

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Pagedale Housing Authority</u> PHA Code: <u>MO36-218</u> PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: <u>January 1, 2010</u>					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>82</u> Number of HCV units: <u>NONE</u>					
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
PHA 1:						
PHA 2:						
	PHA 3:					
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:  The Pagedale Housing Authority : <ul style="list-style-type: none"> <li>-- provides decent, safe and affordable housing,</li> <li>-- ensures equal housing opportunity,</li> <li>-- promotes self-sufficiency, and</li> <li>-- improves the quality of life and economic vitality</li> </ul> for low and moderate-income families. The Authority pursues these goals by using existing programs to the maximum feasible extent, by linking with other service providers, and by creating new opportunities of its own design.					

5.2	<p><b>Goals and Objectives.</b> Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>The Pagedale Housing Authority seeks to assist families in need of affordable housing by pursuing goals that include, but are not limited to the following;</p> <ul style="list-style-type: none"> <li>- the renovation and modernization of existing inventory</li> <li>- improvement of PHAS assessment scores</li> <li>- enhance customer satisfaction</li> <li>- the demolition and/or disposition of obsolete housing when appropriate</li> <li>- provide employment and life skills training in an effort expand the number of working families</li> <li>- offer a wide range of social services</li> <li>- promote affirmative fair housing and ensure equal access to housing resources</li> <li>- broad cooperation and coordination of services with other agencies and not-for-profits</li> </ul> <p><b><u>Executive Report on Progress in Meeting Stated Goals</u></b></p> <p>The Pagedale Housing Authority consistently strives to serve the community in the most efficient and professional manner possible. Recent economic turmoil has put housing squarely in the spotlight. The Authority’s mission is more poignant than ever. That mission, to assist low and moderate-income families and individuals in obtaining safe, affordable housing will be tested in the coming year. Through these challenges, the Pagedale Housing Authority will remain at the forefront of affordable housing development and the administration of federal housing programs. It may never have been so true that through adversity comes opportunity. We are committed to that opportunity.</p> <p>In June of 2008, Pagedale’s management agent HASLC, formally welcomed its new executive director Susan Rollins. Susan holds B.A. in Philosophy from Wellesley College and an M.B.A. in Finance from New York University. Ms. Rollins has held many administrative positions in finance, government and academia from the 1970s through the present. She has also served on several state and local governmental and charitable boards and commissions. Ms. Rollins hit the ground running and has been a dynamic leader in her short time as the executive director for the four PHAs managed by the Housing Authority of St. Louis County. We welcome her and look forward to working with her for a long time.</p> <p>The Pagedale Housing Authority continues to operate its core programs and has been recognized for its outstanding work with a high performer designation. Serving families throughout St. Louis County, the Authority assists 14 families with very little turnover. With a renewed emphasis on customer service, the Pagedale Housing Authority sought to expand the reach and access of programs that move our clients to self sufficiency.</p>
6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Updated template and Capital plan.</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. At the offices of the Housing Authority of St. Louis County, 8865 Natural Bridge, St. Louis MO 63121.</p>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> None</p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable. <i>See Attachments.</i></p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. <i>See Attachments</i></p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <i>See Attachments</i></p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b></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>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <ul style="list-style-type: none"> <li>- additional vouchers</li> <li>- large units (3 and 4 bedrooms)</li> <li>- additional support services</li> <li>- preservation of existing affordable housing</li> <li>- workforce housing</li> <li>- housing resources for families earning less than 30% of the area median</li> </ul>

9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p>The Pagedale Housing Authority proposes to meet the housing needs of the community by continuing to effectively execute its mission, preserve a high level of management and maintenance services, seek additional opportunities to develop affordable housing, and provide a broad range of social services. The Authority is proud of its reputation in the community and intends to maintain its standing with affiliated governmental agencies and reputation in the affordable housing community. Waiting lists and pent up demand remain significant. We intend to work hard to make additional resources available and, as resources allow, address the immediate needs of those we hope to serve.</p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The Pagedale Housing Authority continues to provide affordable housing resources and related services. With an aging housing stock in some parts of the County, new development in others, a volatile housing market, and shifting resources our means are ever changing but our mission remains the same. The Authority is continually seeking to expand the range of social services available to the families it serves and improve customer satisfaction. Recent changes to asset based management, additional staff training and diligent project oversight are recent initiatives intended to achieve stated goals.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p style="padding-left: 40px;">a. Substantial Deviation from the 5-Year Plan</p> <p style="padding-left: 80px;">A fundamental change in the operation of the Authority that is not presently consistent with its mission statement and has required - or will require – alteration of the mission statement.</p> <p style="padding-left: 40px;">b. Significant Amendment or Modification to the Annual Plan</p> <p style="padding-left: 80px;">A change in the operation of the Authority that will significantly affect at least 20% of the Authority’s clients.</p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

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](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.

There were no Pagedale resident comments.

#### RESIDENT ADVISORY BOARD

1. Deborah Harris  
168 Plum 63043  
298-0925  
Arbor Hill/CWEB
2. Fran Yashuk  
190 Fee Fee Apt. C 63043  
298-3775  
Fee Fee Manor
3. Carol Bonetti  
162 Fee Fee Apt E 63043  
738-0896  
Fee Fee Manor
4. Wanda Cohen  
406 Meacham 63122  
822-3007  
Meacham Park
5. Claudette Kelley  
2803 W. Pasture 63114  
890-9722  
Highview
6. Willie Lewis  
2815 W. Pasture 634114  
890-8719  
Highview
7. Gloria Williams  
7205 Salerno Ct. 63133  
725-5908  
Pagedale/CWEB
8. Lillie O'Neal  
6923 Ardee Way 63130  
726-1787  
Pagedale
9. Shirley Smith  
6905 Ardee Way 63130  
727-1670  
Pagedale
10. Lynette Williams  
10324 Lord 63136  
388-2164  
Scattered Site

11. Maggie Buchanan  
2616 Tyrell Apt D 63136  
867-5182  
Tiffany
12. Linda Roach'e  
2613 Lordan Apt. B 63136  
869-1562  
Springwood
13. Deborah Smith  
9348 Rothwell Heights 63132  
994-9118  
Olivette
14. Olivia Walls  
9356 Rothwell Heights 63132  
997-6926  
Olivette
15. Rosalind Billingsley  
9342 Rothwell Heights 63132  
692-7187  
Olivette
16. Delores McClendon  
9379 Rothwell Heights 63132  
995-9957  
Olivette
17. Jacqueline Tate  
9345 Rothwell Heights 63132  
432-2564  
Olivette
18. Vandessa Lee  
8901 Weldon Apt. 319  
St. Louis, MO 63121  
524-1032  
Section Eight

## **Violence Against Women Act (VAWA)**

1. As evidenced in its Administrative Plan, the Pagedale Housing Authority (PHA) complies with the Violence Against Women Act as it may apply to its voucher program. More fully;

### Section XV – The Violence Against Women Act (VAWA)

The Violence Against Women Act protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being denied admission and from being evicted or terminated from housing assistance based solely on acts of such violence against them.

#### Admission

A PHA, owner or landlord may not deny admissions to an applicant (male or female) who has been a victim of domestic violence, dating violence, or stalking, if the applicant otherwise qualifies for assistance or admission.

If the perpetrator is a member of the victim's household, the PHA will have the authority to require the individual to leave the household and still provide assistance to the remaining members of the household.

#### Termination

A PHA and owners are prohibited by VAWA from considering actual or threatened domestic violence, dating violence, or stalking as a cause for terminating the tenancy, occupancy, or program assistance of the victim. Specifically, this means that the PHA and owners may not construe such violence or stalking as a serious or repeated violation of the lease by the victim, as other good cause for terminating the tenancy or occupancy rights of the victim, or as criminal activity justifying the termination of the tenancy, occupancy rights, or program assistance of the victim.

If the perpetrator is a member of the victim's household, the PHA still has the authority to require the individual to leave the household as a condition of providing continued assistance to the remaining members of the family.

If a tenant is in good standing with the landlord and the PHA and the tenant/victim must relocate to protect the health and safety of the victim of domestic violence, dating violence or stalking they may move to another location even though they are breaking the lease when doing so. The victim must have a reasonable belief and proof that he or she is imminently threatened by harm from further violence if he or she remains in the present unit.

#### Certification of Abuse and Confidentiality

A PHA, owner, or manager may request an individual to certify that the individual is a victim of abuse and that the incidences of abuse are bona fide. The certification must be in a form acceptable to the PHA, must include the name of the perpetrator and any other statutorily required information, and the victim must provide the certification within 14 business days after the individual receives a request for such certification from the PHA, owner or manager.

Without the certification, a PHA, owner, or manager may deny or terminate assistance. All information provided to a PHA, owner or manager is confidential. Notice of these rights must be given to tenants. The victim may self-certify and the certification requirement may also be satisfied with documentation signed by 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) to the

professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation. The statute also allows for the certification requirement to be satisfied by producing a federal, state, tribal, territorial or local police or court record.

### Notification

The PHA must provide notice to tenants assisted under section 8 of the United States Housing Act of 1937 of their rights, and notice to owners and managers of their rights and obligations, under section 8 as amended by VAWA.

2. As evidenced in its Admissions and Continued Occupancy Plan (ACOP), the Pagedale Housing Authority complies with the Violence Against Women Act as it may apply to its Public and Assisted Housing. More fully;

#### Section XV – The Violence Against Women Act (VAWA)

Pursuant to the Violence Against Women Act (VAWA), the Pagedale Housing Authority (PHA) has implemented the following policies. The purpose of these policies, consistent with the intent of VAWA, is to protect certain victims of criminal domestic violence, dating violence, sexual assault, or stalking – as well as members of the victims' immediate families – from being denied occupancy, or losing their tenancy as a result of the abuse of which they were the victim.

1. PHA shall not deny admission to, or continued occupancy of, the LIPH program to any applicant/tenant on the basis that the applicant/tenant is or has been a victim of domestic violence, dating violence, or stalking, if the applicant otherwise qualifies for admission, or continued occupancy.
2. An incident or incidents of actual or threatened domestic violence, dating violence, sexual assault, or stalking, that meet the requirements set forth in VAWA, will not be construed to be a serious or repeated violation(s) of the lease by the victim or threatened victim of that violence, and will not be good cause for terminating the tenancy or occupancy rights of the victim of such violence.
3. If a tenant or immediate member of the tenant's family is a victim of domestic violence, dating violence, sexual assault, or stalking, perpetrated by a member of a tenant's household, guest(s), or other person(s) under the tenant's control, the aforementioned criminal activity shall not be cause for termination of tenancy or occupancy rights of the victim. However, PHA may bifurcate the lease in order to evict, remove, or terminate tenancy to any tenant(s) or lawful occupant(s), who engage(s) in (a) criminal act(s) of violence against family members or others. If the leaseholder (head-of-household) refuses to cooperate with the Authority in removing an occupant from the household who is the perpetrator of acts of domestic violence, dating violence, sexual assault, or stalking, PHA will terminate tenancy for the entire household.
4. PHA will honor court orders addressing rights of access to or control of the property, distribution or possession of property among household members, and civil protection orders issued to protect the victim in cases where the family breaks up.
5. PHA may evict a tenant for any violation of the lease not premised on an act or acts of violence against a tenant or a member of the tenant's household. The standards utilized by the Authority in deciding whether to terminate a tenancy will not subject an individual who is or has been a victim of domestic violence, dating violence, sexual assault, or stalking to a more demanding standard than other tenants.

6. PHA may terminate the occupancy of any tenant or lawful occupant, if the tenant demonstrates an actual or imminent threat to other tenant(s) or employee(s).
7. PHA will request an individual to certify/document, in a form acceptable to the Authority, that the individual is a victim of domestic violence, dating violence, sexual assault, or stalking and that the incident(s) in question are genuine incidents of actual or threatened abuse. The certification shall include the name of the perpetrator. The tenant shall provide the documentation/certification to the Authority within 14 business days of the request for certification/documentation.
8. Failure to provide requested certification in writing, within 14 business days of PHA's request, may result in the Authority going forward with an eviction or termination of tenancy for any tenant or lawful occupant that commits violations of the lease. The 14 business day period may be extended at the discretion of the Authority. Inability to provide certification requirements will be reviewed on a case-by-case basis.
9. An individual may satisfy the certification/documentation requirement by:
  - a. providing PHA with certification/documentation, in a form acceptable to the Authority, signed by 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, sexual assault, or stalking, or the effects of abuse, in which the professional attests under penalty of perjury to the professional's belief that the incident(s) in question are actual incidents of abuse and the victim of domestic violence, dating violence, sexual assault, or stalking has signed or attested to the documentation, or
  - b. producing a Federal, State, police, or court record.
10. All information provided to PHA pursuant to the certification/documentation, including the fact that an individual is a victim of domestic violence, dating violence, sexual assault, or stalking, shall be retained in confidence by the Authority and shall neither be entered into a shared data base nor provided to any related entity, except to the extent that disclosure is:
  - a. requested or consented to, in writing, by the individual,
  - b. required for use in an eviction proceeding of an abuser, perpetrator, or stalker, or
  - c. is otherwise required by applicable law.

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

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

<b>Part I: Summary</b>		
<b>PHA Name: Pagedale Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: MO36P21850110 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval: 2010</b>

<b>Type of Grant</b>		
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>	<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>	<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>		<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$22,376			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$14,375			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$97,000			
11	1465.1 Dwelling Equipment—Nonexpendable	\$10,000			
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 <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> RHF funds shall be included here.

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

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> Pagedale Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: MO36P21850110 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2010</b> <b>FFY of Grant Approval: 2010</b>	
<b>Type of Grant</b> <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:                      ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
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)	\$143,751				
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	\$10,000				
<b>Signature of Executive Director</b> 		<b>Date</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Pagedale Housing Authority			Grant Type and Number Capital Fund Program Grant No: MO36P21850110 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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
MO218								
Pagedale Homes								
PHA-Wide Activities	Operations	1406	N/A	\$22,376				
	Administration	1410	N/A	\$14,375				
MO218	Replace Guttering	1460	36 units	\$72,000				
	Replace Appliances	1465	12 sets	\$10,000				
	Replace Kitchen Cabinets	1460	9 units	\$25,000				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Pagedale Housing Authority				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
MO218					
Pagedale Homes					
PHA-Wide Activities	6/12/12		6/12/14		

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

Capital Fund Program—Five-Year Action Plan

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

<b>Part I: Summary</b>						
PHA Name/Number Pagedale Housing Authority MO218		Locality (City/County & State) Pagedale, St. Louis County, Missouri			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name MO218 Pagedale Homes	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	\$103,000	\$105,000	\$125,000	\$125,400
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		\$14,375	\$14,375	\$14,375	\$14,375
F.	Other					
G.	Operations		\$26,376	\$24,376	\$4,376	\$3,976
H.	Demolition					
I.	Development					
J.	Capital Fund Financing -- Debt Service					
K.	Total CFP Funds		\$143,751	\$143,751	\$143,751	\$143,751
L.	Total Non-CFP Funds					
M.	Grand Total		\$143,751	\$143,751	\$143,751	\$143,751



<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2013</u> FFY 2013			Work Statement for Year: <u>2014</u> FFY 2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	MO218			MO218		
Annual Statement	Pagedale Homes			Pagedale Homes		
	Operations	N/A	\$4,376	Operations	N/A	\$3,976
	Administration	N/A	\$14,375	Administration	N/A	\$14,375
	HVAC	30 units	\$30,000	Storage Sheds	20 units	\$24,000
	Exterior Doors	35 doors	\$35,000	Bathroom Renovation	5 units	\$15,000
	Bathroom Updates	4 units	\$20,000	Kitchen Cabinets	10 units	\$35,000
	Fencing	1000 lin ft	\$10,000	Garage Doors	4 units	\$2,400
	Roofs	5 units	\$15,000	Electric Panels	30 units	\$30,000
	Siding	3 units	\$15,000	HVAC Duct Cleaning	30 units	\$15,000
				Rehab Vacant Unit	1 unit	\$4,000
	Subtotal of Estimated Cost		\$143,751	Subtotal of Estimated Cost		\$143,751



Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>						
<b>PHA Name: Pagedale Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: MO36P21850108 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval: 2008</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/09 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$9,376		\$9,376	\$0	
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	\$14,375		\$14,375	\$0	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$120,000		\$104,236	\$0	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> RHF funds shall be included here.

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

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> Pagedale Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: MO36P21850108 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2008</b> <b>FFY of Grant Approval: 2008</b>	
<b>Type of Grant</b>						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/09				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
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)	\$143,751		\$104,236	\$0	
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	\$113,000		\$99,236	\$0	
<b>Signature of Executive Director</b> 		<b>Date</b> 4/29/10		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

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Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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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: Pagedale Housing Authority		Grant Type and Number Capital Fund Program Grant No: MO36S21850109 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: 06/30/09 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	\$18,196		\$18,196	\$0	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$163,764		\$163,764	\$0	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Pagedale Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: MO36S21850109 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2009</b> <b>FFY of Grant Approval: 2009</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/09		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
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)	\$181,960		\$181,960	\$0
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	\$163,764		\$163,764	\$0
<b>Signature of Executive Director</b> <i>JCS Kol</i>		<b>Date</b> 4/20/10	<b>Signature of Public Housing Director</b>		<b>Date</b>

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

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