

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Dane County Housing Authority</u> PHA Code: <u>WI214</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: <u>01/2010</u>																										
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>86</u> Number of HCV units: <u>1,160 (baseline)</u>																										
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1" style="width: 100%; border-collapse: collapse;"> <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:					
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PHA 3:																											
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <u>Dane County Housing Authority's mission is to promote and ensure safe, decent, and affordable housing for our participants, as well as provide owners and developers with an opportunity to rehabilitate and develop affordable housing.</u>																										
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <u>1) Increase voucher holders 2) Maintain PH at 97% higher occupancy 3)Improve PHAS score 4)Maintain High Performer status S8 HCV 5)Apply for other housing resources when available and feasible 6) Work towards creating a self-sufficiency program for S8V participants, implement smoke-free policy for PH. Goals Achieved 2005-2009 Plan 1) Expanded supply of assisted housing. Applied for and received 50 new FUP vouchers, maintained a high occupancy rate in PH, in the application and acquisition process to acquire 55 additional units of elderly/disabled housing under the Rural Development program. Received high performer status is S8 HCV program, initiated a FSS program, continued modernization and renovation of PH units. Conducted owner outreach, administered a S8 homeownership program, which is subsidizing nine (9) families. .</u>																										
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <u>None</u> (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. <u>Dane County Housing Authority, 2001 W. Broadway, Monona, WI 53719; DCHA website at <a href="http://www.dcha.net">www.dcha.net</a>, and the public library main office and branch offices.</u>																										
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i> Not applicable.																										
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.																										
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.																										
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.																										
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> <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.																										

**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.

**HH- Household, ELI – Extremely Low Income, LI – Low Income**

Consolidated Plan data reflects that for **ELI HH for renters: Elderly 1 & 2 member HH with extreme cost burden is 42.4%, HH with 2-4 members 63.8%, and large HH with 5+ members 52.1%.** The percentages are somewhat higher for homeowners with small HH (2-4 members) having an **83.5%** extreme cost burden. **LI HH cost burden for renters – elderly 13.2%, small HH (2-4 members) 7.5%, Large HH (5+ members) 7.1%**

**Elderly LI HH owners have 9.8%** extreme cost burden while small, large, & other home owner HH have a **49.1%, 43.3%, and 36.5%** respectively, extreme cost burden.

The breakdown of renter **ELI HH with any housing problem (cost burden greater than 30% of income, overcrowding, lack complete kitchen or plumbing facilities)** is as follows: Elderly **61.8%**, small HH **80.5%**, Large HH **96.9%** & all others HH **87.6%**. **LI HH** affected with any housing problem Elderly **69.5%**, Small HH **64.8%**, Large HH **76.5%**, other HH **71%**.

**ELI HH homeowners – elderly 85.4%, small HH 91.2%, Large HH 91.7%, and all others 81.6%.** with any housing problem as noted above: Elderly **69.5%**, Small HH **64.8%**, Large HH **76.5%**, other HH **71%**. For **LI HH homeowners: Elderly 35.2%, small HH 81.1%, Large HH 87.8%., and all other HH 59.2%.**

Dane County data also revealed in examining disproportionately greater need across racial or ethnic groups is the small numbers of persons who are non-white. AA elderly comprised .54% (less than 1%) of the elderly households. All (100%) AA elderly renter households had one or more housing problems compared to just 43% of white elderly. All (100%) of AA households with incomes of 30% or less of the median family income had one or more housing problems compared on 62.4% of the white elderly renter households.

The approximately 2,000 applicants on the DCHA waiting list evidence the demand for affordable rental housing in Dane County or the need of increased housing subsidies. During the early 2000's the largest increase of new construction was for single-family housing with a slight upswing in multi-family housing (market rate).

9.0

Condition of housing plays a large role in the ability of the low to extremely low household seeking safe and decent housing. The above figures provide an idea of the % of low to extremely low-income renters and homeowners that have some type of housing problem other than cost burden. Thus indicating that housing rehab is a huge factor in addressing the housing need in Dane County. Approximately 59% of housing stock in Dane County (outside of the City of Madison) is between 30-40- years old. Over 40% of housing stock in some of the Dane County communities was built prior to 1939. Housing rehab was cited frequently by some of the municipalities in Dane County.

Data indicates that 29% of households in Dane County (outside the City of Madison) are paying greater than 30% of their gross income on rent. There are 26,323 renter-occupied units in Dane County (outside the City of Madison), which results in 7,634 renters in need of affordable housing. For homeowners, 24 % were spending more than 30% on their mortgage and associated costs. In order to afford a 2-BR rental unit/utilities at the fair market rent (FMR) of \$846 a household must earn \$2,820.00 per month (\$33,840 annually). One person working minimum wage must work 99 hours per week, 52 weeks per year in order to make the FMR affordable, or a household must include 2.5 minimum wage workers working 40 hours per week year round to make the FMR affordable. The 2009 mean wage of a renter in Dane County was estimated at \$12.77 per hour. In order to afford the FMR for a two-bedroom apartment, the renter must work 51 hours per week, 52 weeks per year.

Due to economic down turn there is a need to find affordable housing solutions for both low to extremely-low income renters and homeowners.

Development of affordable housing has decreased in past years due in part to high development costs, zoning issues, tightening of credit, lack of capital, etc.

In addition to the aforementioned needs Dane County has to address housing needs for the homeless – options that provide the best path to success such as shelters vs. Housing First. Housing needs for the disabled – accessibility issues, independent living, assisted living vs. institutional or nursing home care.

There are associated barriers that play a large part in the meeting housing needs of low to extremely low-income households such as transportation and jobs. Also the need to reduce and/or eliminate the arbitrary rules, regulations, policies, and procedures that hamper the development of affordable housing.

9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b> <u>Dane County Housing Authority will continue to administer its current programs which provide safe, decent, and sanitary housing for low to extreme low income families. We will work in partnership with other agencies such as Dane County and the City of Madison to further our mission. We will seek opportunities that will increase the housing choices of low to very low income families by applying for funds when available.. Low to extremely low-income families (includes elderly and disabled singles) need affordable, safe, and decent housing. DCHA will maintain its housing stock to ensure that all its housing meets the needs of low to extremely low-income families. We will administer our programs to ensure that vacancy rates are low and a swift turnover of units that are vacated to ensure applicants on the waiting list are served as soon as possible. We will also closely monitor utilization of the S8 HCVP to ensure that when funds are available we can promptly serve wait list applicants. We will continue to review and update policies as needed to 1) comply with HUD requirements, 2) create policies that are fair and beneficial to the participants and 3) provide benefit to the program overall.</u></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan. <u>Through the continued administration of the S8 HCVP, Low-Rent PH Program, HUD subsidized (formerly RD) Program, Homebuyer Education and Down Payment Assistance Program, Capital Fund Program, and S8 (y) Homeownership Program, and more recently FUP Voucher Program we continue to do the work of our mission which is to promote and ensure safe, decent, and affordable housing. DCHA met its goals under the HUD strategic goals such as applying for, additional rental vouchers, reduce PH vacancies, improve PHAS &amp; SEMAP, modernize PH, outreach to landlords, implement voucher homeownership program, and increase payment standards.</u></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” <b>Significant Amendment</b> <u>Any actions, decision, or policies recommended by DCHA that substantially changes its mission, goals, and objectives, will be brought before the public by a public hearing prior to final approval of the Board of Commissioners and implementation by staff. Any changes by such actions or policies, which may conflict or perceive to conflict with HUD rules and/or regulations will be subject to HUD’s review and/or prior public input, Board of Commissioners approval, and implementation by Dane County Housing Authority. Significant modifications to major strategies to address housing needs and to major policies (e.g., policies governing eligibility, selection or admissions and rent determination) or programs (e.g., demolition or disposition, designation, homeownership programs or conversion activities).</u></p> <p><b>Substantial Deviation/Modification</b> - <u>Any actions, decisions, or policies recommended by DCHA that substantially changes its missions, goals, and objectives, stated in the 5-year plan will be brought before the public by a public hearing prior to final approval of the Board of Commissioners and implementation by staff. Any changes by such actions or policies, which may conflict or perceive to conflict with HUD rules and/or regulations will be subject to HUD’s review and/or prior public input, Board of Commissioners approval, and implementation by Dane County Housing Authority.</u></p>

<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(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)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## Instructions form HUD-50075

**Applicability.** This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission.** A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives.** Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

**6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

**7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers**

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)  
**Note:** This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

**8.0 Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

**8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

**8.2 Capital Fund Program Five-Year Action Plan**

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**9.1 Strategy for Addressing Housing Needs.** Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**10.0 Additional Information.** Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

**11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

<b>Part I: Summary</b>	
<b>PHA Name: Dane County Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450107 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2007</b> <b>FFY of Grant Approval: 2007</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending:       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	12,000		23,073.47	23,073.47
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	22,501		8300	8300
10	1460 Dwelling Structures	78,720		93,694.63	93,694.63
11	1465.1 Dwelling Equipment—Nonexpendable	13,670		13,670	13,670
12	1470 Non-dwelling Structures	4,400			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450107 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2007</b> <b>FFY of Grant Approval: 2007</b>	
<b>Type of Grant</b>						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	131,291	131,291	131,291	131,291	
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					
<b>Signature of Executive Director Carolyn A. Parham</b> Date 10/15/09			<b>Signature of Public Housing Director</b>		<b>Date</b>	

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450107 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2007</b>			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
WI214000001	Admin	1410		12,000	23,073.47	23,073.47	23,073.47	Complete
WI214000001	Landscaping	1450		33,800	8,300	8,300	8,300	Complete
WI214000001	Drive/Parking Lots	1450		2,716	0	0	0	
WI214000001	Flooring	1460		32,500	29,676.50	29,676.50	29,676.50	Complete
WI214000001	Roof/Gutters	1460		16,000	6,355	6,355	6,355	Complete
WI214000001	Bathroom Rehab	1460		6,500	7,839.73	7,839.73	7,839.73	Complete
WI214000001	Furnaces	1460		18,500	9,394.09	9,394.09	9,394.09	Complete
WI214000001	Doors	1460		4,000	7,249.32	7,249.32	7,249.32	Complete
WI214000001	Kitchen Remodel	1460		15,000	2,948.01	2,948.01	2,948.01	Complete
WI214000001	Paint/Drywall	1460		0	24,058.51	24,058.51	24,058.51	Complete
WI214000001	Lighting/Electrical	1460		0	3,267.97	3,267.97	3,267.97	Complete
WI214000001	Hot Water Heaters	1460		0	2,905.50	2,905.50	2,905.50	Complete
WI214000001	Appliances	1465		9,775	6,222.90	6,222.90	6,222.90	Complete
WI214000001	Cement Work	1470		3,000	0	0	0	

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

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







<b>Part I: Summary</b>	<b>PHA Name: Dane County Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450108 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval: 2008</b>
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**Type of Grant**  
 **Original Annual Statement**       **Reserve for Disasters/Emergencies**       **Revised Annual Statement (revision no: \_\_\_\_\_)**  
 **Performance and Evaluation Report for Period Ending:**       **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements	12,000	0		
4	1410 Administration (may not exceed 10% of line 21)	0	12,000	4,629.79	4,629.79
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	22,500	22,500		
10	1460 Dwelling Structures	87,539	87,539		
11	1465.1 Dwelling Equipment—Nonexpendable	5,000	5,000		
12	1470 Non-dwelling Structures	1,500	1,500		
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450108 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:2008</b> <b>FFY of Grant Approval: 2008</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:                      ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
21	Amount of line 20 Related to LBP Activities	128,539	128,539	128,539	128,539
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				
<b>Signature of Executive Director Carolyn A. Parham</b> <b>Date 10/15/2009</b>			<b>Signature of Public Housing Director</b>		<b>Date</b>

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









<b>Part I: Summary</b>	<b>PHA Name: Dane County Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450109 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval: 2009</b>
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**Type of Grant**  
 **Original Annual Statement**       **Reserve for Disasters/Emergencies**       **Revised Annual Statement (revision no: \_\_\_\_\_)**  
 **Performance and Evaluation Report for Period Ending:**       **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements	12,787			
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	31,752			
10	1460 Dwelling Structures	77,238			
11	1465.1 Dwelling Equipment—Nonexpendable	6,090			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450109 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:2009</b> <b>FFY of Grant Approval: 2009</b>	
<b>Type of Grant</b>					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	127,867			
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				
<b>Signature of Executive Director Carolyn A. Parham</b> Date 10/15/2008			<b>Signature of Public Housing Director</b>		<b>Date</b>

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Dane County Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
WI214000001	Admin	1410		12,787				
WI214000001	Flooring	1460		16,380				
WI214000001	Inter. Doors	1460		8,190				
WI214000001	Window Replacements	1460		3,150				
WI214000001	Painting	1460		10,773				
WI214000001	Bath Remodel	1460		4,410				
WI214000001	Kitchen Remodel	1460		12,285				
WI214000001	Drywall & Plastering	1460		7,560				
WI214000001	Electrical & Plumbing Upgrades	1460		5,670				
WI214000001	Hot Water Heaters	1460		1,260				
WI214000001	Furnaces	1460		7,560				
WI214000001	Landscaping	1450		31,752				
WI214000001	Appliances	1465		6,090				

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

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







<b>Part I: Summary</b>	
<b>PHA Name: Dane County Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39S21450109 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval: 2009</b>	

**Type of Grant**  
 **Original Annual Statement**       **Reserve for Disasters/Emergencies**       **Revised Annual Statement (revision no: \_\_\_\_\_)**  
 **Performance and Evaluation Report for Period Ending:**       **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	16,270			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	72,500			
10	1460 Dwelling Structures	66,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	3,500			
13	1475 Non-dwelling Equipment	4,435			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39S21450109 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2009</b> <b>FFY of Grant Approval: 2009</b>	
<b>Type of Grant</b>						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	162,705				
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					
<b>Signature of Executive Director Carolyn A. Parham</b> Date 10/15/2009				<b>Signature of Public Housing Director</b>  <b>Date</b>		

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Dane County Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39S21450109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
WI214000001	Admin	1410		16,270				
WI214000001	Parking Lot Replacement	1450		30,000				
WI214000001	Landscaping	1450		40,000				
WI214000001	Concrete Work	1450		2,500				
WI214000001	Windows	1460		20,000				
WI214000001	Doors	1460		15,000				
WI214000001	Boiler Replacement	1460		6,600				
WI214000001	Kitchen Cabinets	1460		25,000				
WI214000001	Dumpster Enclosures	1470		3,500				
WI214000001	Gutter Replacements	1475		4,435				

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

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







<b>Part I: Summary</b>	
<b>PHA Name: Dane County Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450110 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval: 2010</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending:       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	12,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	42,925			
10	1460 Dwelling Structures	122,500			
11	1465.1 Dwelling Equipment—Nonexpendable	9,575			
12	1470 Non-dwelling Structures	2,500			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450110 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2010</b> <b>FFY of Grant Approval: 2010</b>	
<b>Type of Grant</b> <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:                      ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	189,500				
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					
<b>Signature of Executive Director Carolyn A. Parham</b> <b>Date 10/15/2009</b>				<b>Signature of Public Housing Director</b> <b>Date</b>		

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

<b>Part II: Supporting Pages</b>								
PHA Name: Dane County Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: WI39P21450110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2010</b>			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
WI213400001	Admin	1410		12,000				
WI213400001	Driveways/Parking Lot Repair & Seal	1450		6,500				
WI213400001	Drywall	1460		5,500				
WI213400001	Electrical Updates	1460		5,000				
WI213400001	Plumbing Updates	1460		8,500				
WI213400001	Garage Doors	1470		2,500				
WI213400001	Landscaping	1450		36,425				
WI213400001	Bath Upgrade	1460		7,000				
WI213400001	Windows	1460		5,000				
WI213400001	Painting	1460		17,000				
WI213400001	Door Replacement	1460		14,000				
	Flooring	1460		28,000				
	Water Heaters	1460		4,000				
	Furnaces	1460		10,000				
	Kitchen Cabinets	1460		18,500				
	Appliances	1465		9,575				

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

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







**Capital Fund Program—Five-Year Action Plan**

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

<b>Part I: Summary</b>						
PHA Name/Number Dane County Housing Authority WI214		Locality (City/County & State) Monona/Dane Wisconsin			<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
	WI214000001					
B.	Physical Improvements Subtotal	Annual Statement	125,000	125,000	150,000	150,000
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		2,000	1,750	1,500	2,500
E.	Administration		12,000	12,000	12,000	15,000
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total	189,500	139,000	138,750	163,500	167,650

**Part I: Summary (Continuation)**

PHA Name/Number		Locality (City/county & State)				<input type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____	
		Annual Statement					









Resident Advisory Board Comments for 2010 Plan  
Public Housing Residents and S8 HCV Participants

In preparation for the 2010 plan Dane County Housing Authority provided members with a copy of the plan and asked for feedback.

1. Do you agree with the mission of Dane County Housing Authority?

- 89% agreed
- 11% both agreed and disagreed. They cited a number of reasons for their response – **1)** tenants with bad habits should be removed so that it would be safe and the property decent looking **2)** did not feel where they lived was safe, and **3)** wanted better locks on the entry doors into the building and steel frames for the door hinges.

2. Do you feel that Dane County Housing Authority is serving the needs of low-income families?

- 78% - Yes
- 11% - Yes & No
- 11% - No

Those responding yes & no and no had the following to say: **1)** Need more in City of Madison near hospitals and pharmacies and other needs for people without transportations. **NOTE:** Dane County Housing Authority's jurisdiction is outside the City of Madison and there is no mass transit for families/individuals who need to come into the City of Madison. **2)** Believe some are served well, but due to lack of funds many more need help. DCHA does a good job serving the people you can. **3)** Wants regularly scheduled meeting with HA and tenants. **4)** Feels more should be given in utility allowances **5)** Needs painting **6)** Need more availability of housing, inspections, and enforcement.

3. What policy changes would you like to see at Dane County Housing Authority. (Can be about any policy).

- Suggested Changes – 59%
- No Changes – 41%

Comments: **1)** Would like to see landlords sign a confidentiality agreement so that landlords cannot tell others we are on S8. I feel very discriminate against because of this, and others treat me badly because of this. **NOTE:** There is an ordinance in Dane County and the City of Madison which prohibits the refusal of a family (person) simply because they are a S8 HCVP participant. The ordinance has made S8 participants a protected class **2)** Increase public housing available for families, people with disabilities, and the elderly **3)** Never had any problem with the policy – all is fine **4)** Raise utility checks **5)** rules should be enforced **5)** Feel program is great **6)** Should have a free pet security policy for the elderly.

4. Do you feel there is adequate housing affordable housing for low-income households in Dane County?

- Yes – 16%
- No – 67%

- Both (yes & no) - 7%
- No Answer – 7%

Contributing Reasons:

High Rents – 41%

Lack of Transportation – 30%

Lack of Good Paying Jobs – 37%

Not Enough Housing Available – 59%

Not Enough People Moving On So Others Get An Opportunity – 33%

Lack of Funding – 52%

Other – 11%

Comments: 1)Not sure how much is available 2)Not very good housing available for the very low-income and not enough people can move due to overpriced or inadequate housing 3)Not enough public involvement.

5. What would you suggest Dane County Housing Authority do to increase housing opportunities for low-income families?

- Have classes educating people about credit, finance, and home buying opportunities.
- Provide jobs as well as housing for qualified tenants
- Be faster with help because people really need housing
- Provide more housing
- Build more homes and provide jobs for the people so eventually they can save and move on for somebody else to get a chance
- I feel they (DCHA) is doing a good job with what they have to work with
- Have more family housing
- Increase the maintenance department
- Lobby politicians to give public housing more funding
- DCHA should team up with the housing developers to make more sufficient housing available not only for elderly and disabled but for the families who are facing hardships
- Would like to see more landlords accept Section 8
- Housing for seniors who live on social security
- More housing in and near Madison
- Work with developers to include low-income units in new residential complexes
- Get more funding so people don't have to be on a list for so long
- Make/allow more housing because waiting lists too long and unemployment is high, people don't have jobs can't afford housing
- Uncertain
- Teach tenants to care for homes/apartments so that landlords will be willing to rent to them. Hold them more accountable if they destroy property they are renting
- Let HUD in Washington know your needs, get new legislation promoted to aid the cause, get the word out to the public to tell their congressmen about the needs

6. In addition to providing housing, what other services and programs would you like Dane County Housing Authority to provide for its residents and program participants:

- Family Self Sufficiency – 26%
- Onsite services for elderly/disabled (meals on wheels, visiting nurse, etc.) – 37%

- Job Opportunities – 44%
- Tutoring – 26%
- Mentoring **Program** – 30%
- Other: **1)**Religious counseling **2)**Education on HUD opportunities to buy homes **3)**GED programs **4)**Program to help people with backgrounds obtain employment **5)**Recreation centers for the children at all the properties.

7. Would be interested in a public housing home ownership opportunity.

- Yes – 52%
- No – 26%
- No Comment – 22%

8. Other Comments:

- Opportunity to rent to own for people with credit problems, but have no criminal history
- Have a meeting to talking openly about housing issues (i.e. fear of programs being cut, homelessness due to lack of funding, discuss what can be done as a community to help selves)
- Overall DCHA is providing a great serviced, but every company could improve in one area or another, and the housing units you provide are great.
- Be faster with housing because people really do need it
- Concerns about time it takes to answer service calls
- People living in low-income housing should only have to pay one utility (lights) because it is hard to pay all utilities
- I think the program is great and I am grateful I am a part of it.
- Units and family units should be kept up better.
- Be nice to have someone come to the house to assist with paperwork for those with learning and developmentally disabilities
- Very pleased with services
- Everything is fine
- Section 8 waitlist should be open
- Don't think buildings should have pets

### **3-III.G. PROHIBITION AGAINST DENIAL OF ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING [Pub.L. 109-162]**

The Violence Against Women Reauthorization Act of 2005 (VAWA) prohibits denial of admission to an otherwise qualified applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking. Specifically, Section 606(1) of VAWA adds the following provision to Section 8 of the U.S. Housing Act of 1937, which lists contract provisions and requirements for the housing choice voucher program:

That an applicant or participant is or has been a victim of domestic violence, dating violence, or stalking is not an appropriate reason for denial of program assistance or for denial of admission, if the applicant otherwise qualifies for assistance or admission.

#### **Definitions**

As used in VAWA:

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 cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

The term *dating violence* means violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim; and where the existence of 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

The term *stalking* means:

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

The term *immediate family member* means, with respect to a person:

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

## **Notification and Victim Documentation**

### DCHA Policy

The DCHA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under the DCHA's policies. Therefore, if the DCHA makes a determination to deny admission to an applicant family, the DCHA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking, and

One of the following:

A police or court record documenting the actual or threatened abuse, or

A statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal review (see section 16-III.D) or must request an extension in writing at that time. If the applicant so requests, the DCHA will grant an extension of 10 business days, and will postpone scheduling the applicant's informal review until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the DCHA determines the family is eligible for assistance, no informal review will be scheduled and the DCHA will proceed with admission of the applicant family.

## **Perpetrator Removal or Documentation of Rehabilitation**

### DCHA Policy

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, the DCHA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the assisted housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation. This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

### **PHA Confidentiality Requirements**

All information provided to the PHA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared database nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law.

