

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	
1.0	PHA Information PHA Name: <u>White Castle Housing Authority</u> PHA Code: <u>LA 093</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>134</u> Number of HCV units: <u>0</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 WCHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.				
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 attached Goals and Objectives				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: To identify ARRA grant funding. (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. Copies are available at Administration Office, 55050 Veterans St., White Castle, LA				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i>				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.				
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. See attached 2010 Annual Statement; 2009 Stimulus Performance and Evaluation Report; 2009 Performance and Evaluation Report; 2008 Performance and Evaluation Report; 2008 Reserve Performance and Evaluation Report; and 2007 Performance and Evaluation Report.				
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. See attached 2010-2014 Capital Fund Program 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. N/A				
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. N/A for qualified PHA's				

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

10.0
VAWA Policy Attached

(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan.
No comments

(g) Challenged Elements
No elements of the plan were challenged.

5.2 Goals and Objectives

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

WCHA Goal: Expand the supply of assisted housing

Objectives:

- Reduce public housing vacancies:

WCHA Goal: Improve the quality of assisted housing

Objectives:

- Improve public housing management
- Increase customer satisfaction
- Renovate or modernize public housing units

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

WCHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Provide or attract supportive services to increase independence for the elderly or families with disabilities.

WCHA Progress in Meeting the Mission and Goals Described in the 5-Year Plan

The WCHA has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination through the utilization of previous Capital funds and the proper application of our public housing policies.

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		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>LA48P093501-10</u>		Replacement Housing Factor Grant No:	FFY of Grant: <u>2010</u> FFY of Grant Approval:
PHA Name: White Castle Housing Authority					
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
1	Total non-CFF Funds				
2	1405 Operations (may not exceed 20% of line 21) ³	10,000.00			
3	1408 Management Improvements	13,700.00			
4	1410 Administration (may not exceed 10% of line 21)	6,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	23,220.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00			
10	1460 Dwelling Structures	141,500.00			
11	1465.1 Dwelling Equipment—Nonexpendable	3,396.00			
12	1470 Non-dwelling Structures	1,000.00			
13	1475 Non-dwelling Equipment	2,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	500.00			
17	1499 Development Activities ⁴				
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 2-9)	206,316.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director <i>Don C. O'Beir</i>		Date <i>6/25/10</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 CFF Grants for operations.
⁴ RHP funds shall be included here.

Part II: Supporting Pages								
PHA Name: White Castle Housing Authority			Grant Type and Number Capital Fund Program Grant No: LA48P093501-10 Replacement Housing Factor Grant No:			CFPP (Yes/ No): No Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
HA Wide Operations	Housing operations Sub total	1406	6%	10,000.00				
				10,000.00				
HA Wide Mgt Improvements	A. Executive Director, staff training	1408	3	3,000.00				
	B. Maintenance training	1408	100%	4,500.00				
	C. After school tutoring program	1408		1,000.00				
	D. Security program	1408		5,200.00				
	Sub total			13,700.00				
HA Wide Admin Cost	ED and staff monitoring of MOD work Sub total	1410	3%	6,000.00				
				6,000.00				
HA Wide Fees & Cost	A. A/E fees + printing of plans	1430	100%	12,500.00				
	B. REAC inspections	1430	100%	1,000.00				
	C. CFP annual statement	1430	100%	2,500.00				
	D. Agency Plan	1430	100%	1,000.00				
	E. CFP grant reports	1430	100%	3,500.00				
	F. Utility allowance	1430	100%	800.00				
	G. Accounting	1430	100%	1,000.00				
	H. Env review	1430	100%	750.00				
	I. Adv/recordation/misc costs	1430	100%	170.00				
	Sub total			23,220.00				

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 II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-10 Replacement Housing Factor Grant No:			CFFP (Yes/ No): 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	
LA 93-1	A. Replace sidewalks	1450	850 SF	5,000.00				
	B. Refurbish interiors	1460	4 Units	111,500.00				
	C. Replace appliances	1465.1	1	800.00				
	D. Resident relocation	1495	1 EA	500.00				
	Sub total			117,800.00				
LA 93-2	A. Refurbish interiors	1460	1 Units	12,000.00				
	B. Replace appliances	1465.1	2 Pair	1,496.00				
	Sub total			13,496.00				
LA 93-3	A. Modify apartment for 504	1460	1 Units	18,000.00				
	B. Replace appliances	1465.1	2 Pair	1,100.00				
	Sub total			19,100.00				
HA Wide Non-dwelling	Repairs in maintenance shop	1470	LS	1,000.00				
	Sub total			1,000.00				
HA Wide Non-dwelling	Replace maintenance equipment	1475	LS	1,000.00				
	Replace computer/office hardware	1475	1 EA	1,000.00				
	Sub total			2,000.00				
	Grand Total			206,316.00				

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: White Castle Housing Authority, LA48P093501-10					Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2011		9/30/2013		
LA 93-1	9/30/2011		9/30/2013		

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

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 White Castle Housing Authority/LA 93		Locality (City/County & State) White Castle/Iberville Parish/Louisiana			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	145,616.00	145,616.00	145,616.00	96,616.00
C.	Management Improvements		13,700.00	13,700.00	13,700.00	13,700.00
D.	PHA-Wide Non-dwelling Structures and Equipment		4,800.00	4,800.00	4,800.00	53,800.00
E.	Administration		6,000.00	6,000.00	6,000.00	6,000.00
F.	Other		24,200.00	24,200.00	24,200.00	24,200.00
G.	Operations		12,000.00	12,000.00	12,000.00	12,000.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		206,316.00	206,316.00	206,316.00	206,316.00
L.	Total Non-CFP Funds					
M.	Grand Total		206,316.00	206,316.00	206,316.00	206,316.00

Part I: Summary (Continuation)

PHA Name/Number White Castle Housing Authority/LA 93		Locality (City/County & State) White Castle/Iberville Parish/Louisiana			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
		Annual Statement				
	LA 93-1		85,390.00	120,500.00	87,700.00	57,116.00
	LA 93-2		28,390.00	12,558.00	30,200.00	39,500.00
	LA 93-3		31,836.00	12,558.00	27,716.00	
	HA Wide – Non-dwelling		4,800.00	4,800.00	4,800.00	53,800.00

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	LA 93-1			LA 93-1		
Annual	A. Replace sidewalks	550 SF	2,500.00	A. Replace sidewalks for 504	400 SF	4,000.00
Statement	B. Refurbish apartments	2 units	54,500.00	B. Refurbish apartments	4 units	101,000.00
	C. Install central A/C sys	2 Units	28,390.00	C. Modify apt for 504	1 unit	12,000.00
	Subtotal		85,390.00	D. Replace appliances	5 Pair	3,500.00
				Subtotal		120,500.00
	LA 93-2			LA 93-2		
	Install central A/C sys	2 units	28,390.00	A. Replace sidewalks for 504	200 SF	2,000.00
	Subtotal		28,390.00	B. Modify for 504	1 unit	10,558.00
				Subtotal		12,558.00
	LA 93-3			LA 93-3		
	A. Install central A/C systems	2 units	28,336.00	A. Replace sidewalks for 504	150 SF	1,500.00
	B. Replace appliances	5 pair	3,500.00	B. Modify apt for 504	1 unit	11,058.00
	Subtotal		31,836.00	Subtotal		12,558.00
	HA Wide Non-dwelling Equipment			HA Wide Non-dwelling Equipment		
	A. Replace maintenance equipment	LS	3,800.00	A. Replace computer hardware	1 EA	1,000.00
	B. Replace computer hardware	1 EA	1,000.00	B. Replace maintenance equipment	LS	3,800.00
	Subtotal		4,800.00	Subtotal		4,800.00
	Subtotal of Estimated Cost		\$150,416.00	Subtotal of Estimated Cost		\$150,416.00

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 Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Operations		HA Wide Operations	
Annual	Housing operations	12,000.00	Housing operations	12,000.00
Statement	Subtotal	12,000.00	Subtotal	12,000.00
	HA Wide Management Improvements		HA Wide Management Improvements	
	Staff training	4,000.00	Staff training	4,000.00
	Resident programs	4,500.00	Resident programs	4,500.00
	Security program	5,200.00	Security program	5,200.00
	Subtotal	13,700.00	Subtotal	13,700.00
	HA Wide Admin Cost		HA Wide Admin Cost	
	Partial salary of staff involved in CFP	6,000.00	Partial salary of staff involved in CFP	6,000.00
	Subtotal	6,000.00	Subtotal	6,000.00
	HA Wide Fees & Cost		HA Wide Fees & Cost	
	A/E services	20,000.00	A/E services	20,000.00
	Consultant fees	4,200.00	Consultant fees	4,200.00
	Subtotal	24,200.00	Subtotal	24,200.00
	Subtotal of Estimated Cost	\$55,900.00	Subtotal of Estimated Cost	\$55,900.00

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 Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Operations		HA Wide Operations	
Annual	Housing operations	12,000.00	Housing operations	12,000.00
Statement	Subtotal	12,000.00	Subtotal	12,000.00
	HA Wide Management Improvements		HA Wide Management Improvements	
	Staff training	4,000.00	Staff training	4,000.00
	Resident programs	4,500.00	Resident programs	4,500.00
	Security program	5,200.00	Security program	5,200.00
	Subtotal	13,700.00	Subtotal	13,700.00
	HA Wide Admin Cost		HA Wide Admin Cost	
	Partial salary of staff involved in CFP	6,000.00	Partial salary of staff involved in CFP	6,000.00
	Subtotal	6,000.00	Subtotal	6,000.00
	HA Wide Fees & Cost		HA Wide Fees & Cost	
	A/E services	20,000.00	A/E services	20,000.00
	Consultant fees	4,200.00	Consultant fees	4,200.00
	Subtotal	24,200.00	Subtotal	24,200.00
	Subtotal of Estimated Cost	\$55,900.00	Subtotal of Estimated Cost	\$55,900.00

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		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>LA48S093501-09</u>		Replacement Housing Factor Grant No:	FFY of Grant: <u>2009</u> FFY of Grant Approval: <u>2009</u>
PIA Name: White Castle Housing Authority					
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/10 <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised ²	Obligated	Expended
1	Total non-CFF Funds				
2	1416 Operations (may not exceed 20% of line 21) ¹				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	4,000.00	0.00	0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	26,033.00	19,500.00	19,500.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1450 Dwelling Structures	232,450.00	247,483.00	247,483.00	51,210.00
11	1455.1 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	2,500.00	0.00	0.00	0.00
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9100 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)	266,983.00	266,983.00	266,983.00	51,210.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director <i>Jon C. O'Bean</i>		Date <i>6/25/10</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 CFF Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48S093501-09 Replacement Housing Factor Grant No:				CFPP (Yes/ No): No Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ₂	
HA Wide	Partial salary of staff involved in CFP	1410	1%	4000.00	0.00	0.00	0.00	Delete
Admin Cost	Sub total			4,000.00	0.00	0.00	0.00	
HA Wide	A/E services	1430	100%	28,033.00	19,500.00	19,500.00	0.00	0% Completed
Fees & Cost	Sub total			28,033.00	19,500.00	19,500.00	0.00	
LA 93-1	A. Renovate kitchens	1460	6 Units	58,000.00	50,000.00	50,000.00	0.00	0% Completed
	B. Renovate bathrooms	1460	6 Units	72,000.00	71,483.00	71,483.00	0.00	0% Completed
	C. Replace flooring	1460	6 Units	32,250.00	32,000.00	32,000.00	32,000.00	Completed
LA 93-2	D. Patch & paint interiors	1460	4 Units	22,000.00	22,000.00	22,000.00	0.00	0% Completed
	E. Add A/C to central sys	1460	6 Units	16,000.00	24,000.00	24,000.00	19,210.00	80% Completed
	F. Resident relocation	1495.1	6 Units	2,500.00	0.00	0.00	0.00	Delete
	Sub total			202,750.00	199,483.00	199,483.00	51,210.00	
LA 93-3	Add A/C to central sys	1460	8 Units	32,200.00	48,000.00	48,000.00	0.00	0% Completed
	Sub total			32,200.00	48,000.00	48,000.00	0.00	
	Grand Total			266,983.00	266,983.00	266,983.00	51,210.00	

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: White Castle Housing Authority LA48S093501-09					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	3/17/2010	3/17/2010	3/17/2012		
LA 93-1	3/17/2010	3/17/2010	3/17/2012		
LA 93-3	3/17/2010	3/17/2010	3/17/2012		

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

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

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

Part I: Summary					
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: LA48P093501-09		Replacement Housing Factor Grant No: 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: 3/31/2010 <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-CFF Funds			0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) ³	12,000.00		0.00	0.00
3	1408 Management Improvements	12,000.00		0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	6,000.00		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages			0.00	0.00
7	1430 Fees and Costs	22,944.00			
8	1440 Site Acquisition			0.00	0.00
9	1450 Site Improvement	8,500.00		0.00	0.00
10	1460 Dwelling Structures	140,000.00		0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	3,500.00		0.00	0.00
12	1470 Non-dwelling Structures	1,000.00		0.00	0.00
13	1475 Non-dwelling Equipment	1,500.00		0.00	0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration			0.00	0.00
16	1495.1 Relocation Costs	400.00			
17	1499 Development Activities ⁴				
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)			0.00	0.00
20	Amount of Annual Grant: (sum of lines 2-19)	207,844.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director <i>Don C. O'Beir</i>		Date <i>6/25/10</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 CFFP Grants for operations.
⁴ RHP funds shall be included here.

Part II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-09 Replacement Housing Factor Grant No:			CFPP (Yes/ No): No Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
HA Wide	Housing operations	1406	6%	12,000.00		0.00	0.00	0% Completed
Operations	Sub total			12,000.00		0.00	0.00	
HA Wide	A. Staff training	1408	3	6,000.00		0.00	0.00	0% Completed
Mgt Improvement s	B. Resident programs	1408	100%	6,000.00		0.00	0.00	0% Completed
	Sub total			12,000.00		0.00	0.00	
HA Wide	Partial salary of staff involved in CFP	1410	3%	6,000.00		0.00	0.00	0% Completed
Admin Cost	Sub total			6,000.00		0.00	0.00	
HA Wide	A. A/E services	1430	100%	17,944.00		0.00	0.00	0% Completed
Fees & Cost	B. Consulting fees	1430	100%	5,000.00		0.00	0.00	0% Completed
	Sub total			22,944.00		0.00	0.00	
LA 93-1	A. Replace sidewalks	1450	850 SF	8,500.00		0.00	0.00	0% Completed
	B. Refurbish interiors	1460	4 Units	104,000.00		0.00	0.00	0% Completed
	C. Replace appliances	1465.1	1 Set	800.00		0.00	0.00	0% Completed
	D. Resident relocation	1495	1 EA	400.00		0.00	0.00	0% Completed
	Sub total			113,700.00		0.00	0.00	
LA 93-2	A. Refurbish interiors	1460	1 Units	12,000.00		0.00	0.00	0% Completed
	B. Replace appliances	1465.1	2 Pair	1,600.00		0.00	0.00	0% Completed
	Sub total			13,600.00		0.00	0.00	

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 II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-09 Replacement Housing Factor Grant No:			CFFP (Yes/ No): 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	
LA 93-3	A. Modify apartment for 504	1460	1 Units	24,000.00		0.00	0.00	0% Completed
	B. Replace appliances	1465.1	2 Pair	1,100.00		0.00	0.00	0% Completed
	Sub total			25,100.00		0.00	0.00	
HA Wide	Replace maintenance equipment	1475	LS	1,500.00		0.00	0.00	0% Completed
Non-dwelling	Patch and paint office	1470	LS	1,000.00		0.00	0.00	0% Completed
	Sub total			2,500.00		0.00	0.00	
	Grand Total			207,844.00		0.00	0.00	

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: White Castle Housing Authority LA48P093501-09					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2011		9/30/2013		
LA 93-1	9/30/2011		9/30/2013		

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

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

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

Part I: Summary					
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>LA48P093501-08</u>		Replacement Housing Factor Grant No: FFY of Grant: <u>2008</u> FFY of Grant Approval: <u>2008</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>3/31/2010</u> <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised ¹	Obligated	Expended
1	Total non-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1406 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	56,750.00		30,000.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	56,150.00		26,000.00	0.00
10	1460 Dwelling Structures	352,400.00		206,131.00	206,131.00
11	1465.I Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	77,300.00		25,000.00	0.00
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.I Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direc. Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	542,300.00		287,131.00	206,131.00
21	Amount of line 20 Related to LBF 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 <i>Don C. O'Beir</i>		Date <i>6/25/10</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 CFF Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-08 Replacement Housing Factor Grant No:			CFFP (Yes/ No): 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	
HA Wide	A/E Services	1430	100%	56,750.00		30,000.00	0.00	0% Complete
Fees & Costs	Subtotal			56,750.00		30,000.00	0.00	0% Complete
LA 93-1	A. Tree cutting & removal	1450	100%	21,150.00		13,000.00	0.00	0% Complete
	B. Replace fencing	1450	175 LF	7,000.00		0.00	0.00	0% Complete
	C. Replace roofs, fascia, soffits & exteriors	1460	12 Units	92,575.00		0.00	0.00	0% Complete
	Subtotal			120,725.00		13,000.00	0.00	
LA 93-3	A. Tree cutting & removal	1450	100%	21,000.00		13,000.00	0.00	0% Complete
	B. Replace fencing	1450	175 LF	7,000.00		0.00	0.00	0% Complete
	C. Replace roofs, fascia, soffits & exteriors	1460	32 Units	259,825.00		206,131.00	206,131.00	79% Complete
	Subtotal			287,825.00		219,131.00	206,131.00	
HA Wide Non-dwelling Structures	Exterior & interior repair to Admin Bldg	1470	1 Bldg	77,000.00		25,000.00	0.00	0% Complete
	Subtotal			77,000.00		25,000.00	0.00	
	Grand Total			542,300.00		287,131.00	206,131.00	

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: White Castle Housing Authority LA48P093501-08					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2010		9/30/2012		
LA 93-1	9/30/2010		9/30/2012		
LA 93-3	9/30/2010		9/30/2012		

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

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

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

Part I: Summary

PHA Name: White Castle Housing Authority	Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>LA48P093501-08</u>	Replacement Housing Factor Grant No:	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant
 Original Annual Statement
 Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: 3/31/2010
 Revised Annual Statement (revision no: 1)
 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-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	18,000.00	12,000.00	0.00	0.00
3	1408 Management Improvements	9,000.00	9,000.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	6,000.00	6,000.00	0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	23,420.00	23,420.00	4,728.43	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement:	25,000.00	25,000.00	0.00	0.00
10	1460 Dwelling Structures	104,500.00	104,500.00	13,104.07	13,104.07
11	1465.1 Dwelling Equipment—Nonexpendable	7,500.00	7,500.00	0.00	0.00
12	1470 Non-dwelling Structures	4,000.00	20,000.00	2,167.50	2,167.50
13	1475 Non-dwelling Equipment	3,000.00	3,000.00	0.00	0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	500.00	500.00		
17	1499 Development Activities ⁴			0.00	0.00
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)			20,000.00	15,271.57
20	Amount of Annual Grant: (sum of lines 2-19)	210,920.00	210,920.00		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	Date	Signature of Public Housing Director	Date
<i>J.M. C. O'Brien</i>	6/25/10		

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 CFFP Grants for operations.
⁴ RHP funds shall be included here.

Part II: Supporting Pages									
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-08 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	
HA Wide		A. Housing Operations	1406	9%	18,000.00	12,000.00	0.00	0.00	0% Complete
		Subtotal			18,000.00	12,000.00	0.00	0.00	
HA Wide		A. Staff training	1408	4	5,000.00	5,000.00	0.00	0.00	0% Complete
Management		B. Resident program	1408	100%	4,000.00	4,000.00	0.00	0.00	0% Complete
Improvements		Subtotal			9,000.00	9,000.00	0.00	0.00	
HA Wide		Partial salary & benefits of staff involved with CFP	1410	3%	6,000.00	6,000.00	0.00	0.00	0% Complete
Admin Costs		Subtotal			6,000.00	6,000.00	0.00	0.00	
HA Wide		A. A/E Services	1430	100%	17,000.00	17,000.00	4,728.43	0.00	0% Complete
Fees & Costs		B. Consulting services	1430	100%	6,420.00	6,420.00	0.00	0.00	0% Complete
		Subtotal			23,420.00	23,420.00	4,728.43	0.00	
LA 93-1		A. Replace sidewalks	1450	500 SF	5,000.00	5,000.00	0.00	0.00	0% Complete
		B. Install ADA ramps	1450	500 SF	3,333.00	3,333.00	0.00	0.00	0% Complete
		C. Renovate kitchen	1460	4 Units	16,000.00	16,000.00	0.00	0.00	0% Complete
		D. Renovate bathroom	1460	4 Units	12,000.00	12,000.00	0.00	0.00	0% Complete
		E. Replace flooring	1460	2 Units	6,000.00	6,000.00	0.00	0.00	0% Complete
		F. Replace DHW heaters	1460	10 EA	2,500.00	2,500.00	0.00	0.00	0% Complete
		G. Modify unit for 504 accessibility	1460	2 Units	20,000.00	20,000.00	0.00	0.00	0% Complete
		H. Replace appliances	1465.1	4 Sets	2,500.00	2,500.00	0.00	0.00	0% Complete
		Subtotal			67,333.00	67,333.00	0.00	0.00	

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 II: Supporting Pages								
PHA Name: White Castle Housing Authority			Grant Type and Number Capital Fund Program Grant No: LA48P093501-08 Replacement Housing Factor Grant No:			CFPP (Yes/ No): 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	
LA 93-2	A. Replace/repair sidewalks	1450	500 SF	5,000.00	5,000.00	0.00	0.00	0% Complete
	B. Install 504 ramps	1450	500 SF	3,333.00	3,333.00	0.00	0.00	0% Complete
	C. Replace appliances	1465.1	4 sets	2,500.00	2,500.00	0.00	0.00	0% Complete
	Subtotal			10,833.00	10,833.00	0.00	0.00	
LA 93-3	A. Replace/repair sidewalks	1450	500 SF	5,000.00	5,000.00	0.00	0.00	0% Complete
	B. Install 504 ramps	1450	500 SF	3,334.00	3,334.00	0.00	0.00	0% Complete
	C. Install A/C system	1460	8 Units	48,000.00	48,000.00	13,104.07	13,104.07	27% Complete
	D. Relocation costs	1495.1	LS	500.00	500.00	0.00	0.00	0% Complete
	E. Replace appliances	1465.1	4 sets	2,500.00	2,500.00	0.00	0.00	0% Complete
	Subtotal			59,334.00	59,334.00	13,104.07	13,104.07	
HA Wide	Renovate maintenance complex	1470	1 Bldg	14,000.00	20,000.00	2,167.50	2,167.50	11% Complete
Non-dwelling Structures	Subtotal			14,000.00	20,000.00	2,167.50	2,167.50	
HA Wide	A. Replace maintenance vehicle	1475	1 EA	1,000.00	1,000.00	0.00	0.00	0% Complete
Non-dwelling Equipment	B. Replace computer hardware	1475	LS	2,000.00	2,000.00	0.00	0.00	0% Complete
	Subtotal			3,000.00	3,000.00	0.00	0.00	
	Grand Total			210,920.00	210,920.00	20,000.00	15,271.57	

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: White Castle Housing Authority LA48P093501-08					Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2010		9/30/2012		
LA 93-1	9/30/2010		9/30/2012		
LA 93-2	9/30/2010		9/30/2012		
LA 93-3	9/30/2010		9/30/2012		

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

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

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

Part I: Summary					
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: LA48P093501-07		Replacement Housing Factor Grant No: 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: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2010 <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-CFF Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	12,000.00	12,000.00	12,000.00	12,000.00
3	1408 Management Improvements	11,000.00	9,228.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	6,000.00	6,750.00	6,750.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	22,103.00	22,000.12	22,000.12	3,270.00
8	1440 Site Acquisition				
9	1450 Site Improvement	25,000.00	62,150.00	62,150.00	62,150.00
10	1460 Dwelling Structures	77,600.00	73,424.88	73,424.88	73,424.88
11	1465.1 Dwelling Equipment—Nonexpendable	7,500.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	20,000.00	16,050.00	16,050.00	16,050.00
13	1475 Non-dwelling Equipment	20,000.00	0.00	0.00	0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1455.1 Relocation Costs				
17	1499 Development Activities ⁴	500.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA				
18bn	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)	201,603.00	201,603.00	192,375.00	166,894.88
21	Amount of line 20 Related to LB? 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 <i>John C. O'Bea</i>		Date <i>6/25/10</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 CFF Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-07 Replacement Housing Factor Grant No:			CFFP (Yes/ No): 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	
HA Wide	Housing Operations	1406	9%	12,000.00	12,000.00	12,000.00	12,000.00	Complete
	Subtotal			12,000.00	12,000.00	12,000.00	12,000.00	
HA Wide	A. Staff training	1408	3	4,000.00	3,228.00	0.00	0.00	0% Complete
Mgmt	B. After school tutoring program	1408	LS	4,000.00	3,000.00	0.00	0.00	0% Complete
Improvements	C. Maintenance training	1408	1	1,000.00	1,000.00	0.00	0.00	0% Complete
	D. computer software	1408	LS	2,000.00	2,000.00	0.00	0.00	0% Complete
	Subtotal			11,000.00	9,228.00	0.00	0.00	
HA Wide	Partial salary & benefits of staff involved with CFP	1410	6%	6,000.00	6,750.00	6,750.00	0.00	0% Complete
Admin Costs	Subtotal			6,000.00	6,750.00	6,750.00	0.00	
HA Wide	A. A/E Services	1430	100%	18,203.00	22,000.12	22,000.12	3,270.00	17% Complete
Fees & Costs	B. Consulting services	1430	100%	3,800.00	0.00	0.00	0.00	Delete
	Subtotal			22,003.00	22,000.12	22,000.12	3,270.00	

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 II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-07 Replacement Housing Factor Grant No:			CFFP (Yes/ No): 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	
LA 93-1	A. Replace sidewalks	1450	1,300 SF	5,000.00	13,220.00	13,220.00	13,220.00	Completed
	B. Install ADA ramps	1450	3 EA	3,000.00	7,500.00	7,500.00	7,500.00	Completed
	C. Replace kitchen cabinets	1460	4 Units	16,000.00	14,824.88	14,824.88	14,824.88	Completed
	D. Replace bath tubs	1460	4 Units	24,000.00	21,000.00	21,000.00	21,000.00	Completed
	E. Replace flooring	1460	2 Units	6,000.00	6,000.00	6,000.00	6,000.00	Completed
	F. Replace DHW heaters	1460	10 EA	4,000.00	4,000.00	4,000.00	4,000.00	Completed
	G. MOD unit for ADA	1460	2 Units	8,200.00	8,200.00	8,200.00	8,200.00	Completed
	H. Install water heater jackets	1460	100%	1,000.00	1,000.00	1,000.00	1,000.00	Completed
	I. Replace appliances	1465.1	5 Sets	3,000.00	0.00	0.00	0.00	Delete
	J. Relocation costs	1495.1	1 Unit	500.00	0.00	0.00	0.00	Delete
	Subtotal			70,700.00	75,744.88	75,744.88	75,744.88	
LA 93-2	A. Replace/repair sidewalks	1450	1,300 SF	5,000.00	13,220.00	13,220.00	13,220.00	Completed
	B. Install ADA ramps	1450	3 EA	3,000.00	7,500.00	7,500.00	7,500.00	Completed
	C. MOD unit for ADA	1460	2 Units	8,200.00	8,200.00	8,200.00	8,200.00	Completed
	D. Install water heater jackets	1460	100%	1,000.00	1,000.00	1,000.00	1,000.00	Completed
	E. Replace appliances	1465.1	3 sets	2,250.00	0.00	0.00	0.00	Delete
	Subtotal			19,450.00	29,920.00	29,920.00	29,920.00	
LA 93-3	A. Replace/repair sidewalks	1450	1,600 SF	5,000.00	13,210.00	13,210.00	13,210.00	Completed
	B. Install ADA ramps	1450	4	4,000.00	7,500.00	7,500.00	7,500.00	Completed
	C. MOD units for ADA	1460	2 Units	8,200.00	8,200.00	8,200.00	8,200.00	Completed
	D. Install water heater jackets	1460	100%	1,000.00	1,000.00	1,000.00	1,000.00	Completed
	E. Replace appliances	1465.1	3 sets	2,250.00	0.00	0.00	0.00	Delete
	Subtotal			20,450.00	29,910.00	29,910.00	29,910.00	

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 II: Supporting Pages								
PHA Name: White Castle Housing Authority		Grant Type and Number Capital Fund Program Grant No: LA48P093501-07 Replacement Housing Factor Grant No:			CFFP (Yes/ No): 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	
HA Wide	Maintenance Bldg modifications	1470	LS	20,000.00	16,050.00	16,050.00	16,050.00	Completed
Nondwelling Structures	Subtotal			20,000.00	16,050.00	16,050.00	16,050.00	
HA Wide	Replace maintenance vehicle	1475	1 EA	20,000.00	0.00	0.00	0.00	Delete
Nondwelling Equipment	Subtotal			20,000.00	0.00	0.00	0.00	
	Grand Total			201,603.00	201,603.00	192,375.00	166,894.88	

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: White Castle Housing Authority LA48P093501-07					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2010		9/30/2012		
LA 93-1	9/30/2010		9/30/2012		
LA 93-2	9/30/2010		9/30/2012		
LA 93-3	9/30/2010		9/30/2012		

¹Obligation 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.

Violence Against Women Act (VAWA) Policy

Title VI of the VAWA adds a new housing provision that establishes several categories of protected individuals. Under the law victims of domestic violence, dating violence, sexual assault, and stalking are granted protections and cannot be denied or terminated from housing or housing assistance because of activity that is directly related to domestic violence. 2005 VAWA Pub. L. 109-162; Stat. 2960 signed into law on January 5, 2006 and codified at 42 U.S.C. §1437d(l) and 1435f(d), (0) & 1 and (u)

1.0 Purpose

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

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

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

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

2.0 Definitions

The definitions in this Section apply only to this Policy.

- 2.1 **Confidentiality:** Means that WCHA will not enter information provided to WCHA by a victim alleging domestic violence into a shared database or provide this information to any related entity except as stated in 3.4
- 2.2 **Dating Violence:** Violence committed by a person (a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (b) where the existence of such relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; (iii) the frequency of interaction between the persons involved in the relationship. 42 U.S.C. §1437d (u)(3)(A), § 13925.

- 2.3 **Domestic Violence:** Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, committed by a person with whom the victim shares a child in common, committed by a person who is cohabitating with or has cohabitated with the victim as a spouse, committed by a person similarly situated to a spouse of the victim under the domestic or family violence laws of Louisiana, or committed by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of Louisiana 42 U.S.C. §1437d(u)(3)(B), § 13925.
- 2.4 **Immediate Family Member:** A spouse, parent, brother or sister, or child of a victim or an individual to whom the victim stands *in loco parentis*; or any other person living in the household of the victim and related to the victim by blood or marriage. 42 U.S.C. § 1437d(u)(3)(D), § 13925.
- 2.5 **Perpetrator:** A person who commits an act of domestic violence, dating domestic violence or stalking against a victim.
- 2.6 **Stalking:** (a) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate the victim; (b) to place under surveillance with the intent to kill, injure, harass or intimidate the victim; (c) in the course of, or as a result of such following, pursuit, surveillance, or repeatedly committed acts, to place the victim in reasonable fear of the death of, or serious bodily injury to the victim; or (d) to cause substantial emotional harm to the victim, a member of the immediate family of the victim or the spouse or intimate partner of the victim. 42 U.S.C. §1437d(u)(3)(C), § 13925.
- 2.7 **Bona Fide Claim:** A *bonafide* claim of domestic violence, dating violence or stalking must include incidents that meet the terms and conditions in the above definitions.
- 2.8 **Victim:** Is a person who is the victim of domestic violence, dating violence, or stalking under this Policy and who has timely and completely completed the certification under 3.2 and 3.3 or as requested by WCHA.

3.0 Certification and Confidentiality

3.1 Failure to Provide Certification Under 3.2 and 3.3

The person claiming protection under VAWA shall provide complete and accurate certifications to WCHA, owner or manager within 14 business days after the party requests in writing that the person completes the certifications. If the person does not provide a complete and accurate certification within the 14 business days, WCHA, owner or manager may take action to deny or terminate participation or tenancy. 42 U.S.C. §14371 (5) & (6); 42 U.S.C. § 1437F(c)(9); 42 U.S.C. §1437f(d)(l)(B)(ii)&(iii); 42 U.S.C. §1437f(o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20) or for other good cause.

3.2 HUD Approved Certification

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

3.3 Confirmation of Certification

A person who is claiming victim status shall provide to WCHA, an owner or manager: (a) documentation signed by the victim and an employee, agent or volunteer of a victim service provider, an attorney, or a medical professional from whom the victim has sought assistance in addressing domestic violence, dating violence or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. §1746) the professional's belief that the incident(s) in question are *bonafide* incidents of abuse; or (b) a federal, state, tribal, territorial, local police or court record.

3.4 Confidentiality

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

- (a) the victim request or consents to the disclosure in writing;
- (b) the disclosure is required for eviction from public housing under 42 U.S.C. §1437 l(5)&(6)(See Section 4 in this Policy)

4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy

- 4.1 WCHA shall not deny participation or admission to a program on the basis of a person's abuse status, if the person otherwise qualifies for admission of assistance.
- 4.2 An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be a serious or repeated violation of the lease by the victim and shall not be good cause for denying to a victim admission to a program, terminating occupancy rights, or evicting a tenant.

- 4.3 Criminal activity directly related to domestic violence, dating violence, or stalking engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim of that domestic violence, dating violence or stalking.
- 4.4 Notwithstanding Sections 4.1, 4.2, and 4.2, WCHA, an owner or manager may bifurcate a lease to evict, remove or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without evicting, removing, terminating assistance to or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. 42 U.S.C. §1437d(l)(6)(B)
- 4.5 Nothing in Sections 4.1, 4.2, and 4.3 shall limit the authority of WCHA, an owner or manager, when notified, to honor court orders addressing rights of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members when the family breaks up.
- 4.6 Nothing in Sections 4.1, 4.2, and 4.3 limits WCHA, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However WCHA, owner or manager may not hold a victim to a more demanding standard.
- 4.7 Nothing in Sections 4.1, 4.2, and 4.3 limits WCHA, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the WCHA, owner or manager can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.
- 4.8 Nothing in Sections 4.1, 4.2, or 4.3 limits WCHA, an owner or manager's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including but not limited to acts of physical violence or stalking against family members or others.

4.9 Actions Against a Perpetrator

The WCHA may evict, terminate assistance, deny admission to a program or trespass a perpetrator from its property under this Policy. The victim shall take action to control or prevent the domestic violence, dating violence, or stalking. The action may include but is not limited to: (a) obtaining and enforcing a restraining or no contact order or order for protection against the perpetrator; (b) obtaining and enforcing a trespass against the perpetrator; (c) enforcing WCHA or law enforcement's trespass of the perpetrator; (d) preventing the delivery of the perpetrator's mail to the victim's unit; (e) providing identifying information listed in 3.2; and (f) other reasonable measures.

5.0 WCHA Right to Terminate Housing and Housing Assistance Under this Policy

- 5.1 Nothing in this Policy will restrict the WCHA, owner or manager's right to terminate tenancy for lease violations by a resident who claims VAWA as a defense if it is determined by the WCHA, owner or manager that such a claim is false.
- 5.2 Nothing in this Policy will restrict the WCHA right to terminate tenancy if the victim tenant (a) allows a perpetrator to violate a court order relating to the act or acts of violence; or (b) if the victim tenant allows a perpetrator who has been barred from WCHA property to come onto WCHA property including but not limited to the victim's unit or any other area under their control; or (c) if the victim tenant fails to cooperate with an established safety strategy as designed by a local victim support service provider (see 7.2).
- 5.3 Nothing in this Policy will restrict the WCHA right to terminate housing and housing assistance if the victim tenant who claims as a defense to an eviction or termination action relating to domestic violence has engaged in fraud and abuse against a federal housing program; especially where such fraud and abuse can be shown to have existed before the claim of domestic violence was made. Such fraud and abuse includes but is not limited to unreported income and ongoing boarders and lodgers violations, or damage to property.

6.0 Statements of Responsibility of Tenant Victim, the WCHA to the Victim, and to the Larger Community.

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

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

7.0 Notice to Applicants, and Participants.

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

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

8.0 Reporting Requirements

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

9.0 Conflict and Scope

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

10.0 Amendment

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