

7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>None</p>																																																																																																								
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>																																																																																																								
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>Attachment NY056a01 – FY2010 Annual Statement Attachment NY056c01 – FY2009 Progress and Evaluation Report Attachment NY056d01 – FY2008 Progress and Evaluation Report Attachment NY056e01 – FY2009 ARRA Grant Attachment NY056f01 – Violence Against Women Act Compliance</p>																																																																																																								
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>Attachment NY056b01</p>																																																																																																								
8.3	<p>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.</p>																																																																																																								
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>*U.S. Census data: the Comprehensive Housing Affordability Strategy (CHAS) dataset</p> <table border="1" data-bbox="245 1059 1422 1534"> <thead> <tr> <th colspan="8">Housing Needs of Families in the Jurisdiction by Family Type</th> </tr> <tr> <th>Family Type</th> <th>Overall</th> <th>Affordability</th> <th>Supply</th> <th>Quality</th> <th>Access-ibility</th> <th>Size</th> <th>Loca-tion</th> </tr> </thead> <tbody> <tr> <td>Income <= 30% of AMI</td> <td>1519</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Income >30% but <=50% of AMI</td> <td>1129</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Income >50% but <80% of AMI</td> <td>727</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Elderly</td> <td>718</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Families with Disabilities</td> <td>851</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Black NH</td> <td>2088</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Hispanic</td> <td>662</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>White-Non-Hispanic</td> <td>1650</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Asian NH</td> <td>325</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Pacific Island. NH</td> <td>0</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>Native Amer. NH</td> <td>4</td> <td>5</td> <td>5</td> <td>4</td> <td>3</td> <td>3</td> <td>3</td> </tr> </tbody> </table>	Housing Needs of Families in the Jurisdiction by Family Type								Family Type	Overall	Affordability	Supply	Quality	Access-ibility	Size	Loca-tion	Income <= 30% of AMI	1519	5	5	4	3	3	3	Income >30% but <=50% of AMI	1129	5	5	4	3	3	3	Income >50% but <80% of AMI	727	5	5	4	3	3	3	Elderly	718	5	5	4	3	3	3	Families with Disabilities	851	5	5	4	3	3	3	Black NH	2088	5	5	4	3	3	3	Hispanic	662	5	5	4	3	3	3	White-Non-Hispanic	1650	5	5	4	3	3	3	Asian NH	325	5	5	4	3	3	3	Pacific Island. NH	0	5	5	4	3	3	3	Native Amer. NH	4	5	5	4	3	3	3
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9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The Spring Valley Housing Authority maintains a 98% occupancy rate. This high occupancy rate ensures that as many families as possible are being served.</p>																																																																																																								

10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(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:</p> <ul style="list-style-type: none"> • Any change to the Mission Statement; • 50% deletion from or addition to the goals and objectives as a whole; and • 50% or more decrease in the quantifiable measure of any individual goal or objective. <p>B. Significant Amendment or Modification to the Annual Plan:</p> <ul style="list-style-type: none"> • Any increase or decrease over 50% in the funds projected in the Financial Resource Statement; • Any change in the policy or procedure that requires a regulatory 30-day posting; • Any submission to HUD that requires a separate notification to residents, such as Homeownership programs; and • Any change inconsistent with the local, approved Consolidated Plan.
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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>
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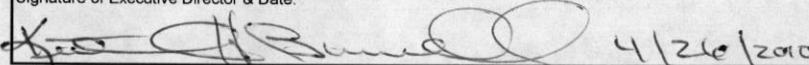
Part I: Summary

PHA Name: SPRING VALLEY HOUSING AUTHORITY	Grant Type and Number NY36P056501-10 Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010
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Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for period Ending:	Revised Annual Statement (revision no:) Final Performance and Evaluation Report
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Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) ³	\$60,482.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$18,000.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$20,000.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$34,650.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$58,476.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$5,000.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	5,000.00	0.00	0.00	0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$201,608.00	\$0.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$10,400.00		\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Part I: Summary				
PHA Name: SPRING VALLEY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY36P056501-10 Date of CFFP: Replacement Housing Factor Grant No:		FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved 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
Signature of Executive Director & Date:  4/26/2010		Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: SPRING VALLEY HOUSING AUTHORITY				Federal FFY of Grant: NY36P056501-010	
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reason for Revised Target Dates (1)
1406	9/14/2012		9/14/2014		
1408	9/14/2012		9/14/2014		
1410	9/14/2012		9/14/2014		
1430	9/14/2012		9/14/2014		
1460	9/14/2012		9/14/2014		
1465	9/14/2012		9/14/2014		
1475	9/14/2012		9/14/2014		

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

Capital Fund Program Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number SPRING VALLEY HA, NY056		Locality (City/County & State) Spring Valley, Rockland, NY		<input checked="" type="checkbox"/> Original		<input type="checkbox"/> Revision No. _____
A.	Development Number and Name	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	Spring Valley Housing Authority NY056	2010	FFY <u>2011</u>	FFY <u>2012</u>	FFY <u>2013</u>	FFY <u>2014</u>
B.	NY056-001	Annual	61,476.00	58,476.00	68,476.00	71,476.00
		Statement				
	Total Physical Improvements:		\$61,476.00	\$58,476.00	\$68,476.00	\$71,476.00
C.	Management Improvements		18,000.00	18,000.00	18,000.00	18,000.00
D.	PHA-Wide Non-Dwelling Structures and Equipment		4,000.00	5,000.00	0.00	0.00
E.	Administration		20,000.00	20,000.00	20,000.00	20,000.00
F.	Other		37,650.00	39,650.00	34,650.00	31,650.00
G.	Operations		60,482.00	60,482.00	60,482.00	60,482.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds		201,608.00	201,608.00	201,608.00	201,608.00
L.	Total Non-CFP Funds					
M.	Grand Total		201,608.00	201,608.00	201,608.00	201,608.00

Capital Fund Program Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number SPRING VALLEY HA, NY056		Locality (City/County & State) Spring Valley, Rockland, NY		<input checked="" type="checkbox"/> Original		<input type="checkbox"/> Revision No. _____
A.	Development Number and Name	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	Spring Valley Housing Authority NY056	2010	FFY <u>2011</u>	FFY <u>2012</u>	FFY <u>2013</u>	FFY <u>2014</u>
B.		Annual Statement				
	Total Physical Improvements:					
C.	Management Improvements					
D.	PHA-Wide Non-Dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total					

Capital Fund Program Five-Year Action Plan

U.S. Department of Housing and urban Development
 Office of Public and Indian Housing
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Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2011</u>			Work Statement for Year <u>2012</u>		
	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	1406 Operations		\$60,482.00	1406 Operations		\$60,482.00
Annual						
Statement	1408 Management Improvements			1408 Management Improvements		
	Tenant Advisor		\$18,000.00	Tenant Advisor		\$18,000.00
	Total 1408		\$18,000.00	Total 1408		\$18,000.00
	1410 Administration			1410 Administration		
	Staff Salaries (% of prorated salaries)		\$20,000.00	Staff Salaries (% of prorated salaries)		\$20,000.00
	Total 1410		\$20,000.00	Total 1410		\$20,000.00
	1430 Fees & Costs			1430 Fees & Costs		
	A/E Fees		\$5,000.00	A/E Fees		\$6,000.00
	Modernization Consultant Fee		\$25,000.00	Modernization Consultant Fee		\$25,000.00
	Apt. Inspections		\$3,650.00	Apt. Inspections		\$3,650.00
	Total 1430		\$33,650.00	Total 1430		\$34,650.00
	1450 Site Improvements			1450 Site Improvements		
	Parking Lots & Sidewalks-Gesner		\$20,000.00	Parking Lots - Harvest		\$20,700.00
	Total 1450		\$20,000.00	Total 1450		\$20,700.00
	Subtotal of Estimated Cost		\$ See Page 4	Subtotal of Estimated Cost		\$ See Pg 4

Capital Fund Program Five-Year Action Plan

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

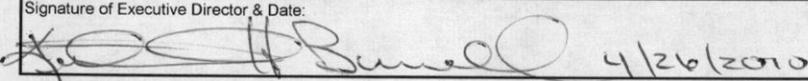
Part II: Supporting Pages - Physical Needs Work Statement(s)						
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	FFY					
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	1406 Operations		\$60,482.00	1406 Operations		\$60,482.00
Annual						
Statement	1408 Management Improvements			1408 Management Improvements		
	Tenant Advisor		\$18,000.00	Tenant Advisor		\$18,000.00
	Total 1408		\$18,000.00	Total 1408		\$18,000.00
	1410 Administration			1410 Administration		
	Staff Salaries (% of prorated salaries)		\$20,000.00	Staff Salaries (% of prorated salaries)		\$20,000.00
	Total 1410		\$20,000.00	Total 1410		\$20,000.00
	1430 Fees & Costs			1430 Fees & Costs		
	A/E Fees		\$6,000.00	A/E Fees		\$5,000.00
	Modernization Consultant Fee		\$25,000.00	Modernization Consultant Fee		\$23,000.00
	Apartment Inspections		\$3,650.00	Apartment Inspections		\$3,650.00
	Total 1430		\$34,650.00	Total 1430		\$31,650.00
	1450 Site Improvements			1450 Site Improvements		
	Landscape Improvements		\$15,000.00	Landscape Improvements		\$15,000.00
	Total 1450		\$15,000.00	Total 1450		\$15,000.00
	Subtotal of Estimated Cost		\$ See Pg 6	Subtotal of Estimated Cost		\$ See Pg 6

Part I: Summary		
PHA Name: SPRING VALLEY HOUSING AUTHORITY	Grant Type and Number NY36P056501-09 Capital Fund Program Grant No: 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"/> Reserved for Disasters/Emergencies
<input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 12/31/09	Revised Annual Statement (revision no:) 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-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) ³	\$60,482.00	\$60,482.00	\$0.00	\$0.00
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6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$34,650.00	\$34,650.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$58,476.00	\$58,476.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$5,000.00	\$5,000.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	5,000.00	5,000.00	0.00	0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$201,608.00	\$201,608.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
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23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Part I: Summary			
PHA Name: SPRING VALLEY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY36P056501-09 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"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 12/31/09 <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
Signature of Executive Director & Date:  4/26/2010		Signature of public Housing Director/Office of Native American Programs Administrator & Date:	

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: SPRING VALLEY HOUSING AUTHORITY				Federal FFY of Grant: NY36P056501-09	
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reason for Revised Target Dates (1)
1406	9/14/2011		9/14/2013		
1408	9/14/2011		9/14/2013		
1410	9/14/2011		9/14/2013		
1430	9/14/2011		9/14/2013		
1460	9/14/2011		9/14/2013		
1465	9/14/2011		9/14/2013		
1475	9/14/2011		9/14/2013		

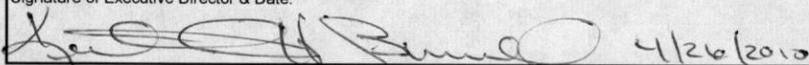
1 Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary		
PHA Name: SPRING VALLEY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: NY36P056501-08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008

Type of Grant
 Original Annual Statement Reserved for Disasters/Emergencies
 Performance and Evaluation Report for period Ending: 12/31/09 Revised Annual Statement (revision no:)
 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-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) ³	\$60,800.00	\$60,800.00	\$60,800.00	\$60,800.00
3	1408 Management Improvements	\$18,000.00	\$14,600.24	\$14,600.24	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$20,266.00	\$20,266.00	\$20,266.00	\$20,266.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$36,650.00	\$32,049.76	\$32,049.76	\$32,049.76
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$10,000.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$51,951.00	\$69,951.00	\$69,951.00	\$69,951.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$5,000.00	\$5,000.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$202,667.00	\$202,667.00	\$197,667.00	\$183,066.76
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Part I: Summary				
PHA Name: SPRING VALLEY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P056501-08 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 12/31/09 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost
		Original	Revised 2	Obligated Expended
Signature of Executive Director & Date:  4/26/2010		Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Part I: Summary	
PHA Name: SPRING VALLEY HOUSING AUTHORITY	Grant Type and Number NY36S05650109 Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:
	FFY of Grant: 2009 ARRA FFY of Grant Approval: 2009

Type of Grant

Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for period Ending: 12/31/2009
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) 3	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$25,650.00	\$25,650.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$23,000.00	\$17,198.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$207,886.00	\$213,688.00	\$23,300.00	\$23,300.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities 4	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$256,536.00	\$256,536.00	\$23,300.00	\$23,300.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Spring Valley Housing Authority

VIOLANCE AGAINST WOMEN ACT REQUIREMENTS

The Spring Valley Housing Authority has amended the Admissions and Continued Occupancy Policy to comply with the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA)

VAWA PROTECTIONS

Under the Violence Against Women Act (VAWA), public housing residents have the following specific protections, which will be observed by the Spring Valley Housing Authority:

An incident or incidents or actual or threatened domestic violence, dating violence, or stalking will not be construed as a serious or repeated violation of the lease by the victim or threatened victim of that violence, and shall not in itself be good cause for terminating the assistance, tenancy, or occupancy rights of the victim of such violence.

The Housing Authority may terminate the assistance to remove a lawful occupant or tenant who engages in criminal acts or threatened acts of violence or stalking to family members or others without terminating the assistance or evicting victimized lawful occupants. This is also true even if the household member is not a signatory to the lease. Under VAWA, the Spring Valley Housing Authority is granted the authority to bifurcate the lease.

The Housing Authority will honor court orders regarding the rights of access or control of the property.

There is no limitation on the ability of the Housing Authority to evict for other good cause unrelated to the incident or incidents of domestic violence, dating violence or stalking, other than the victim may not be subject to a “more demanding standard” than non-victims.

There is no prohibition on the Housing Authority evicting if it “can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant’s (victim’s) tenancy is not terminated.”

Any protections provided by law which give greater protection to the victim are not superseded by these provisions.

The Spring Valley Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority. Types of acceptable verifications

are outlined below, and must be submitted within 14 business days after receipt of the Housing Authority's written request for verification.

VERIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE OR STALKING

The Spring Valley Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority.

- A. *Requirement for Verification.*** The law allows, but does not require, the Spring Valley Housing Authority to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this policy. The Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

1. ***HUD-approved form (HUD-50066)*** - By providing to the Housing Authority a written certification, on the form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.
2. ***Other documentation*** - by providing to the Housing Authority 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 the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The professional providing the documentation must sign and attest 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 meeting the requirements of the applicable definition(s) set forth in this policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the

documentation must also sign and attest to the documentation under penalty of perjury.

3. ***Police or court record*** – by providing to the Housing Authority a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.

- B. ***Time allowed to provide verification/ failure to provide.*** An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by the Housing Authority to provide verification, must provide such verification within 14 business days after receipt of the written request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action.

CONFIDENTIALITY

All information provided under VAWA including the fact that an individual is a victim of domestic violence, dating violence, or stalking, shall be retained in confidence and shall not be entered into any shared database or provided to any related entity except to the extent that the disclosure is:

- A. Requested or consented to by the individual in writing;
- B. Required for used in an eviction proceeding; or
- C. Otherwise required by applicable law.

NY is a due
process state

The Spring Valley Housing Authority shall provide its tenants notice of their rights under VAWA including their right to confidentiality and the limits thereof.

Attachment NY56g02

Resident Advisory Board Comments

The Spring Valley Housing Authority held a public hearing on April 28, 2010 to discuss the program work activities. There were no comments from the RAB Resident Advisory Board during the public hearing session.