$0.00	\$3,071.42	\$3,071.42		

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN10-1 Columbia Center	03/18/10		03/18/12		
IN10-2 Turner Park	03/18/10		03/18/12		
PHA Wide	03/18/10		03/18/12		

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

Part I: Summary			
PHA Name: Hammond Housing Authority	Grant Type and Number Capital Fund Program Grant No. IN01000000109T Date of CFFP: _____	Replacement Housing Factor Grant No: _____	FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) ³	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$0.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$10,000,000.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$10,000,000.00	\$0.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director <i>Maria C. Becerra</i>	Date <i>10-16-09</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN0100000109T CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	None	1408	Total 1408	\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$10,000,000.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN01000000109T CFFP (Yes/No): No Replacement Housing Factor Grant No:			Federal FY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: None	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00	
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Columbia Center			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN01000000109T CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-2 Turner Park	Site: None	1450	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Nondwelling Equipment: None	1475	1	\$0.00	\$0.00	\$0.00	\$0.00	
			Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00	
	Total, Turner Park		Project Total:		\$0.00	\$0.00	\$0.00	\$0.00

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

²To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Hammond Housing Authority					Federal FY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
IN10-1 Columbia Center	09/09/10		09/09/12		
IN10-2 Turner Park	09/09/10		09/09/12		
PHA Wide	09/09/10		09/09/12		

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

Part I: Summary		
PHA Name: Hammond Housing Authority	Grant Type and Number Capital Fund Program Grant No. IN01000000209E Date of CFFP: _____	Replacement Housing Factor Grant No: FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>

Type of Grant		UPDATED 10/8/09
<input checked="" type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations (may not exceed 20% of line 20) ³	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 20)	\$21,500.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$47,950.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non-dwelling Structures	\$461,098.00	\$0.00	\$0.00	\$0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$41,452.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$572,000.00	\$0.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

Signature of Executive Director <i>Maria C. Beckwith</i>	Date <i>10-16-09</i>	Signature of Public Housing Director	Date
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¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN0100000209E CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide Mgmt. Improvements	Security	1408	Total 1408	\$0.00	\$0.00	\$0.00	\$0.00	
	Staff Training	1408		\$0.00	\$0.00	\$0.00	\$0.00	
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00	
				\$0.00	\$0.00	\$0.00	\$0.00	
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$21,500.00	\$0.00	\$0.00	\$0.00	
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430	A&E + Insurance	\$47,950.00	\$0.00	\$0.00	\$0.00	
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00	
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00	
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00	
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00	
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00	
"	Development Activities	1499		\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name:		Grant Type and Number			Federal FY of Grant:			
Hammond Housing Authority		Capital Fund Program Grant No. IN01000000209E CFFP (Yes/No): No Replacement Housing Factor Grant No:			2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: none	1450		\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: New electronic sign	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Columbia Center			Project Total:	\$0.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN0100000209E CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-2 Turner Park	Site: None	1450	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$0.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1	0	\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
Interior Common Areas: 2 additions and rehab existing office area to service provider areas	1470	2 additions	\$461,098.00	\$0.00	\$0.00	\$0.00		
		Total ICAs:	\$461,098.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment: None	1475	0	\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Turner Park		Project Total:	\$461,098.00	\$0.00	\$0.00	\$0.00		

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

²To be completed for the Performance and Evaluation Report.

Part I: Summary						
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-10 Date of CFFP: _____			Replacement Housing Factor Grant No: _____	
					FFY of Grant: <u>2010</u>	
					FFY of Grant Approval: <u>2010</u>	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 20) ³	\$196,428.00	\$0.00	\$0.00	\$0.00	
3	1408 Management Improvements	\$15,000.00	\$0.00	\$0.00	\$0.00	
4	1410 Administration (may not exceed 10% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00	
5	1411 Audit	\$5,000.00	\$0.00	\$0.00	\$0.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$70,000.00	\$0.00	\$0.00	\$0.00	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$60,000.00	\$0.00	\$0.00	\$0.00	
10	1460 Dwelling Structures	\$396,000.00	\$0.00	\$0.00	\$0.00	
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00	
12	1470 Non-dwelling Structures	\$169,428.00	\$0.00	\$0.00	\$0.00	
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00	
16	1495.1 Relocation Cost	\$0.00	\$0.00	\$0.00	\$0.00	
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00	
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00	
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00	
19	1502 Contingency (may not exceed 8% of line 20)	\$70,288.00	\$0.00	\$0.00	\$0.00	
20	Amount of Annual Grant: (sum of lines 2 -- 19)	\$982,144.00	\$0.00	\$0.00	\$0.00	
21	Amount of line 20 Related to LBP Activities		\$0.00	\$0.00	\$0.00	
22	Amount of line 20 Related to Section 504 Activities	\$0.00	\$0.00	\$0.00	\$0.00	
23	Amount of line 20 Related to Security -- Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00	
24	Amount of line 20 Related to Security -- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00	
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00	
Signature of Executive Director <i>Mario C. Beene</i>		Date 10-16-09		Signature of Public Housing Director		Date

¹ To be completed for the Performance and Evaluation Report

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-10 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
HA-Wide Mgmt. Improvements	Security	1408	Total 1408	\$0.00	\$0.00	\$0.00	\$0.00		
	Staff Training	1408		\$15,000.00	\$0.00	\$0.00	\$0.00		
	None	1408		\$0.00	\$0.00	\$0.00	\$0.00		
				\$15,000.00	\$0.00	\$0.00	\$0.00		
HA-Wide Admin	Funding for PHA Staff @ 10% of the annual grant amount in accordance with approved salary allocation plan or Prog. Mgmt. fees	1410		\$0.00	\$0.00	\$0.00	\$0.00		
HA-Wide Fees and Costs	A & E services @ 7% of the annual grant amount, based on actual scope of design work	1430		\$70,000.00	\$0.00	\$0.00	\$0.00		
HA-Wide	Nonroutine vacancy prep.	1460		\$0.00	\$0.00	\$0.00	\$0.00		
"	Nonroutine PM repairs	1460		\$0.00	\$0.00	\$0.00	\$0.00		
"	Appliances	1465		\$0.00	\$0.00	\$0.00	\$0.00		
"	Vehicle replacement	1475		\$0.00	\$0.00	\$0.00	\$0.00		
"	Demolition	1485		\$0.00	\$0.00	\$0.00	\$0.00		
"	Relocation expenses	1495.1		\$0.00	\$0.00	\$0.00	\$0.00		
"	Development Activities	1499		\$0.00	\$0.00	\$0.00	\$0.00		

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Hammond Housing Authority		Grant Type and Number Capital Fund Program Grant No. IN36P010501-10 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-1 Columbia Center	Site: Tree Trimming Playground Site lighting Fence removal	1450	1 lot 1 1 lot 1 lot	\$10,000.00 \$10,000.00 \$25,000.00 \$5,000.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$50,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total DUs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$0.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
			Total SWFs:	\$0.00	\$0.00	\$0.00	\$0.00	
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Columbia Center		Project Total:		\$50,000.00	\$0.00	\$0.00	\$0.00	

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

²To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name:		Grant Type and Number				Federal FY of Grant:		Status of Work
Hammond Housing Authority		Capital Fund Program Grant No. IN36P010501-10 CFFP (Yes/No): No Replacement Housing Factor Grant No:				2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IN10-2 Turner Park	Site: Sidewalks	1450	1 lot	\$10,000.00	\$0.00	\$0.00	\$0.00	
			Total Site:	\$10,000.00	\$0.00	\$0.00	\$0.00	
	Mechanical and Electrical: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total M&E:	\$0.00	\$0.00	\$0.00	\$0.00	
	Building Exterior: None	1460		\$0.00	\$0.00	\$0.00	\$0.00	
			Total B.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Dwelling Units: Townhome Bathroom Rehab Hi-Rise Bathroom Rehab	1460	80	\$160,000.00	\$0.00	\$0.00	\$0.00	
		1460	119	\$236,000.00	\$0.00	\$0.00	\$0.00	
		Total DUs:		\$396,000.00	\$0.00	\$0.00	\$0.00	
	Dwelling Equipment: None	1465.1		\$0.00	\$0.00	\$0.00	\$0.00	
			Total D.E.:	\$0.00	\$0.00	\$0.00	\$0.00	
	Interior Common Areas: Community Building Rehab	1470	1	\$169,428.00	\$0.00	\$0.00	\$0.00	
			Total ICAs:	\$169,428.00	\$0.00	\$0.00	\$0.00	
	Site-Wide Facilities: None	1470		\$0.00	\$0.00	\$0.00	\$0.00	
Total SWFs:			\$0.00	\$0.00	\$0.00	\$0.00		
Nondwelling Equipment: None	1475		\$0.00	\$0.00	\$0.00	\$0.00		
		Total NDE:	\$0.00	\$0.00	\$0.00	\$0.00		
Total, Turner Park		Project Total:	\$575,428.00	\$0.00	\$0.00	\$0.00		

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

²To be completed for the Performance and Evaluation Report.

Capital Fund Program - Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number Hammond Housing Authority		Locality (City/County & State) Hammond, Lake County, Indiana			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No: __
A.	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	FFY	2010	FFY 2011	FFY 2012	FFY 2013	FFY 2014
	IN10-1 Columbia Center	Annual Statement	\$22,000	\$22,000	\$22,000	\$22,000
	IN10-02 Turner Park		\$74,500	\$129,900	\$111,000	\$111,500
	HA-Wide Physical Activities		\$0	\$0	\$0	\$0
B.	Physical Improvements Subtotal		\$96,500	\$151,900	\$133,000	\$133,500
C.	Management Improvements		\$60,000	\$60,000	\$60,000	\$60,000
D.	PHA-Wide Non-dwelling Structures and Equipment		\$0	\$0	\$0	\$0
E.	Administration		\$0	\$0	\$0	\$0
F.	Other		\$200,000	\$200,000	\$200,000	\$200,000
G.	Operations		\$117,159	\$117,159	\$117,159	\$117,159
H.	Demolition		\$0	\$0	\$0	\$0
I.	Development		\$508,485	\$453,085	\$471,985	\$471,485
J.	Capital Fund Financing -- Debt Service		\$0	\$0	\$0	\$0
K.	Total CFP Funds		\$982,144	\$982,144	\$982,144	\$982,144
L.	Total Non-CFP Funds		\$0	\$0	\$0	\$0
M.	Grand Total		\$982,144	\$982,144	\$982,144	\$982,144

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-WIDE Physical Improvements			HA-WIDE Physical Improvements		
	HA-WIDE Site:		\$0	HA-WIDE Site:		\$0
	None			None		
	Total Site:		\$0	Total Site:		\$0
	ON-DEMAND Mech. and Electrical:			ON-DEMAND Mech. and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	ON-DEMAND Building Exterior:			ON-DEMAND Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	ON-DEMAND Dwelling Units:			ON-DEMAND Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	HA-WIDE Dwelling Equipment:			HA-WIDE Dwelling Equipment:		
None		\$0	None		\$0	
Total D.E.:		\$0	Total D.E.:		\$0	
HA-WIDE Interior Common Areas:			HA-WIDE Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
HA-WIDE Site-Wide Facilities:			HA-WIDE Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
HA-WIDE Nondwelling Equipment:			HA-WIDE Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
	Subtotal of Estimated Cost		\$0	Subtotal of Estimated Cost		\$0

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide Physical Improvements			HA-Wide Physical Improvements		
	Site:			Site:		
	None		\$0	None		\$0
	Total Site:		\$0	Total Site:		\$0
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	None		\$0	None		\$0
Total D.E.:		\$0	Total D.E.:		\$0	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$0	Subtotal of Estimated Cost		
\$0				\$0		

Capital Fund Program - Five-Year Action Plan

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-1 Columbia Center			IN10-1 Columbia Center		
	Site:			Site:		
	Tree trimming		\$6,000	Tree trimming		\$6,000
	Site lighting		\$15,000	Site lighting		\$15,000
	Total Site:		\$21,000	Total Site:		\$21,000
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
Refrigerators & Stoves		\$1,000	Refrigerators & Stoves		\$1,000	
Total D.E.:		\$1,000	Total D.E.:		\$1,000	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost		\$22,000	Subtotal of Estimated Cost		\$22,000	

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-1 Columbia Center			IN10-1 Columbia Center		
	Site:			Site:		
	Tree Trimming		\$6,000	Tree Trimming		\$6,000
	Site lighting		\$15,000	Site Lighting		\$15,000
	Total Site:		\$21,000	Total Site:		\$21,000
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	None		\$0
	Total M&E:		\$0	Total M&E:		\$0
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	None		\$0	None		\$0
	Total DUs:		\$0	Total DUs:		\$0
	Dwelling Equipment:			Dwelling Equipment:		
	Refrigerators & Stoves		\$1,000	Refrigerators & Stoves		\$1,000
Total D.E.:		\$1,000	Total D.E.:		\$1,000	
Interior Common Areas:			Interior Common Areas:			
None		\$0	None		\$0	
Total ICAs:		\$0	Total ICAs:		\$0	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$22,000	Subtotal of Estimated Cost		

Capital Fund Program - Five-Year Action Plan

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

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-2 Turner Park			IN10-2 Turner Park		
	Site:			Site:		
	Landscaping		\$10,000	Landscaping		\$10,000
				Hi-Rise Parking Lot Paving & Sidewalks		\$46,000
				Playground Equipment		\$3,500
				Site Furniture		\$2,000
				Town Home Parking Lots & Sidewalks		\$2,400
	Total Site:		\$10,000	Total Site:		\$63,900
	Mechanical and Electrical:			Mechanical and Electrical:		
	Hi-Rise Fire Alarm Controls upgrades		\$9,500	Replace Boiler Controls		\$4,500
	Total M&E:		\$9,500	Total M&E:		\$4,500
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	Hi-Rise Glazing Allowance		\$2,000	Hi-Rise Glazing Allowance		\$2,000
	Hi-Rise ADA Allowance		\$1,500	Hi-Rise ADA Allowance		\$1,500
	Town Home Glazing Allowance		\$2,000	Town Home Glazing Allowance		\$2,000
	Town Home ADA Allowance		\$1,500	Town Home ADA Allowance		\$1,500
	Town Home Flooring		\$46,000	Town Home Flooring		\$46,000
Total DUs:		\$53,000	Total DUs:		\$53,000	
Dwelling Equipment:			Dwelling Equipment:			
Refrigerators & Stoves		\$2,000	Refrigerators & Stoves		\$2,000	
Total D.E.:		\$2,000	Total D.E.:		\$2,000	
Interior Common Areas:			Interior Common Areas:			
None		\$0	Office Rehab		\$6,500	
Total ICAs:		\$0	Total ICAs:		\$6,500	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost		\$74,500	Subtotal of Estimated Cost		\$129,900	

Capital Fund Program - Five-Year Action Plan

Part II: Supporting Pages -- Physical Needs Work Statement(s)						
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	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	IN10-2 Turner Park			IN10-2 Turner Park		
	Site:			Site:		
	Landscaping		\$10,000	Landscaping		\$10,000
	Total Site:		\$10,000	Total Site:		\$10,000
	Mechanical and Electrical:			Mechanical and Electrical:		
	None		\$0	Town Home Furnaces		\$38,000
	Total M&E:		\$0	Total M&E:		\$38,000
	Building Exterior:			Building Exterior:		
	None		\$0	None		\$0
	Total B.E.:		\$0	Total B.E.:		\$0
	Dwelling Units:			Dwelling Units:		
	Hi-Rise Glazing Allowance		\$2,000	Hi-Rise Glazing Allowance		\$2,000
	Hi-Rise ADA Allowance		\$1,500	Hi-Rise ADA Allowance		\$1,500
	Town Home Glazing Allowance		\$2,000	Town Home Glazing Allowance		\$2,000
	Town Home ADA Allowance		\$1,500	Town Home ADA Allowance		\$1,500
	Town Home Flooring		\$46,000	Town Home Flooring		\$46,000
	Total DUs:		\$53,000	Total DUs:		\$53,000
	Dwelling Equipment:			Dwelling Equipment:		
	Refrigerators & Stoves		\$2,000	Refrigerators & Stoves		\$2,000
	Total D.E.:		\$2,000	Total D.E.:		\$2,000
Interior Common Areas:			Interior Common Areas:			
Paint Corridors		\$20,000	Hi-Rise Lobby Furniture		\$8,500	
Replace Corridor Flooring		\$26,000				
Total ICAs:		\$46,000	Total ICAs:		\$8,500	
Site-Wide Facilities:			Site-Wide Facilities:			
None		\$0	None		\$0	
Total SWFs:		\$0	Total SWFs:		\$0	
Nondwelling Equipment:			Nondwelling Equipment:			
None		\$0	None		\$0	
Total NDE:		\$0	Total NDE:		\$0	
Subtotal of Estimated Cost			\$111,000	Subtotal of Estimated Cost		

Capital Fund Program - Five-Year Action Plan

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

Part III: Supporting Pages -- Management Needs Work Statement(s)				
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 Major Work Categories	Estimated Cost
See Annual Statement	Security	\$55,000	Security	\$55,000
	Staff Training	\$5,000	Staff Training	\$5,000
	Subtotal of Estimated Cost	\$60,000	Subtotal of Estimated Cost	\$60,000

Capital Fund Program - Five-Year Action Plan

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

Part III: Supporting Pages -- Management Needs Work Statement(s)				
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 Major Work Categories	Estimated Cost
See Annual Statement	Security	\$55,000	Security	\$55,000
	Staff Training	\$5,000	Staff Training	\$5,000
	Subtotal of Estimated Cost	\$60,000	Subtotal of Estimated Cost	\$60,000