

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>Washburn Housing Authority</u> PHA Code: <u>WI-127000001</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input checked="" type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 37 Number of HCV units: 73																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input checked="" 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.)																										
	<table border="1"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	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:					
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 PHA is to assist low-income families with safe, decent, and affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. The Housing Authority is committed to operating in an efficient, ethical, and professional manner, free from discrimination.																										
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. See Attachment A – Goals and Objectives for Previous 5-Year Plan See Attachment B – Goals and Objectives for Current 5-Year Plan																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (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.																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i>																										
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.																										
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.																										
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.																										
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.																										
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.																										

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p><i>Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the PHA that fundamentally change the mission, goals, objectives, or plans of the Agency and which require formal approval of the Board of Commissioners.</i></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> <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>

ATTACHMENT A – GOALS AND OBJECTIVES FOR PREVIOUS 5-YEAR PLAN

1. **Leverage private or other public funds to create additional housing opportunities.**

The status of unit vacancies and waiting lists suggest that additional housing opportunities are not needed at this time.

2. **Improve public housing management: (PHAS score)**

3. **Increase customer satisfaction:**

The rehabilitation of our units has greatly increased tenant satisfaction. The tenants are very pleased to live in like-new apartments/houses and have provided very positive feedback.

4. **Renovate or modernize public housing units:**

In 2005, the Washburn Housing Authority made use of the IRS Section 42 Tax Credit Program to completely rehabilitate and remodel our 36 public housing units. The result was that units originally constructed in 1978 were made “like-new”.

5. **Increase voucher payment standards:**

Voucher payment standards have increased since 2005. In 2009 the voucher payment standards are higher than they were in 2007 and appear comparable to other Housing Authorities in the area.

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

The Housing Authority has supported efforts by Bayfield County Human Services, Community Support Services, Meals-on-Wheels, Bay Area Rural Transit (BART) and other community supportive services. The Housing Authority sometimes helps to bridge the Tenant to the applicable service.

7. **Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:**

8. **Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:**

To increase the quality of the living environment for all tenants, the Housing Authority undertook a massive rehabilitation of their units through the IRS Section 42 Tax Credit Program. The Housing Authority is an equal opportunity provider and the program is also predicated on no discrimination.

9. **Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.**

During the planning stages of the rehabilitation, efforts were made to provide adaptable housing units designed to accommodate persons with disabilities.

ATTACHMENT B – GOALS AND OBJECTIVES FOR CURRENT 5-YEAR PLAN

1. Continue efforts to improve public housing management – (PHAS score)
2. Continue to assure access to low income housing regardless of race, color, religion, national origin, sex, familial status, and disability.
3. Continue measures to provide suitable living environment for families living in low income housing, regardless of race, color, religion, national origin, sex, familial status, and disability.
4. Continue affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.
5. Continue using Energy Star® appliances and other energy efficient and renewable energy technologies in our housing units.
6. Maintain a high performer status under HUD’s Section 8 Management Assessment Program (SEMAP). Maintain high utilization of vouchers and budget without exceeding authorized limits.
7. Continue renovating public housing properties and making capital improvements which promote fire safety and life safety as well as preserving the asset.
8. Promote and enforce equal employment opportunity and affirmative action. Attract and retain a diverse and qualified work force.

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name <p style="text-align: center;">Washburn Housing Authority</p>	Grant Type and Number Capital Fund Program Grant No: WI39P127501-08 Replacement Housing Factor Grant No	Federal FY of Grant: <p style="text-align: center;">2008</p>
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement revision no: 1
 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	\$ 9,071.20	\$20,271.23	\$10,000.00	\$10,000.00
3	1408 Management Improvements	\$1,500.00	\$2,500.00	\$1,215.00	\$1,215.00
4	1410 Administration	\$1,644.76	\$0.00		
5	1411 Audit	\$4,500.00	\$5,000.00	\$4,500.00	\$4,500.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	\$5,000.00	\$0.00		
10	1460 Dwelling Structures		\$644.73		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	\$8,200.00	\$1,500.00		
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	\$15,440.04	\$15,440.04	\$15,440.04	\$7,720.02
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$45,356.00	\$45,356.00		
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	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Washburn Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P127501-08 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	
127-1 HA Wide	Operations	1406	1	\$ 9,071.20	\$20,271.23	\$10,000.00	\$10,000.00	On-going
127-1 HA Wide	Management Improvement	1408	1	\$1,500.00	\$2,500.00	\$1,215.00	\$1,215.00	On-going
127-1 HA Wide	Administration	1410	1	\$1,644.76	\$0.00			
127-1 HA Wide	Audit Costs	1411	1	\$4,500.00	\$5,000.00	\$4,500.00	\$4,500.00	On-going
127-1 HA Wide	Site Improvement	1450	1	\$5,000.00	\$0.00			
	Dwelling Structures	1460	1		\$644.73			On-going
127-1 HA Wide	Non-Dwelling Equipment	1475	1	\$8,200.00	\$1,500.00			On-going
127-1 HA Wide	Collateralization/Debt Servc. (Loan Debt Obligation to WHEDA) BLI 9002 in eLOCCs	1501	1	\$15,440.04	\$15,440.04	\$15,440.04	\$7,720.02	On-going

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: Washburn Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39P12750109 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	\$9,271.23			
3	1408 Management Improvements	\$2,500.00			
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit	\$5,000.00			
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,407.73			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$11,500.00			
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					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: FFY of Grant Approval:	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input 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
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$15,440.04			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$45,119.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director			Signature of Public Housing Director		
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 CFP Grants for operations.

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

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

Part I: Summary					
PHA Name: Washburn Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39S127501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <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				
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				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$11,780.00	\$17,500.00	\$2,191.23	\$2,191.23
11	1465.1 Dwelling Equipment—Nonexpendable	\$23,400.00	\$39,216.00	\$9,426.07	\$9,426.07
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$22,231.00	\$695.00	\$695.00	\$695.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

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

Part I: Summary					
PHA Name: Washburn Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39S127501-09 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <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
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)	\$57,411.00	\$57,411.00	\$12,312.30	\$12,312.30
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

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 II: Supporting Pages								
PHA Name: Washburn Housing Authority		Grant Type and Number Capital Fund Program Grant No: WI39S127501-09 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	
WI 127-001	Replace Stoves in Family Homes	1465.1	35	\$13,800.00	\$28,789.93			On-going
	Replace HA Vehicle	1475	1	\$15,200.00	0.00			Canceled
	Replace Air Exchanger at Elderly Bldg.	1460	1	\$4,700.00	\$8,000.00			On-going
	Copy Machine enhancement to fax funct.	1475	1	\$2,031.00	\$695.00	\$695.00	\$695.00	Completed
	Replace Door Handles/Locks on FH	1460	48	\$5,280.00	\$7,000.00	\$2,191.23	\$2,191.23	On-going
	Replace Snow Plow on HA Truck	1475	1	\$5000.00	\$ 0.00			Canceled
	Provide Dehumidifiers for Family Homes	1465.1	12	\$3,600.00	\$2,823.35	\$2,823.35	\$2,823.35	Completed
	Replace Washers/Dryers at Elderly Bldg.	1465.1	6	\$6,000.00	\$6,602.72	\$6,602.72	\$6,602.72	Completed
	Replace Boiler Expansion Tank	1460	1	\$1,800.00	\$3,500.00			On-going

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

² To be completed for the Performance and Evaluation Report.

PART I: SUMMARY						
PHA Name/Number Washburn Housing Authority WI-127000001			Locality (City/County & State) Washburn, Bayfield County, Wisconsin		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
B.	Physical Improvements Subtotal	Annual Statement	\$1,000.00	\$1,000.00	\$1,215.96	\$1,215.96
C.	Management Improvements		\$2,800.00	\$2,800.00	\$2,800.00	\$2,800.00
D.	PHA-Wide Non-dwelling Structures and Equipment		\$11,500.00	\$6,715.96	\$3,000.00	\$3,000.00
E.	ADMINISTRATION					
F.	Other		\$5,163.00	\$5,163.00	\$5,163.00	\$5,163.00
G.	Operations		\$9,215.96	\$14,000.00	\$17,500.00	\$17,500.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service		\$15,440.04	\$15,440.04	\$15,440.04	\$15,440.04
K.	Total CFP Funds		\$45,119.00	\$45,119.00	\$45,119.00	\$45,119.00
L.	Total Non-CFP Funds					
M.	Grand Total					

RESOLUTION #361
HOUSING AUTHORITY OF THE CITY OF WASHBURN

WHEREAS, the Executive Director has prepared a Public Housing Authority (PHA) Plan for Fiscal Year 2010, which has been reviewed by the Resident Advisory Board (RAB); and

WHEREAS, the PHA Plan has been certified by the State of Wisconsin, Department of Commerce, to be consistent with the Wisconsin Consolidated Plan; and

WHEREAS, the Washburn Housing Authority is in compliance with the PHA Plan and related regulations;

NOW THEREFORE, the Housing Authority of the City of Washburn hereby approves the PHA Certification of Compliance with PHA Plan and Related Regulations as presented.

Dated and Signed this 21st day of August, 2009.

Board of Commissioners

Donald E. Long

Betty Jane Cummings

Karen Cooke

DJCU

Executive Director/Secretary of Board

Kimberly Walker

**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: August 3, 2009

- 2) Due Date for Plan Submission to HUD: Mid-October

- 3) Public Housing Agency Type:
(High Performer, Standard Performer,
Troubled Performer, Section 8 Only,
Small PHA) Small PHA (36 Units)

- 4) Agency Name and Address: Washburn Housing Authority
420 East Third Street
Washburn, WI 54891

- 6) Contact Person and Phone Number: Kimberly Wallin @ 715/373-2653 Ext. 12

PART II

Certification of Consistency with State of Wisconsin Consolidated Plan

PHA Plan Type *(Select One)*

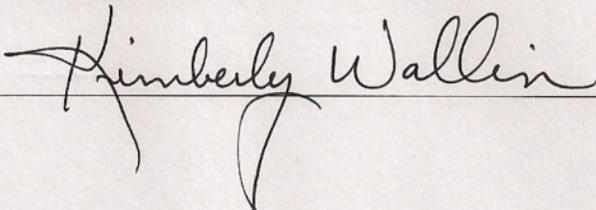
- Standard Annual PHA Plan
- Standard 5-Year/Annual PHA Plan *kw*
- Streamlined 5-Year/Annual PHA Plan
- Other: _____

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: Washburn Housing Authority

Public Housing Agency Official's Name: Kimberly Wallin
Executive Director

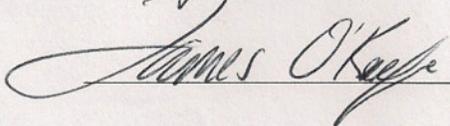
Public Housing Agency Official's Signature: 

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: August 10, 2009

DCD Approval Signature: 

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the City of Washburn

Program/Activity Receiving Federal Grant Funding

Section 8 Vouchers and Public Housing; Operating Subsidy & Capital Funds

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 Federalagency 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.)

Site #1 - 417 Fifth Avenue West, Washburn, WI 54891
Site #2 - 318 East Fifth Street, Washburn, WI 54891
Site #3 - 325 East Fifth Street, Washburn, WI 54891
Site #4 - 21 West Fourth Street, Washburn, WI 54891
Site #5 - 408 East Fifth Street, Washburn, WI 54891
Site #6 - 417 East Fifth Street, Washburn, WI 54891
Autumn Manor Apartments, 420 East Third Street, Washburn, WI 54891

Site #7 - 516 West Fifth St., Washburn, WI 54891
Site #8 - 416 7th Avenue West, Washburn, WI 54891
Site #9 - 414 West Third St., Washburn, WI 54891
Site #10- 511 West Pine St., Washburn, WI 54891
Site #11- 330 East Seventh St., Washburn, WI 54891
Site #12- 316 West Seventh St., Washburn, WI 54891

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

Kimberly P. Wallin

Title

Executive Director

Signature

Kimberly Wallin

Date

August 27, 2009

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of the City of Washburn

Program/Activity Receiving Federal Grant Funding

Section 8 Vouchers and Public Housing; Operating Subsidy & Capital Funds

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)

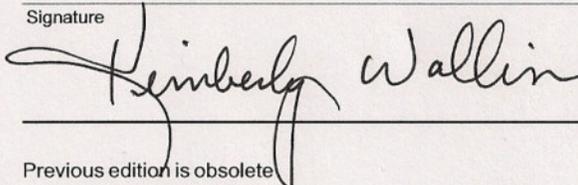
Name of Authorized Official

Kimberly P. Wallin

Title

Executive Director

Signature



Date (mm/dd/yyyy)

08/27/2009

Previous edition is obsolete

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

**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 Annual PHA Plan for the PHA fiscal year beginning 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.

Washburn Housing Authority
 PHA Name

WI-127
 PHA Number/HA Code

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

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 Mr. Donald Terry	Title Chairman, Board of Commissioners
Signature 	Date 08/21/2009

*Providing Quality
Housing since
1973!*

Housing Authority
City of Washburn & Bayfield County
420 East Third Street, Washburn, WI 54891
Phone: 715/373-2653 Fax: 715/373-2610



"THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER"

August 17, 2009

Subj: Resident Advisory Board

Members of the Resident Advisory Board (RAB) were selected from among the tenants of the 36 units currently managed by the Washburn Housing Authority.

The three members were chosen as follows:

Betty Cummings	Autumn Manor 420 East Third Street, Apt. 100 Washburn, WI 54891
William Kerr	Autumn Manor 420 East Third Street, Apt. 102 Washburn, WI 54891
Regena Reading	(HUD family home) 417 Fifth Avenue West Washburn, WI 54891

The members of the board were provided copies of the draft PHA Plan for review and met on August 14, 2009 to discuss. The Executive Director went over the plan with all members of the RAB. The comments of the Resident Advisory Board were favorable and no changes to the draft plan were suggested.

A handwritten signature in cursive script that reads "Kimberly Wallin".

Mr. Kimberly Wallin
Executive Director

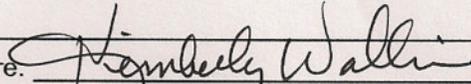
DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input 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 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: ^{4c}	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: HUD - Public Housing Division	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): 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: <u></u> Print Name: <u>Kimberly Wallin</u> Title: <u>Executive Director</u> Telephone No.: <u>715/373-2653 Ext. 12</u> Date: <u>8/27/2009</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**TITLE VI, Violence Against Women and Department of Justice Reauthorization
Act of 2005**

This letter serves as a notice to you regarding the enactment of the law called "Violence Against Women and Department of Justice Reauthorization Act of 2005" signed by President Bush. This enactment is part of the U.S. Housing Act of 1937, Title VI of which Sections 8 (0)(7)C and (7)(D) govern prohibitions on termination of assistance and evictions for domestic violence, dating violence, or stalking.

Implementation of the following provisions of Title VI, Section 606 requirements will be entered into by the **City of Washburn Housing Authority** and are your rights and responsibilities:

Selection:

- That an applicant or participant is or has been a victim of domestic violence, dating violence, or stalking is not an appropriate basis for denial of program assistance or for denial of admission of an otherwise qualified applicant.

Lease Terms Regarding Termination:

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

Termination of Assistance/Eviction:

- Criminal activity directly relating to domestic violence, dating violence, or stalking engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that domestic violence, dating violence, or stalking. The person engaging in the threatening behavior, however, can be evicted under housing rules regarding criminal or threatening behavior.

If you feel you are a victim of domestic violence, dating violence or stalking and that you could be denied housing or could be evicted due to these circumstances, you should report this to the Housing Authority. You will need to:

1. Certify via a HUD –approved certification form that you are a victim of domestic violence, dating violence or stalking, and that the incident or incidents in question are bona fide incidents of such actual or threatened abuse and such certification shall include the name of the perpetrator. The individual shall provide such certification within 14 business days after the housing authority requests such certification in writing or,
2. Provide the requesting housing authority with documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the
3. Victim has sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of the abuse, in which the professional attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation; or
4. An individual can produce a court record.

Confidentiality

Information provided by the victim pursuant to the certification shall be retained in confidence and not entered into any shared database nor provided to any related entity except when the disclosure is: consented to by the individual in writing, required for use in eviction proceedings, or otherwise required by law.

Domestic Violence – (as defined in Section 40002 of VAWA 1994) stated as follows:

- SEC 40002(a)(6) – “Domestic Violence” – The term 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 shares a child in common, by a person who is cohabitating with or has cohabited 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 the person’s acts under the domestic or family violence laws of the jurisdiction.”

Dating Violence – (as defined in Section 40002 of VAWA 1994) states as follows:

SEC 40002(a)(8) – “Dating Violence” – The term dating violence committed by a person –

- Who is or had been in a social relationship of a romantic or intimate nature with the victim and
- Where the existence for such a relationship shall be determined based on a consideration of the following factors:
 - The length of the relationship.
 - The type of relationship.
 - The frequency of interaction between the persons involved in the relationship.

Stalking – “means”

- (i) To follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate another person and (ii) 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 –
 - that person
 - a member of the immediate family of that person or
 - the spouse or intimate partner of that person

Immediate Family Member – means with respect to a person –

- A spouse, parent, brother, sister or child of that person, or an individual to whom that person stands in loco parents; or
- Any other person living in the household of that person and related to that person by blood or marriage.”