

**PHA 5-YEAR
AND
ANNUAL PLAN**

2010-2014

**CLEVELAND HOUSING
AUTHORITY**

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PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>CLEVELAND HOUSING AUTHORITY</u> PHA Code: <u>TX198</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/01/2010</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>70</u> Number of HCV units: _____					
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia N/A <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
	PHA 1:					
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the Cleveland Housing Authority is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.					
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. Goals and Objectives for 2010 and 5-year Plan <ul style="list-style-type: none"> ○ Improve the appearance and energy efficiency of all housing units ○ Reduce public housing vacancies ○ Increase the availability of decent, safe and affordable housing for persons in need ○ Increase customer satisfaction ○ Improve public housing management by: <ul style="list-style-type: none"> ➤ By cutting unit turnaround time by 20% ➤ Improving REAC scores ➤ Improve tenant rent collection to insure 100% collection rate Progress made in meeting the goals and objectives in the previous 5-year Plan: <ul style="list-style-type: none"> ○ The CHA has met many of its goals from the previous 5-year Plan such as replacing old HVAC with new energy efficiency units, we have also repaired most of our sidewalks, and we reroofed all of our units, we replaced old cabinets at the elderly site with new ones, and changed out old light fixtures with new efficiency ones. Although we have completed many jobs there are many more Capital Needs that need to be addressed. 					

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: The following PHA Plan elements marked with an X have been revised since the last Annual Plan submission by the Housing Authority of the City of Cleveland.</p> <ul style="list-style-type: none"> • <u>N/C</u> 903.7 – Eligibility, Selection and Admissions Policies, including De-concentration and Waiting List Procedures. • <u>X</u> 903.7 – Financial Resources (per Attachment A) • <u>N/C</u> 903.7- Rent Determination • <u>N/C</u> 903.7- Operation and management • <u>N/C</u> 903.7- Grievance Procedures • <u>N/C</u> 903.7- Designated Housing for Elderly and Disabled Families • <u>N/C</u> 903.7- Community Service and Self-Sufficiency • <u>N/C</u> 903.7- Safety and Crime Prevention • <u>N/C</u> 903.7- Pets • <u>N/C</u> 903.7- Civil Rights Certification • <u>N/C</u> 903.7- Fiscal Year Audit • <u>N/A</u> 903.7- Asset Management • <u>X</u> 903.7- Violence Against Women Act. (per Attachment B) <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>The following location is where all persons can obtain a 5-year Annual PHA Plan of the Housing Authority of the City of Cleveland.</p> <ul style="list-style-type: none"> • The Administrative Office at 801 S. Franklin, Cleveland, TX 77327
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> N/A</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>Open CFP Grants:</p> <p style="padding-left: 40px;">(2009 CFP / HUD Form 50075.1 –The Annual Statement/Performance Report and Evaluation Report is included has Attachment C)</p> <p style="padding-left: 40px;">(2008 CFP / HUD Form 50075.1- The Annual Statement/Performance Report and Evaluation Report is included has Attachment D)</p> <p style="padding-left: 40px;">(2006 CFP / HUD Form 50075.1- The Annual Statement/Performance Report and Evaluation Report is included has Attachment E)</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p>Capital Fund Financing Program (CFFP). <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>

**Financial Resources
Planned Sources and Uses**

Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2009 grants)		
a) Public Housing Operating Fund	\$250,176.00	
b) Public Housing Capital Fund	\$97,554.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant Based Assistance		
f) Resident Opportunity and Self- Sufficiency Grants		
g) Community Development Block grant		
h) HOME		
Other Federal Grants (list below)		
ARRA TX24S198501-09 CFRG	\$133,823.00	Has been expended
2. Prior Year Federal Grants (unobligated funds only) (list below)		
TX24P198501-06	\$6,465.45	
TX24P198501-07	\$0	closed -out
TX24P198501-08	\$70,722.00	
TX24P198501-09	\$91,054.00	
3. Public Housing Dwelling Rental Income	118,500.00	
4. Other Income (list below)	\$7,000.00	
<u>Insurance on Burn units 1/21/08</u>		
(Received 3/25/08) 1st Payment	\$87,250.96	Has been expended to rebuild
(Received 8/14/08) Final Payment	\$13,222.96	units 909 & 911 Lamar
<u>Insurance on Hurrigan Ike Damages 9/12/08</u>		
(Received 4/09/09) 1st Payment	\$70,138.91	Has been expended to repair
(Received 7/28/09) Final Payment	\$29,683.81	damages caused by IKE
<u>Insurance for Hail Damages 3/27/09</u>		
(Received 6/18/09) 1st Payment	\$27,492.37	Has been expended to repair
(Received 9/10/09) Final Payment	\$14,152.93	hail damages
5. Non-federal sources (list below)		
TOTAL RESOURCES		

ATTACHMENT A

CLEVELAND HOUSING AUTHORITY VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY

Cleveland Housing Authority recognizes the Violence Against Women Act (VAWA) 2005, which protects tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from assistance based on acts of such violence against them.

Cleveland Housing Authority may request a tenant to certify that the individual is a victim of domestic violence, dating violence or stalking and that the incidence(s) of threatened or actual abuse are bona fide in determining whether the protections afforded to such individuals under VAWA are applicable.

Cleveland Housing Authority uses applicable form HUD-50066 and the Domestic Violence, Dating Violence, or Stalking preference for administering.

Cleveland Housing Authority may request in writing that an individual complete, sign and submit, within 14 business days of the request, a HUD-approved certification form. On the form, the individual certifies that he/she is a victim of domestic violence, dating violence, or stalking, and that the incident or incidences in question are bona fide incidences of such actual or threatened abuse. On the certification form, the individual shall provide the name of the perpetrator.

In Lieu of a certification form, or in addition to the certification form, a tenant may provide the Cleveland Housing Authority (1) a Federal, State, Tribal, Territorial, or Local Policy record of court record: and (2) documentation signed and attested to 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 abuse, in which the professional attests under penalty of perjury to the professionals belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, or stalking has signed or attested to the documentation.

Cleveland Housing Authority is mindful that the delivery of the certification form to the tenant in response to an incident may place the victim at risk, e.g., the abuser may monitor the mail. Therefore, Cleveland Housing Authority may require that the tenant come into the office to pick up the certification form and will work with the tenant to make delivery arrangements that do not place the tenant at risk.

ATTACHMENT B

If the individual does not provide the form HUD-50066 or the information that may be provided in lieu of the certification by the 14th business day, or any extension of that date provided by Cleveland Housing Authority, none of the protections afforded to the victim of domestic violence, dating violence or stalking will apply.

ATTACHMENT B

12/09

VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY

DEFINITIONS:

Domestic Violence- Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim share a child in common, by a person who is cohabitated with or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that persons acts under the domestic or family violence laws of the jurisdiction.

Dating Violence- Violence committed by a person:

- (a) Who is or has been in a social relationship of a romantic of intimate nature with the victim; and (b) where the existence of such a relationship shall be determined based on a consideration of the following factors: (1) the length of the relationship ;(2) the type of relationship; and (3) the frequency of interaction between the persons involved in the relationship.

Stalking- to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (1) that person;(2) a member of the immediate family of that person; or (3) the spouse or intimate partner of the person.

Immediate Family Member- a spouse, parent, brother, or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to the person by blood or marriage.

Notice and Confidentiality- Cleveland Housing Authority must notify tenants of their rights and obligations under VAWA, which includes the existence of form HUD-50066 and the right to confidentiality and limits thereof. All information provided to Cleveland Housing Authority must be retained in confidence and must neither be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is (1) requested of consented by the individual in writing; (2) required for use in an eviction proceeding or termination of assistance; or (3) otherwise required by applicable law.

ATTACHMENT B

RESOLUTION #1209-01

- WHEREAS**, the Board of Commissioners of the Housing Authority of the City of Cleveland, Texas must adopt into the CHA policies, Violence Against Women Act. Add to A&O Policy pg. 31 and Section XXX pg.77.
- WHEREAS**, the U.S. Department of Housing And Urban Development Office of Public and Indian Housing issued PIH Notice 2006-42- Violence Against Women and Justice Department Reauthorization Act 2005, Form HUD-50066 certification of domestic violence, dating violence or stalking.
- WHEREAS**, a local preference will be offered to victims of domestic violence, dating violence, or stalking. The VAWA provides the Public Housing Agency may request a tenant to certify that the individual is a victim of domestic violence, dating violence, or stalking and that the incidence(s) of threatened or actual abuse are bona fide in determining whether the protection afforded to such individual under the VAWA are applicable.
- WHEREAS**, the Violence Against Women Act of 2005 protects tenants and family members of tenants who are victims of domestic violence, dating violence or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

NOW, THEREFORE BE IT RESOLVED by the Commissioners of the Housing Authority of the City of Cleveland, Texas as follows:

1. Violence Against Women Act Policy

After discussion Board Commissioner Bobby Coats moved that the Resolution be adopted as introduced and read. The motion was seconded by Board Commissioner IRMA Powers and on roll call the following vote was recorded.

AYES: Unanimously

NAYS:

Ronnie Danner, Chairman thereupon declared the motion passed and the Resolution approved.

Ronnie Danner
Ronnie Danner

1-12-10
Date

Joe Williamson
Joe Williamson, Executive Director

1-12-10
Date

(See Attachment(s))

ATTACHMENT B

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Housing Needs of Families on the PHA's Waiting Lists

Waiting List Type:

*Public Housing

	# of families	% of total families	Annual Turnover
Waiting list total	75		35-40
Extremely low income (<30% AMI)			
Very low income (>30% but <50% AMI)			
Low income (>50% but <80% AMI)	75	100%	
Families with children	27		
Elderly Families	9		
Families with Disabilities	10		
Race/ethnicity (Caucasian)	51		
Race/ethnicity (Black)	19		
Race/ ethnicity (Other)	5		
Race/ethnicity			

9.0

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.**

- Reduce turnaround time for vacated units
- Reduce time to rehab down units
- Adopt policies to support and encourage work for tenants
- CHA will utilize maintenance and management policies to minimize the number of housing unit in need of extensive repairs.

9.1

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 style="padding-left: 40px;">The CHA is in progress in meeting its mission and goals described in the 5- Year Plan. We have been working to make our units more energy efficient, thus cutting down on utility cost for our tenants. We have also improved the condition of the inside and outside of our units.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>Substantial Deviation from the 5Year Plan:</p> <ul style="list-style-type: none"> • A need to respond immediately to Acts of God that is beyond the control of the CHA, Such has Floods, Hurricanes, Tornadoes and any other unforeseen acts. • Any change such as additions or deletions of Strategic Goals • Any changes that require the approval of the Board of Commissioners or the input by the Resident Advisory Board. <p>Significant Deviation from the 5-Year Plan:</p> <ul style="list-style-type: none"> • Any Change inconsistent with the local approved Consolidated Plan • Any Change in a policy or procedure that requires a 30 day posting • Any increase or decrease in the funds projected in the financial statement and/or the Capital Fund Program annual statement
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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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Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/20011

Part I: Summary						
PHA Name/Number CLEVELAND HA /TX198		Locality (City/County & State)			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
B.	Physical Improvements Subtotal	Annual Statement	\$54,500.00	\$54,299.00	\$68,299.00	\$60,000.00
C.	Management Improvements		\$3,000.00	\$3,000.00	\$4,000.00	\$5,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment		\$28,299.00	\$29,000.00	\$13,500.00	\$20,799
E.	Administration		\$2,000.00	\$1,500.00	\$2,000.00	\$2,000.00
F.	Other		\$0	\$0	\$0	\$0
G.	Operations		\$9,755.00	\$9,755.00	\$9,755.00	\$9,755.00
H.	Demolition		\$0	\$0	\$0	\$0
I.	Development		\$0	\$0	\$0	\$0
J.	Capital Fund Financing – Debt Service		\$0			
K.	Total CFP Funds		\$97,554.00	\$97,554.00	\$97,554.00	\$97,554.00
L.	Total Non-CFP Funds					
M.	Grand Total					

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year :2011 FFY <u>2011</u>			Work Statement for Year: 2012 FFY <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	TX 198 –HA Wide Site Improvements: Fencing Trim Trees Maintain Sidewalks Additional Landscape	HA - Wide	\$7,500.00	TX 198-HA Wide Site Improvements Fencing, Trim Trees Maintain Sidewalks Maintain Landscape	HA-Wide	\$4,000.00
Annual	TX 198- HA Wide Dwelling Structure: Interior Painting, Replace Tile Floors, Rehab Bathrooms, (Lavatory, tubs, hardware) Replace Windows w/ Energy Efficient, Replace Interior and Exterior Doors and Hardware, HVAC, Water Heaters	HA- Wide	\$45,000.00	TX 198-HA Wide Dwelling Structure Replace out of date plumbing and sewer lines, Water Heaters Replace Tile Floors, Rehab Bathroom, (Lavatory, Tubs, Hardware) Replace Windows w/ Energy Efficient, Replace Doors and Hardware, HVAC	HA-Wide	\$48,000.00
Statement	TX 198- HA Wide Dwelling Equipment; Ranges, Refrigerators,	HA- Wide	\$2,000.00	TX 198-HA Wide Dwelling Equipment: Ranges, Refrigerators,	HA-Wide	\$2,299.00

Capital Fund Program—Five-Year Action Plan

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

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY _____	Work Statement for Year: <u>2013</u> FFY <u>2013</u>			Work Statement for Year: <u>2014</u> FFY <u>2014</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	TX 198 – HA WIDE Site Improvements Maintain Landscape, Maintain Sidewalks, Site Lighting,	HA -Wide	\$8,000.00	TX 198- HA Wide Site Improvements Maintain Landscape, Maintain Sidewalks, Trim Trees, Site Fencing,	HA-Wide	\$6,000.00
Annual	Dwelling Structures Replace out-of date plumbing and sewer lines, HVAC Replace Kitchen Cabinets, Replace Windows w/ energy efficient, Paint outside of units, Water Heaters	HA-Wide	\$57,000.00	Dwelling Structures Replace Kitchen Cabinets, Masonry Cleaning / Porch Repairs, Interior Painting, HVAC, Water Heaters	HA-Wide	\$50,000.00
Statement	Dwelling Equipment Appliances, Window units Washer & Dryers	HA-Wide	\$3,299.00	Dwelling Equipment Ranges, Refrigerators,	HA-Wide	\$4,000.00
	Non-Dwelling Equipment Blower, Weed Eater, Trimmer, Training Equipment for Tenants, ,Office Equipment	HA-Wide	\$8,500.00	Non-Dwelling Equipment Community Building's Equipment, Maint.Equipment, Office Equipment	HA-Wide	8,500.00

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/20011

	<u>Non-Dwelling Structure</u> Community Building Repairs, Maint. Bldging. Repairs, Office Repairs	HA- Wide	\$5,000.00	<u>Non-Dwelling Structure</u> Storage Building, Building Repairs, Office Repairs	HA-Wide	\$12,299.
	SUBTOTAL OF	ESTIMATED COST	\$81,799.00	SUBTOTAL OF	ESTIMATED COST	\$80,799
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		



U.S. Department of Housing and Urban Development
Houston Field Office, Region VI
Office of Public Housing
1301 Fannin Street, Suite 2200
Houston, Texas 77002
(713) 718-3123
www.hud.gov

October 23, 2009

Mr. Joe Williamson
Executive Director
Cleveland Housing Authority
801 S. Franklin
Cleveland, TX 77327



Dear Mr. Williamson:

SUBJECT: Cleveland FY 2005 and 2007 CFP Closeout

Our office is in receipt of the closeout documents for your FY 2005 and 2007 Capitol Fund Program TX24P198501-05 and TX24P198501-07. These documents are in order and this ends your reporting requirements for this project. If you are required to have a Fiscal Audit, you are required to ensure that this program is included in that audit. The copy of the signed and approved AMCC is being returned for your records.

If you should have any questions about this matter, please contact Brian Reese at (713) 718-3216 or Sheron Ramdhanny at (713) 718-3215.

Sincerely,

Dan Rodriguez, Jr.
Program Center Coordinator

Enclosure

**Actual Comprehensive Grant
Cost Certificate**
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-015
(Exp. 11/30/2008)

PHA/IHA Name Cleveland Housing Authority	Comprehensive Grant Number TX24P198501-07 FFY of Grant Approval 2007
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The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

A. Original Funds Approved	\$ 100,166.00
B. Revised Funds Approved	\$ 100,166.00
C. Funds Advanced	\$ 100,166.00
D. Funds Expended (Actual Modernization Cost)	\$ 100,166.00
E. Amount to be Recaptured (A-D)	\$
F. Excess of Funds Advanced (C-D)	\$

2. That all modernization work in connection with the Comprehensive Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and

5. That the time in which such liens could be filed has expired.

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

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

Signature Joe William	Date 9-21-09
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For HUD Use Only

The Cost Certificate is approved for audit.

Approved for Audit (Director, Public Housing Division) 	Date 10/23/09
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The audited costs agree with the costs shown above.

Verified (Director, Public Housing Division)	Date
Approved (Field Office Manager)	Date

Annual Statement / Performance and Evaluation Report
 Comprehensive Grant Program (CGP) **Part II: Supporting Pages**

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ²
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	Work Items							
HA-Wide	1460 Dwelling Structure	HA-Wide		55,118.00	93,786.94	93,786.94	93,786.94	Complete
HA-Wide	Replace Soffit & Fascia	" "						
HA-Wide	Replace A/C	HA-Wide						
HA-Wide	1406 Operations:	HA-Wide		5,000.00		5,000.00	5,000.00	Complete
HA-Wide	1408 Management Improvement	" "		6,679.00				
HA-Wide	1410 Administration	" "		5,000.00				
HA-Wide	1450 Site Improvement	" "		5,000.00				
HA-Wide	1465: Dwelling Equipment	HA-Wide		12,369.00	1,379.06	1,379.06	1,379.06	Complete
HA-Wide	1470 Non-Dwelling Structure	" "		5,000.00				
HA-Wide	1475 Non-Dwelling Equipment	" "		6,000.00				

Signature of Executive Director

Date

Signature of Public Housing Director

Date

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

² To be completed for the Performance and Evaluation Report.

**Actual Comprehensive Grant
Cost Certificate**
Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(Exp. 11/30/2008)

PHA/IHA Name Cleveland Housing Authority	Comprehensive Grant Number TX24P198501-05
	FFY of Grant Approval 2005

The PHA/IHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Comprehensive Grant, is as shown below:

A. Original Funds Approved	\$ 101,369.00
B. Revised Funds Approved	\$ 101,369.00
C. Funds Advanced	\$ 101,369.00
D. Funds Expended (Actual Modernization Cost)	\$ 101,369.00
E. Amount to be Recaptured (A-D)	\$
F. Excess of Funds Advanced (C-D)	\$

2. That all modernization work in connection with the Comprehensive Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work; and

i. That the time in which such liens could be filed has expired.

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

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

Signature <i>T. Williams</i>	Date 9-21-09
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For HUD Use Only

The Cost Certificate is approved for audit.

Approved for Audit (Director, Public Housing Division) <i>[Signature]</i>	Date 10/24/09
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The audited costs agree with the costs shown above.

Verified (Director, Public Housing Division)	Date
oved (Field Office Manager)	Date

Annual Statement / Performance and Evaluation Report
 Comprehensive Grant Program (CGP) Part I: Summary

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

OMB Approval No. 2577-0157
 (exp. 3/31/2010)

HA Name Cleveland Housing Authority	Comprehensive Grant Number TX24P198501-05	FFY of Grant Approval 2005
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement/Revision Number _____
 Performance and Evaluation Report for Program Year Ending _____
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ²	
		Original	Revised ¹	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not exceed 10% of line 20)	10,137.00		10,137.00	10,137.00
3	1408 Management Improvements	5,000.00	249.75	249.75	249.75
4	1410 Administration	3,232.00		3,232.00	3,232.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	40,000.00		40,000.00	40,000.00
11	1465.1 Dwelling Equipment—Non-expendable	20,000.00	27,750.25	27,750.25	27,750.25
12	1470 Non-dwelling Structures	3,000.00			
13	1475 Non-dwelling Equipment	20,000.00		20,000.00	20,000.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (Sum of lines 2-19)	101,369.00		101,369.00	101,369.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director _____	Date _____	Signature of Public Housing Director _____	Date _____
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Annual Statement / Performance and Evaluation Report
 Comprehensive Grant Program (CGP) **Part II: Supporting Pages**

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

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work ²
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
	Work Items							
HA-Wide	1465: Dwelling Equipment	HA-Wide		20,000.00	27,750.25	27,750.25	27,750.25	Complete
HA-Wide	Refrigerator	" "						
HA-Wide	Stoves, Appliances	" "						
HA-Wide	1406 Operations:	" "		10,137.00		10,137.00	10,137.00	Complete
HA-Wide	1460 Dwelling Structure	HA-Wide		40,000.00		40,000.00	40,000.00	Complete
HA-Wide	Electrical update, A/C repair	" "						
HA-Wide	Cabinets, Replace Flooring, Paint units	" "						
HA-Wide	1408 Management Improvement:	" "		5,000.00	249.75	249.75	249.75	Complete
HA-Wide	1475 Non-Dwelling Equipment:	HA-Wide		20,000.00		20,000.00	20,000.00	Complete
HA-Wide	Maintenance Truck	" "						
HA-Wide	Non-Dwelling Structure	HA-Wide		3,000.00				
HA-Wide	1410 Administration	HA-Wide		3,232.00		3,232.00	3,232.00	Complete

Signature of Executive Director

Date

Signature of Public Housing Director

Date

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Cleveland Housing Authority			Grant Type and Number Capital Fund Program Grant No: TX24P198501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<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: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	7,000.00		7,000.00	7,000.00
3	1408 Management Improvements	5,000.00		5,000.00	3,690.28
4	1410 Administration	7,000.00		7,000.00	3,788.07
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	6,090.00		6,090.00	6,090.00
10	1460 Dwelling Structures	56,000.00	64,000.00	56,000.00	55,826.91
11	1465.1 Dwelling Equipment—Nonexpendable	12,000.00		12,000.00	11,682.65
12	1470 Nondwelling Structures	5,000.00		5,000.00	5,773.64
13	1475 Nondwelling Equipment	5,000.00	3,000.00	5,000.00	2,773.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	103,090.00		103,090.00	96,624.55
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Cleveland Housing Authority		Grant Type and Number Capital Fund Program Grant No: TX24P198501-06 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations *Public Housing operations	1406	N/A	7,000.00			7,000.00	
HA Wide	Managements Improvements *Housing Authority *Computer Software *Equipment upgrade *C.H.A. Staff training	1408	N/A	5,000.00			3,690.28	
HA Wide	Administration	1410	N/A	7,000.00			3,788.07	
HA-Wide	Site Improvement *Landscape *Sidewalks	1450	Various	6,090.00			6090.00	
TX198-001	Dwelling Structure *Exterior of all units & Office Hardy Board Fasias & & Soffit *Paint Exterior of all units	1460	Various	56,000.00	64,000.00		55,826.91	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: Housing Authority of the City of Cleveland	Grant Type and Number Capital Fund Program Grant No: TX24P198501-08 Replacement Housing Factor Grant No:	Federal FY of Grant: 2008
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no):
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations – Reserves	6,000.00		6,000.00	6,000.00
3	1408 Management Improvements	6,679.00			
4	1410 Administration	14,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	2,000.00			
10	1460 Dwelling Structures	44,674.00			
11	1465.1 Dwelling Equipment—Nonexpendable	9,369.00			
12	1470 Nondwelling Structures	20,000.00		20,000.00	20,000.00
13	1475 Nondwelling Equipment	3,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	105,766.00		26,000.00	26,000.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26					

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of the City of Cleveland		Grant Type and Number Capital Fund Program Grant No: TX24P198501-08 Replacement Housing Factor Grant No:			Federal FY of Grant:2008			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA Wide	Operations * Public Housing operation	1406	N/A	6,000.00		6,000.00	6,000.00	
HA Wide	Management Improvements * Housing Authority * Computer software * Equipment upgrade * C.H.A. staff training	1408	N/A	6,679.00				
HA Wide	Administration	1410	N/A	14,000.00				
TX198-001,002	Site Improvement * Landscape * Site Lighting	1450	Various	2,000.00				
TX198-001,002	Dwelling Structure * Replace Plumbing Lines * Start transition to single meter family units (water) * Replace Plumbing Fixture * Interior Doors * Interior Doors Hardware * Masonry Cleaning / Porch Repairs * Exterior Door Hardware	1460	Various	44,674.00				

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

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

Part I: Summary					
PHA Name: CLEVELAND HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX24P19850109 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	5,000.00			
3	1408 Management Improvements	2,500.00			
4	1410 Administration (may not exceed 10% of line 21)	2,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	25,000.00			
10	1460 Dwelling Structures	54,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	4,000.00			
12	1470 Non-dwelling Structures	1,054.00			
13	1475 Non-dwelling Equipment	4,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)				
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				

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: CLEVELAND HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX24P19850109 Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director		Date	Signature of Public Housing Director	
			Date	

Part II: Supporting Pages								
PHA Name: CLEVELAND HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: TX24P19850109 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA -Wide	Operations	1406		5,000.00				
" "	Computer Software, Office Equip.	1408		2,500.00				
" "	Seminars, Training	1410		2,000.00				
TX198-1, TX198-2	Sidewalk Repair, lighting, Landscape	1450		25,000.00				
TX198-1, TX198-2	Replace A/C/Heating, Cabinets, Repair Bathrooms, Doors, Lights Windows, Plumbing repairs, Painting, Screens	1460		54,000.00				
TX198-1, TX198-2	Ranges, Washer/Dryer's	1465		4,000.00				
TX198-1, TX198-2	Community Building Improvements	1470		1,054.00				
TX198-1, TX198-2	Maint. Equipment / Tools	1475		4,000.00				

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

² To be completed for the Performance and Evaluation Report.

**CLEVELAND HOUSING AUTHORITY
801 S. FRANKLIN
CLEVELAND, TX 77327
281-593-1159**

RESIDENT ADVISORY BOARD

❖ **NOTIFICATION OF MEETING**

The Cleveland Housing Authority Resident Advisory Board consists of 5 Board Members. A letter was sent out 9/14/2009 to all Advisory Board Members to inform them of a scheduled meeting to be held 9/21/2009 at the CHA Community Building at 801 S. Franklin.

❖ **RESIDENT ADVISORY BOARD MEETING**

The CHA RAB met on 9/21/2009 to discuss the PHA 5-Year Plan. The Board was told to discuss any recommendations that they thought needed to be addressed in the 5-Year Plan. The Advisory Board will meet again after the Public meeting.

❖ **NOTIFICATION OF PUBLIC MEETING**

Schedule date for Public meeting 9/24/2009 at the community building.

❖ **PUBLIC MEETING**

The Advisory Board and the CHA tenants discussed all recommendations made about things that needed to be addressed by the Housing Authority such as:

1. Making the units more energy efficient

- Replace windows with energy efficient ones
- Replace HVAC with energy efficient units

2. Rehab the units Bathrooms

- Put showers in the units that do not have them
- Replace worn tubs
- Replace lavatory and cabinets
- Replace plumbing and utilities

❖ **Final Resident Advisory Board Meeting for 5-Year Plan**

The Advisory Board and the Executive Director met on 10/5/2009 to finalize what needed to be addressed in the 5-Year Plan for 2010- 2014.

RESOLUTION #1209-02

WHEREAS, the Board of Commissioners of the Housing Authority of the City of Cleveland, Texas must adopt PHA 5-Year Plan 2010 thru 2014.

NOW, THEREFORE BE IT RESOLVED by the Commissioners of the Housing Authority of the City of Cleveland, Texas as follows:

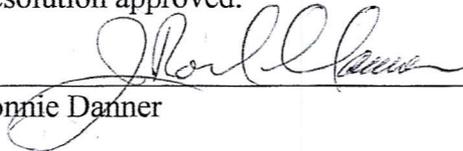
1. PHA 5-Year Plan 2010 thru 2014.

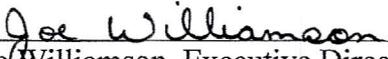
After discussion Board Commissioner Irma Powers moved that the Resolution be adopted as introduced and read. The motion was seconded by Board Commissioner Pat Wilke and on roll call the following vote was recorded.

AYES: Unanimously

NAYS:

Ronnie Danner, Chairman thereupon declared the motion passed and the Resolution approved.

 1-12-10
Ronnie Danner Date

 1-12-10
Joe Williamson, Executive Director Date

(See Attachment(s))

Civil Rights Certification

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

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

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

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

Cleveland Housing Authority

TX-198

PHA Name

PHA Number/HA Code

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

Name of Authorized Official

J. Ronald Danner

Title

Board Chairman

Signature



Date

1-12-10

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Cleveland Housing Authority

Program/Activity Receiving Federal Grant Funding

TX198

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

TX198

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

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

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

Name of Authorized Official

Joe Williamson

Title

Executive Director

Signature

X *Joe Williamson*

Date

1/12/2010

**Certification of Payments
to Influence Federal Transactions**

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

Applicant Name

Cleveland Housing Authority

Program/Activity Receiving Federal Grant Funding

TX198

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

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

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

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

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

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

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

Name of Authorized Official

J. Ronald Danner

Title

Chairman of the Board

Signature



Date (mm/dd/yyyy)

1-12-10

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 02	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: N/A Congressional District, if known:	
6. Federal Department/Agency: U.S. Department of Housing and Urban Development	7. Federal Program Name/Description: Capital Fund Program CFDA Number, if applicable: #14.872	
8. Federal Action Number, if known: N/A	9. Award Amount, if known: \$ 97,554.00	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): N/A	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: J. Ronald Danner Title: Board Chairman Telephone No.: 281-593-1159 Date: 1-12-10	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ~~2010~~ 5-Year and/or ~~2010~~ Annual PHA Plan for the PHA fiscal year beginning 4/01/2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

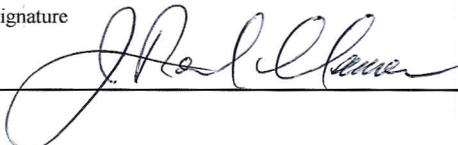
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority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

Cleveland Housing Authority
PHA Name

TX-198
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 10 - 20 14
 Annual PHA Plan for Fiscal Years 20 10 - 20 11

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

Name of Authorized Official	Title
J. Ronald Danner	Board Chairman
Signature	Date
	1-12-10

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

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

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

I, Jill B. Kirkonis the Mayor of City of Cleveland certify that the Five Year and
Annual PHA Plan of the Cleveland Housing Authority is consistent with the Consolidated Plan of
Liberty County prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official