

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.

Statement of Progress

The Housing Authority of Newport (HAN) is currently finishing the construction of the remaining rental units under the HOPE VI Revitalization Grant. All construction should be completed by the end of 2009 and all of the 160 replacement units should be on-line by that time. These scattered-site developments (consisting of single family, duplex, and multi-family buildings) will all be managed and operated by the Housing Authority of Newport.

In addition to the rental units, the HAN continues its work in providing affordable homeownership opportunities throughout the city of Newport. With HOPE VI funding, the HAN has been able to provide over 100 soft-second mortgages to low and moderate first time homebuyers purchasing a new home from the HAN or an existing home in the City of Newport.

Goals and Objectives

Currently, the HAN is working on the acquisition of eight (8) units to be converted into public housing, utilizing Neighborhood Stabilization Program (NSP) funding provided through the Department of Local Government. These eight units will be used as eventual replacement for eight units at the current Peter G Noll site, in an effort to continue our deconcentration efforts.

The HAN intends to submit a Disposition Application for the remaining 171 units at this site, KY15001. These units, ranging in size from one to four bedrooms with no fully accessible units are obsolete and difficult to rent. The concentrated lay-out of these units also poses management issues and makes the units less desirable to potential renters.

The HAN plans to enter into an agreement with Campbell County for the construction of an all-elderly site outside the city of Newport as part of replacement housing efforts. The HAN has submitted a Replacement Housing Funding Plan to HUD outlining the timelines and preliminary development budget for this endeavor and that Plan has been approved. The HAN will use the Replacement Housing Factor Funding for this development.

The HAN is also the recipient of 35 VASH Vouchers. The HAN has had a voluntary set-aside of 15 HCV vouchers to be used by Veterans and this partnership with the Veterans' Administration has been a successful one. The new VASH funding, scheduled to begin November 1, 2009, will provide additional opportunities for this group of participants, and the HAN looks forward to administering this program.

The HAN is in the process of finalizing a partnership with the City of Newport for a \$1 Million CDBG grant, to be used for the construction/rehabilitation and soft-second financing of homeownership units. The HAN has recently all but completed a similar program using CDBG funding with the Campbell County Fiscal Court and the program proved very successful with the sale of 24 homes. The CDBG funds will make possible an additional nine homes for sale to low to moderate income families.

The HAN is also in the process of establishing a CHDO through which other funding opportunities may be available to provide a variety of affordable housing programs throughout Campbell County.

The HAN plans to continue with cost saving measures in the Section 8 Program, by requiring: Interim Reexaminations; Reducing Payment Standards; and reducing the total number of units leased.

VAWA: The HAN will continue to ensure that any suspected acts of domestic violence are reported immediately, and victims of these acts will be protected against eviction or other decisions detrimental to their housing. The HAN staff will continue to make referrals to the Women's Crisis Center and other agencies who advocate for the victims of domestic violence. The VAWA statement is and will continue to be on all statements and correspondence to residents that deals with decisions regarding termination of their housing so they are aware of their protection under this Act.

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: #1. Eligibility, Selection and Admissions Policies; #3. Rent Determination; #4. Operations and Management; #9 Pets. The following is a list of all of the policies that have been revised since the last Plan submission:</p> <p>The Admissions and Continued Occupancy Policy; Section 8 Administrative Plan (Implementation of cost saving measures such as interim rent increases when income increases and reduction of Payment Standards); Pet Policy (Visiting Pet Fee); EIV Security Policy (New); Section 8 Homeownership Plan (Elimination of HAN managed escrow accounts; FSS participation required); Procurement Policy (Amended to comply with ARRA); Lease (increase the Security Deposit to \$300.00 for incoming residents, allowing for four incremental payments) Residents wishing to move from one site to another must do so in accordance with the Transfer Policy</p> <p>(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.</p> <p>The 5-year and Annual Plans are available for review at the Housing Authority of Newport, central offices, located at 30 East 8th Street, Newport, KY 41071.</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>The HAN is currently utilizing NSP funds for the construction and/or rehabilitation of eight (8) additional rental units. These units may be used as replacement units to eight (8) existing units in the existing Peter G Noll Development (KY15-001), however, the HAN may pursue using Project-based vouchers for these units.</p> <p>The HAN currently administers 32 Project-based Vouchers at Saratoga Place Apartments, an all-elderly, Low Income Housing Tax Credit property located in the City of Newport. The HAN plans to pursue other PBV partnerships for up to 20 additional units during this fiscal year.</p> <p>The HAN also intends to submit a Disposition Application for all or a portion of the 171 units at the Peter G Noll development (KY15-001). This development, consisting of one, two, three and four bedroom row-house style units (none of which are fully accessible), was constructed in the 1950's. It is obsolete and in need of major rehabilitation. The development is very isolated, being located in the north-western most section of the city, boarded on one side by a floodwall. The age and location of this development makes occupancy challenging. The Authority would like to continue its deconcentration efforts with a disposition of this property, and use a combination of section 8 vouchers, and a new elderly development outside the City of Newport as replacement options. The PHA plans to begin the disposition application process during this fiscal year.</p> <p>The HAN plans to enter into an agreement with Campbell County for the construction of an all-elderly site outside the city of Newport as part of replacement housing efforts. The HAN has submitted a Replacement Housing Funding Plan to HUD outlining the timelines and preliminary development budget for this endeavor and that Plan has been approved. The HAN will use the Replacement Housing Factor Funding for this development.</p> <p>The HAN currently administers a Section 8 Homeownership Program. As of September 30, 2009, the HAN has 22 homeowners on this program. This program is ongoing and the HAN plans to continue these efforts.</p> <p>The HAN is also in the process of partnering with the City of Newport to administer \$1Million in CDBG funds, to provide construction/rehabilitation and/or soft-second financing for up to nine (9) homes in the City of Newport. Construction on three of the rehabs is scheduled to begin shortly after January 1, 2010, and the remaining units are scheduled for construction in the spring of 2010.</p> <p>The HAN plans to continue to seek funding (private and/or public) to continue affordable homeownership opportunities.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>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.</p>
8.2	<p>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.</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>

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.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Location
Income <= 30% of AMI	3,855	N/A	N/A	N/A	N/A	N/A	N/A
Income >30% but <=50% of AMI	1,940	N/A	N/A	N/A	N/A	N/A	N/A
Income >50% but <80% of AMI	891	N/A	N/A	N/A	N/A	N/A	N/A
Elderly	11,691	N/A	N/A	N/A	N/A	N/A	N/A
Families with Disabilities	N/A						

The most recent census data shows 5,795 families living in the housing authority’s jurisdiction who have a household income at or below 50% of AMI. The Housing Authority currently has 1,200 applicants waiting for affordable housing, 113 of which of which are elderly and/or disabled. The Authority’s waiting list data also shows that over 37% of families waiting for housing are in the Extremely Low Income category. The data clearly shows a need for affordable housing.

The Authority is in the process of completing construction of 160 replacement housing units, ranging in size from one to four bedrooms, with 5% fully accessible, all of which will be available to the very low income population within the PHA’s jurisdiction.

The Authority is also in the process of purchasing property for the construction and rehab of up to eight units using Neighborhood Stabilization Funding. These units will be two and three bedroom affordable rental units, with one fully accessible unit.

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The Authority will address the needs of population by: a) maximizing the number of units continually available by reducing turnover time for vacated units; b) partnering with Campbell County fiscal court for the development of an all-elderly site outside the City of Newport; c) partner with the City of Newport in the administration of CDBG funding to continue affordable homeownership opportunities; d) continue to seek additional funding sources for the development of homeownership opportunities.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The Housing Authority of Newport (HAN) is currently finishing the construction of the remaining rental units under the HOPE VI Revitalization Grant. All construction should be completed by the end of 2009 and all of the 160 replacement units should be on-line by that time. These scattered-site developments (consisting of single family, duplex, and multi-family buildings) will all be managed by the Housing Authority of Newport.</p> <p>In addition to the rental units, the HAN continues its work in providing affordable homeownership opportunities throughout the city of Newport. With HOPE VI funding, the HAN has been able to provide over 100 soft-second mortgages to low and moderate first time homebuyers purchasing a new home from the HAN or an existing home in the City of Newport.</p> <p>The Authority has also completed the administration of CDBG funding, in partnership with Campbell County, providing 24 soft-second mortgages in the amount of \$40,000 each, to qualified low and moderate homebuyers. The Authority is now partnering with the City of Newport for the construction, rehabilitation and/or soft-second mortgage funding to qualified low and moderate income first time homebuyers.</p> <p>The Authority has also recently been approved for the administration of 35 additional Vouchers for the VASH Program. The funding for this program will be available November 1, 2009.</p> <p>We have increased our Family Self Sufficiency Program participation and now have 29 families enrolled in this program.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The Housing Authority of Newport defines "Significant Amendment" as a substantial modification or deviation from this Plan. A substantial modification or deviation would be one in which the Authority no longer intends to implement an activity or program as outlined in the Plan (excluding programs and activities that have been postponed until a future Plan year).</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

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.

Part I: Summary		
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: KY 36P01550108 Replacement Housing Factor Grant No: NO Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/30/2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	52,049			
3	1408 Management Improvements	99,450			
4	1410 Administration (may not exceed 10% of line 21)	56,469			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	6,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	18,976	2,803	2,803	2,803
10	1460 Dwelling Structures	334,746	200,000	200,000	200,000
11	1465.1 Dwelling Equipment—Nonexpendable	2,000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: KY 36P01550108 Replacement Housing Factor Grant No: NO Date of CFFP:	FFY of Grant:2008 FFY of Grant Approval: 2008			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	569,690		202,803	202,803
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs	35,800			
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF NEWPORT			Grant Type and Number Capital Fund Program Grant No: KY 36P01550108 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE	Operations	1406		52,049				
PHA WIDE	Pro-rate salaries for grant administration	1410		56,469				
PHA WIDE	Lease warehouse for maintenance oper	1408		19,800				
KY15-1	Community Center operations	1408		43,850				
Peter G. Noll	Newport Police foot patrol	1408		35,800				
	A & E Fees for maintenance shop	1430		6,000				
	Sidewalk repair	1450		10,476		2,803	2,803	
	Emergency contract repairs	1460		9,746				
	Roof/gutter replacement - 5 bldgs	1460		75,000				
	Appliances/window air conditioners	1465		2,000				
KY 15-4	Seal parking lots	1450		6,000				
Grand Towers	Replace air conditioners in 26 apartments	1460		15,000				
	Flooring replacement as needed	1460		10,000				
	Exterior window washing	1460		5,000				
	Keyless entry system	1460		20,000				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: HOUSING AUTHORITY OF NEWPORT					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE OPERATIONS	06/12/2010		06/12/2012		
KY 15-1	06/12/2010		06/12/2012		
KY 15-4	06/12/2010		06/12/2012		
KY 15-7	06/12/2010		06/12/2012		
NEW DEVELOPMENT	06/12/2010		06/12/2012		

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

Part I: Summary		
PHA Name: HOUSING AUTHORITY OF NEWPORT KY	Grant Type and Number Capital Fund Program Grant No: KY 36P01550107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:4)
 Performance and Evaluation Report for Period Ending: 09/30/2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	43,044	38,197	38,197	38,197
3	1408 Management Improvements	141,274	111,503	111,503	93,596
4	1410 Administration (may not exceed 10% of line 21)	85,959	85,959	85,959	85,959
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,091	1,091	1,091	1,091
8	1440 Site Acquisition				
9	1450 Site Improvement	14,500	15,800	15,800	11,550
10	1460 Dwelling Structures	494,796	565,721	565,721	415,910
11	1465.1 Dwelling Equipment—Nonexpendable	6,150	5,160	5,160	5,160
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	72,776	36,159	36,159	36,159
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: HOUSING AUTHORITY OF NEWPORT KY	Grant Type and Number Capital Fund Program Grant No: 36 P01550107 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2007 FFY of Grant Approval: 2007			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 4)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	859,590	859,590	859,590	687,622
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs	35,800	33,356	33,356	19,018
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF NEWPORT KY			Grant Type and Number Capital Fund Program Grant No: 36P01551007 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-WIDE	Operations	1406		43,044	38,197	38,197	38,197	
PHA-WIDE	Lease Warehouse for Mtnc operations	1408		23,246	34,796	34,796	34,796	
PHA-WIDE	Salaries for Grant Administration	1410		85,959	85,959	85,959	85,959	
KY 15-1	Community Ctr, mtnc/staffing	1408		82,288	39,782	39,782	39,782	
KY 15-1	Newport Police foot patrol	1408		35,800	33,356	33,356	19,018	
KY 15-1	A & E Fees-Maintenance shop	1430		1,091	1,091	1,091	1,091	
KY 15-1	Sidewalk repairs	1450		6,000	6,000	6,000	6,000	
KY 15-1	Emergency contract repairs	1460		32,843	18,347	18,347	18,347	
KY 15-1	Roof/gutter replacement	1460		100,000	47,775	47,775	36,214	
KY 15-1	Replace appliances/window ac	1465		6,150	5,160	5,160	5,160	
KY 15-1	Lab computers, ladderlift, gym equip	1475		30,976	21,065	21,065	21,065	
KY 15-4	Seal parking lots	1450		6,000	3,800	3,800	3,800	
KY 15-4	Replace a/c in 52 apartments	1460		29,796	31,122	31,122	31,122	
KY 15-4	Flooring replacement as needed	1460		10,000	1,799	1,799	1,799	
KY 15-4	Exterior window washing	1460		10,000	0	0	0	
KY 15-4	Emergency contract repairs	1460		0	2,563	2,563	2,563	
KY 15-4	Generator exhaust system	1460		0	3,471	3,471	3,471	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: HOUSING AUTHORITY OF NEWPORT KY					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE OPERATION	09/13/2009		09/13/2011		
KY 15-1	09/13/2009		09/13/2011		
KY 15-4	09/13/2009		09/13/2011		
KY 15-8	09/13/2009		09/13/2011		
HOPE VI REPLACEMENT	09/13/2009		09/13/2011		

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

Part I: Summary		
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: KY 36P01550109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	43,824			
3	1408 Management Improvements	80,350			
4	1410 Administration (may not exceed 10% of line 21)	57,521			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	28,722			
10	1460 Dwelling Structures	215,800			
11	1465.1 Dwelling Equipment—Nonexpendable	15,000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	49,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	85,000			
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: KY 36P01550109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	575,217			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF NEWPORT			Grant Type and Number Capital Fund Program Grant No: KY 36P01550109 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-WIDE	Marketing for PHA and new units	1406		10,000				
	Grant Administration	1410		57,521				
	Construction of new PHA units	1460		114,800				
	Upgrade computer system	1408		40,000				
KY 15-1 PETER G. NOLL	Defer increasing costs of operations	1406		20,635				
	Costs of utilities, staffing at Community Center	1408		35,850				
	Purchase online inspection hardware	1408		1,500				
	Repairs to sidewalks/reseal parking lots	1450		20,222				
	Roof/gutter and emergency repairs	1460		81,000				
	New maintenance vehicle	1475		20,000				
	Relocation costs of displaced residents	1495.1		85,000				
KY 15-4	Defer increasing costs of operations	1406		10,214				
GRAND TOWERS	Purchase online inspection hardware	1408		1,500				
	Replace air conditioners in 26 units	1465.1		15,000				
	Flooring replacement as needed	1460		10,000				
	Exterior window washing	1460		10,000				
	Seal Parking lot	1450		6,000				
KY 15-8 CORPUS	Seal parking lot	1450		2,500				
KY 15-7 LIBERTY	Defer increasing cost of operations	1406		2,975				
	Purchase online inspection hardware	1408		1,500				
	Purchase vehicle for admin staff	1475		17,000				
	Purchase new copier	1475		12,000				

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

² To be completed for the Performance and Evaluation Report.

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

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

Part II: Supporting Pages								
PHA Name:			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant:		
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	

Part I: Summary	
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: KY 36R01550109 Date of CFFP:
FFY of Grant: 2009 FFY of Grant Approval: 2009	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	203,846			

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 I: Summary						
PHA Name: HOUSING AUTHORITY OF NEWPORT		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: KY 36R01550109 Date of CFFP:			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 (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	203,846				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date		Signature of Public Housing Director		
				Date		

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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 I: Summary	
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: KY 36R01550108 Date of CFFP:
FFY of Grant: 2008 FFY of Grant Approval: 2008	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/30/2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition	58,311	0		
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴		58,311		

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

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

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

Part I: Summary					
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: KY 36R01550108 Date of CFFP:	FFY of Grant:2008 FFY of Grant Approval: 2008			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	58,311	58,311		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary		
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: KY36S01550109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 09/30/2009 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	78,860		78,860	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	500,000		500,000	391,841
11	1465.1 Dwelling Equipment—Nonexpendable	159,736		159,736	74,195
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	50,000		50,000	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: Housing Authority of Newport	Grant Type and Number Capital Fund Program Grant No: KY36S01550109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant:2009 FFY of Grant Approval: 2009			
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2009			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	788,596		788,596	466,036
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs	50,000		50,000	
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Housing Authority of Newport				Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Peter G. Noll	03/13/2010		03/13/2011		
Grand Towers	03/13/2010		03/13/2011		
New PHA units	03/13/2010		03/13/2011		
COCC-Mgt Fee	03/13/2010		03/13/2011		

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

Part I: Summary		
PHA Name: HOUSING AUTHORITY OF NEWPORT	Grant Type and Number Capital Fund Program Grant No: KY36P01550110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	48,022			
3	1408 Management Improvements	35,248			
4	1410 Administration (may not exceed 10% of line 21)	57,522			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	121,000			
10	1460 Dwelling Structures	257,925			
11	1465.1 Dwelling Equipment—Nonexpendable	3,000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	37,500			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	15,000			
17	1499 Development Activities ⁴				

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

Part I: Summary					
PHA Name: HOUSING AUTHORITY OF NEWPORT		Grant Type and Number Capital Fund Program Grant No: 36P01550110 Replacement Housing Factor Grant No: NO Date of CFFP:		FFY of Grant:2010 FFY of Grant Approval: 2010	
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	575,217			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs	20,000			
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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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: HOUSING AUTHORITY OF NEWPORT			Grant Type and Number Capital Fund Program Grant No: KY36P01550110 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-WIDE	Grant Administration	1410		57,522				
AMP-WIDE	Marketing	1406		2,500				
AMP-WIDE	Defer operating costs of projects	1406		45,522				
KY 15-1	Community Center operations	1408		15,248				
PETER G. NOLL	Security - walking patrols	1408		20,000				
	Concrete repairs	1450		12,000				
	Pole repair & pull down switch	1450		10,000				
	Roof/gutter repair	1460		15,000				
	Volleyball system for Community Center	1475		2,500				
	Relocation	1495.1		15,000				
KY 15-4	Install pads for dumpsters	1450		5,000				
GRAND TOWERS	Parking lot lighting	1450		9,000				
	Flooring replacement	1460		10,000				
	Window replacement	1460		197,925				
KY 15-8 CORPUS	Rock Wall repair	1450		50,000				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: HOUSING AUTHORITY OF NEWPORT				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-WIDE	09/30/2011		09/30/2011		
AMP-WIDE	09/30/2012		09/30/2014		
KY 15-1	09/30/2012		09/30/2014		
KY 15-4	09/30/2010		09/30/2014		
KY 15-8	09/30/2010		09/30/2014		
KY 15-7;15-10;15-12	09/30/2010		09/30/2014		

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

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number NEWPORT, KY KY015			Locality (City/County & State) Newport/Campbell, KY		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B.	Physical Improvements Subtotal	Annual Statement	\$242,978	\$272,978	\$272,978	\$272,978
C.	Management Improvements		70,023	70,023	70,023	70,023
D.	PHA-Wide Non-dwelling Structures and Equipment		50,000	0	20,000	20,000
E.	Administration		57,521	57,521	57,521	57,521
F.	Other					
G.	Operations		43,824	43,824	43,824	43,824
H.	Demolition					
I.	Development		110,871	130,871	110,871	110,871
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$575,217	\$575,217	\$575,217	\$575,217

