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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>Westby Housing Authority</u> PHA Code: <u>WI117</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2010</u> | | | | |
| 2.0 | Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>35</u> Number of HCV units: <u>0</u> | | | | |
| 3.0 | Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only | | | | |
| 4.0 | PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) | | | | |
| | Participating PHAs | PHA Code | Program(s) Included in the Consortia | Programs Not in the Consortia | No. of Units in Each Program |
| | | | | | PH HCV |
| | PHA 1: | | | | |
| | PHA 2: | | | | |
| | PHA 3: | | | | |
| 5.0 | 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. | | | | |
| 5.1 | Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of WHA is: 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: 1. Reduce public housing vacancies (less than 20 vacant unit months), 2. improve public housing management (attain and maintain a PHAS score above 90), 3. Renovate or modernize public housing units. The goals and objectives from the previous 5-year plan were made without having a suitable baseline measurement. We have now improved the information gathering to accurately measure performance. Later years of the 5-year plan showed some improvement in all goals such as: reduced vacancy and renovating and modernizing public housing units. These items continue to need more improvement. | | | | |

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| 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:</p> <ol style="list-style-type: none"> 1. Eligibility, Selection and Admissions Policies-Part 3 of the ACOP was revised to include clarifying language for full-time students and added language for EIV Debts Owed and Termination requirements. Part 5 of the ACOP was revised to include non compliance with WHA community service requirements to conditions of transfer wait list considerations. Part 7 of the ACOP was revised to add language for placement of inactive application back on the bottom of the waiting list. Part 11, sect 1(E) of the ACOP was revised to include a change in the mode of delivery for violation and termination notices from certified mail to First Class mail and personal delivery or posting. Also sect 2(G) was revised to add language for third party verification of income to reflect new EIV requirements. In addition, sect 9(A)(3) was revised to change the length of time a household can remain absent from the unit without notice to the HA from 30 consecutive days to 14 consecutive days. Appendix A of the ACOP was also revised to reflect the new income limits. 2. Financial Resources-no change 3. Rent Determination-Part 8 of the ACOP was revised to change wording for Utility reimbursement and TTP to reflect \$50 minimum rent wording. Added wording to clarify method of utility reimbursement checks and need for 2 endorsers. Also added language requiring quarterly zero-income questionnaires for negative rent tenants. Appendix C of the ACOP was revised to reflect newly calculated utility allowances for the houses and duplexes. Appendix D of the ACOP was also revised to include new maximum rents 4. Operation and Management. The timeframe in which WHA has to return security deposits was changed slightly to include "reasonable timeframe". Appendix F of the ACOP was revised to include new Debts owed reporting to EIV 5. Grievance Procedures. No change 6. Designated Housing for Elderly and Disabled Families. No change 7. Community service-Part 13 of the ACOP was revised to add sections pertaining to acceptable forms of verifications for exemption, notification of non-compliance, and opportunity for cure. 8. Safety and Crime Prevention-no change 9. Pets-Pet rules were revised to include a limit on the size of an aquarium to 10 gallons or less. In addition, the pet deposit was also increased to \$300 (except for service animals). 10. Civil rights certification-WHA reviewed policies and procedures surrounding Reasonable Accommodation. Part 2 of the ACOP was then revised to add language for Fair Housing and Reasonable Accommodations. 11. Fiscal year audit-Due to the limited size of the housing authority and the management company, training of accounting staff is limited. The housing authority will rely on the auditors for the preparation of the final year end accounting reports. All financial data has been submitted to FASS-PH and has been approved for the 9/30/09 audit. 12. Asset Management-WHA has been approved for stop loss and asset management. All management functions, including financial, is contracted with a property management firm. Records are kept of project income and expenses, monthly financial and occupancy reports are provided to the board for review and planning and budgeting is communicated between the board and the management agent. 13. VAWA-WHA has implemented a VAWA policy and included these requirements into the ACOP policy. VAWA brochures have been and will continue to be distributed to all households providing them with additional resources in the event of an occurrence. <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. Copies may be obtained at Westby Housing Authority, 503 S. Main Street, Westby WI 54656 or at Allegiant Property Management, LLC, 3462 Losey Blvd. S., La Crosse, WI 54601</p> |
| 7.0 | <p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> |
| 8.0 | <p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p> |
| 8.1 | <p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> |
| 8.2 | <p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> |
| 8.3 | <p>Capital Fund Financing Program (CFFP). <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> |

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| 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. Housing needs in the community continue to appear to be good quality, subsidized (30% of income), senior/disabled housing and family units of all sizes. Landlords presently have no major incentive to improve the quality of the present housing stock.</p> |
| 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. WHA will continue to educate those most in need of the availability of the subsidized housing. WHA will also continue to modernize and make their units more energy efficient.</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>WHA had four main goals:</p> <ol style="list-style-type: none"> 1. Reduce vacancies-WHA has been striving to reduce vacancies and have been successful in doing so after a slight adjustment period. In the past some rules were not enforced which caused a false impression that things were going better than they were. We have overcome that hurdle and are continuing to work on tenant retention. 2. Improve PHAS score-We have not seen the results of our work yet 3. Improve maintenance and operations-our maintenance requests are being addressed quicker than they had been in the past and repairs are being done in a more appropriate fashion. Thanks to the stimulus grant we were able to perform some energy efficiency improvements and start some much needed roof replacements. 4. Renovate and modernize housing-We have updated much of the carpet and concrete at the properties. Updating woodwork and doors is needed in order to make the units more marketable. <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>WHA defines these as: discretionary changes in the plans or policies of WHA that fundamentally change the mission, goals, objectives or plans of the agency which require formal approval of the Board of Commissioners.</p> |
| 11.0 | <p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ol style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (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. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) |

Violence Against Women Act Activity

There has been no activity to report under our VAWA policy.

Westby Housing Authority has implemented the VAWA policy within the Admissions and Continued Occupancy Plan. Westby Housing Authority has also distributed the brochure titled "Violence Against Women in Federally Funded Rental Assisted Housing" to all tenant households. This brochure provides additional phone numbers for information on VAWA and how it relates to public law.

Westby Housing Authority will continue to act as a resource/referral source for any household member seeking information about domestic violence.

Item 11 f. & g Resident Advisory Board Comments

There are no comments from the Residents. Four tenants participated in our first meeting with was held in March and two participated in our June meeting.

There were no challenged elements of the plan.

**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 X 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 10/1/2010, 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.

Westby Housing Authority
PHA Name

W1117
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2010 - 2014

Annual PHA Plan for Fiscal Years 2010 - 2011

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 |
| Carolyn Larson | Board Chairperson |
| Signature | Date |
| <i>Carolyn Larson</i> | 4/8/2010 |

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.

Westby Housing Authority
PHA Name

WI117
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 | Title |
| <u>Carolyn Larson</u> | <u>Board president</u> |
| Signature <u>Carolyn Larson</u> | Date <u>6/8/10</u> |

**Certification for
a Drug-Free Workplace**

U.S. Department of Housing
and Urban Development

Applicant Name

Westby Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund

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.)

503 S. Main Street
Westby, Vernon County, WI 54667

3462 Lozey Blvd. S.
LaCrosse, LaCrosse Co, WI 54601

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

Carolyn Larson

Title

Board Chairperson

Signature

X *Carolyn Larson*

Date

6/8/2010

**Certification of Payments
to Influence Federal Transactions**

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

Applicant Name

Westby Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund *and operating subsidy*

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)

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| Name of Authorized Official Carolyn Larson | Title Board Chairperson |
| Signature <i>Carolyn Larson</i> | Date (mm/dd/yyyy) <i>6/8/2010</i> |

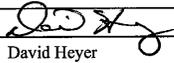
Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

Approved by OMB
0348-0046

| | | | | | |
|--|--|---|--|--|--|
| 1. Type of Federal Action: <input checked="checked" 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 checked="checked" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | | 3. Report Type: <input checked="checked" 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="checked" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Westby Housing Authority | | | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: _____ | | |
| 6. Federal Department/Agency: U.S. Department of Housing and Urban Development | | | 7. Federal Program Name/Description: CFDA Number, if applicable: _____ | | |
| 8. Federal Action Number, if known: | | | 9. Award Amount, if known: \$ _____ | | |
| 10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): | | | b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): | | |
| 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: David Heyer Title: Executive Director Telephone No.: 608-784-1381 Date: 6/2/10 | | |
| Federal Use Only: | | | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) | |

**State of Wisconsin
Department of Commerce
Division of Housing and Community Development**

Wisconsin Consolidated Plan

CERTIFICATION FORM

This form or a HUD authorized equivalent, should be completed by the public housing agency to obtain certification of consistency with the State of Wisconsin Consolidated Plan. The State Department of Commerce, Division of Housing and Community Development will process Certification requests as promptly as possible; however please submit a request as early in the process as you can.

SEND TO:

**Consolidated Plan Certification
Division of Housing and Community Development
Attn: Jeanne Storm
P.O. Box 7970
Madison, WI 53707-7970
PHONE: (608) 264-6110
FAX: (608) 266-5381
TDD: (608) 264-8777**

PART I

- 1) **Today's Date:** 6/2/2010
- 2) **Due Date for Plan Submission to HUD:** 7/16/2010
- 3) **Public Housing Agency Type:** Standard Performer
(High Performer, Standard Performer, Troubled Performer, Section 8 Only, Small PHA)
- 4) **Agency Name and Address:** Westby Housing Authority

503 S. Main Street
Westby, WI 54667

Mailing Address P.O. Box 581
La Crosse, WI 54602-0581
- 6) **Contact Person and Phone Number:** David Heyer 608-784-1381

PART II

Certification of Consistency with State of Wisconsin Consolidated Plan

PHA Plan Type (Select One)

- Standard Annual PHA Plan
- Standard 5-Year/Annual PHA Plan
- Streamlined 5-Year/Annual PHA Plan
- Other: _____

PHA Statement

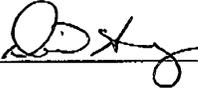
To the best of our knowledge, the proposed public housing agency plan is consistent with the jurisdiction's current, approved Consolidated Plan. (Type or clearly print the following information)

Public Housing Agency Name: Westby Housing Authority

David Heyer, Contracted Executive Director

Public Housing Agency Official's Name:

Public Housing Agency Official's Signature



For Division of Housing and Community Development Use Only

Name of Public Housing Agency Jurisdiction:

State of Wisconsin

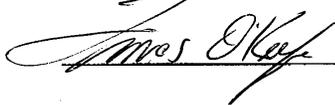
Certifying Name and Title of Jurisdiction's Consolidated Plan Official:

James O'Keefe, Administrator
Division of Housing and Community Development
Department of Commerce

DCD Approval Date:

June 8, 2010

DCD Approval Signature:



Westby Housing Authority
503 S. Main Street
Westby, WI 54667

Resolution #245

The Board of Directors passed the following resolution at the Regular Board Meeting on May 11, 2010. A motion was made by Roger Kaut and seconded by Kelvin ~~Carolyn~~ Hanson. All members in favor.

It is hereby resolved that the WESTBY HOUSING AUTHORITY shall approve Resolution #245 that would approve the 2010 Annual Plan for the fiscal year 2010-2011.

Harlan Stalson
Carolyn Larson, President
Harlan Stalson, Vice President

David Heyer
David Heyer, Executive Director

Westby Housing Authority
503 S. Main Street
Westby, WI 54667

Resolution #246

The Board of Directors passed the following resolution at the Regular Board Meeting on May 11, 2010. A motion was made by Roger Krueh and seconded by Kelvin ~~Carol Larson~~ Hanson. All members in favor.

It is hereby resolved that the WESTBY HOUSING AUTHORITY shall approve Resolution #246 that would approve the 2010 5 Year Plan.

Harlan Stoleson
Carolyn Larson, President

Harlan Stoleson, vice
president

David Heyer
David Heyer, Executive Director

Westby Housing Authority
503 S. Main Street
Westby, WI 54667

Resolution #249

The Board of Directors passed the following resolution at the Regular Board Meeting on July 13, 2010. A motion was made by Dennis Olson and seconded by Roger Kruk. All members in favor.

It is hereby resolved that the WESTBY HOUSING AUTHORITY shall approve Resolution #249 that would approve the amended 2010 Annual Plan for the fiscal year 2010-2011 to reflect the actual grant amount of \$45,742.

Carolyn Larson
Carolyn Larson, President

David Heyer
David Heyer, Executive Director

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 | | FFY of Grant: 2010 | |
|------------------------------------|---|---|---|
| PHA Name: Westby Housing Authority | Grant Type and Number: Capital Fund Program Grant No: W139P117-501-10 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant Approval: | |
| Type of Grant | <input type="checkbox"/> Original Annual Statement and Evaluation Report for Period Ending: | <input type="checkbox"/> Revised Annual Statement (revision no:) | |
| Line | Summary by Development Account | Total Estimated Cost Revised ¹ | Total Actual Cost ¹ Expended |
| 1 | Total Non-CFP Funds | Original | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | |
| 3 | 1408 Management Improvements | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 2177 | |
| 5 | 1411 Audit | | |
| 6 | 1415 Liquidated Damages | | |
| 7 | 1430 Fees and Costs | | |
| 8 | 1440 Site Acquisition | | |
| 9 | 1450 Site Improvement | 10000 | |
| 10 | 1460 Dwelling Structures | 32000 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | |
| 12 | 1470 Non-dwelling Structures | | |
| 13 | 1475 Non-dwelling Equipment | 565 | |
| 14 | 1485 Demolition | | |
| 15 | 1492 Moving to Work Demonstration | | |
| 16 | 1495.1 Relocation Costs | | |
| 17 | 1499 Development Activities ⁴ | | |

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

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

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

| Part I: Summary | | FFY of Grant: 2010 FFY of Grant Approval: | |
|---|--|--|---|
| PHA Name: Westby Housing Authority | Grant Type and Number Capital Fund Program Grant No: W199P117-501-1-0 Replacement Housing Factor Grant No: Date of CFFP: | | |
| Type of Grant | <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | <input type="checkbox"/> Reserve for Disasters/Emergencies | <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report |
| Line | Summary by Development Account | Original | Revised ¹ |
| | | Total Estimated Cost | Total Actual Cost ¹ |
| | | Obligated | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | 1000 | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 45742 | |
| 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 | 12500 | |
| Signature of Executive Director David Heyer | | Signature of Public Housing Director | |
| Date | | Date | |

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

Capital Fund Program—Five-Year Action Plan

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

| Part I: Summary | | | | | | | | |
|------------------------|--|------------------------------------|--------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|--------------|
| PHA Name/Number | Development Number and Name | Work Statement for Year 1 FFY_2010 | Locality (City/County & State) | Work Statement for Year 2 FFY_2011 | Work Statement for Year 3 FFY_2012 | Work Statement for Year 4 FFY_2013 | Work Statement for Year 5 FFY_2014 | Revision No: |
| A. | | | Westby, WI | | | | | |
| B. | Physical Improvements Subtotal | Annual Statement 62700 | | 67450 | | 55400 | | 63600 |
| C. | Management Improvements | | | | | | | |
| D. | PHA-Wide Non-dwelling Structures and Equipment | | | | | | | |
| E. | Administration | | 3135 | | 3373 | 2770 | | 3180 |
| F. | Other | | | | | | | |
| G. | Operations | | | | | | | |
| H. | Demolition | | | | | | | |
| I. | Development | | | | | | | |
| J. | Capital Fund Financing – Debt Service | | | | | | | |
| K. | Total CFP Funds | | 65835 | | 70823 | 58170 | | 66780 |
| L. | Total Non-CFP Funds | | | | | | | |
| M. | Grand Total | | 65835 | 70823 | | 58170 | | 66780 |

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

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

| Part I: Summary | | Grant Type and Number | | FFY of Grant: 2009 | |
|------------------------------------|--|--|--|---|--------------------------------|
| PHA Name: Westby Housing Authority | | Capital Fund Program Grant No: W139P117-501-09 | | FFY of Grant Approval: | |
| Date of CFFP: | | Replacement Housing Factor Grant No: | | | |
| Type of Grant | | Reserve for Disasters/Emergencies | | Revised Annual Statement (revision no:) | |
| Original Annual Statement | | Performance and Evaluation Report for Period Ending: | | Final Performance and Evaluation Report | |
| Summary by Development Account | | Original | | Total Estimated Cost Revised ² | |
| Line | | | | Obligated | Total Actual Cost ¹ |
| | | | | | Expended |
| 1 | Total non-CFF Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 2296 | | 2296 | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 42600 | | 27020 | 9234 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | | | | |

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

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 | | FFY of Grant: 2009 FFY of Grant Approval: | |
|---|--|---|--------------------------------------|
| PHA Name: Westby Housing Authority | Grant Type and Number Capital Fund Program Grant No: W139P117-501-09 Replacement Housing Factor Grant No: Date of CFFP: | | |
| Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | |
| Line | Summary by Development Account | Total Estimated Cost | Total Actual Cost ¹ |
| | | Original | Obligated |
| | | Revised ² | Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | 1000 | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 45896 | 29316 |
| 21 | Amount of line 20 Related to LBP Activities | | 9234 |
| 22 | Amount of line 20 Related to Section 504 Activities | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | |
| Signature of Executive Director David Heyer | | Date | Signature of Public Housing Director |
| | | 6/17/2010 | |

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

| Part I: Summary | | Grant Type and Number | | FFY of Grant: 2009 | |
|---|--|--|---|--|---|
| PHA Name: Westby Housing Authority | | Capital Fund Program Grant No: W39P117-501-09 | | FFY of Grant Approval: | |
| | | Replacement Housing Factor Grant No: | | | |
| | | Date of CFFP: | | | |
| Type of Grant | | Reserve for Disasters/Emergencies | | Revised Annual Statement (revision no:) | |
| <input type="checkbox"/> Original Annual Statement | | <input type="checkbox"/> Reserve for Disasters/Emergencies | | <input type="checkbox"/> Final Performance and Evaluation Report | |
| <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | | | | |
| Line | Summary by Development Account | Original | Total Estimated Cost Revised ¹ | Obligated | Total Actual Cost ¹ Expended |
| 1 | Total non-CFF Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 2920 | 2920 | 2920 | 2920 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | 53950 | 54981 | 54981 | 54981 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 530 | 499 | 499 | 499 |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | | | | |

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⁴ RHF funds shall be included here.

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

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

| | | | |
|---|---|---|--|
| Part I: Summary | | FFY of Grant: FFY of Grant Approval: | |
| PHA Name: | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP: | | |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | |
| Type of Grant | <input type="checkbox"/> Reserve for Disasters/Emergencies | Total Estimated Cost | Total Actual Cost¹ |
| Line | Summary by Development Account | Original | Revised² Obligated |
| 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) | 1000 | 0 |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 58400 | 58400 |
| 21 | Amount of line 20 Related to LRP 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 | 13450 | 12245 |
| Signature of Executive Director David Heyer | | Signature of Public Housing Director | |
| 06/17/2010 | | 12245 | |
| Date | | Date | |

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

