

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: _The Housing Authority of the City of Abbeville PHA Code: AL101 PHA Type: X Small X High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): _ 01/01/2011				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 40 Number of HCV units: N/A				
3.0	Submission Type X 5-Year and Annual Plan Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	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: To provide drug free, decent, safe, and sanitary housing for eligible families and to provide opportunities and promote self-sufficiency and economic independence for residents.				
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. Recognize residents as our ultimate customer Improve Public Housing management and service delivery efforts through effective and efficient management of HA staff Seek problem solving partnerships with residents, community, and government leadership Apply HA resources to the effective and efficient management and operations of public housing, taking into account changes in Federal funding.				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: None (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. The public may obtain copies of the 5-Year and Annual Plan at the Abbeville Housing Authority Main Office- 194 Ash Drive Abbeville, AL 36310				
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> N/A				
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. Attached				
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. Attached				
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	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>The AHA waiting list includes a diverse group of families all of whom meet the criteria of low income or very-low income families. Our properties address the needs of families from single member elderly families to families needing up to a three bedroom unit. We have identified a need for more low-income elderly housing in our jurisdiction, due to an aging local population, and very low turn-over rate, and a very high stable occupancy rate. Our current waiting list consists of 27 applications consisting of 41% Elderly/Disabled waiting for 1 or 2 bedroom units, 44% Non-Elderly/Disabled families waiting for 1 or 2 bedroom units, and only 15% waiting for 3 bedroom units.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. To aggressively maintain an updated waiting list to ensure an active list to speed occupancy of units, and to monitor any future funding opportunities for possible new construction of elderly/disabled units.</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. Abbeville Housing Authority has made progress in meeting our mission and goals by improving it’s performance status from Standard to High Performer, updating staff education and training, and ongoing community involvement.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>This agency considers changes that are a significant amendment or modification to the PLAN would be changes from the approved plan that impact over 50% of our residents. This impact could be for financials or policy implementation reasons.</p> <p>This agency considers changes that substantially deviate from the approved plan to be changes from the plan that impact over 50% of our residents. This impact could be for financial or policy implementation reasons.</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>

Part I: Summary

PHA Name: The Housing Authority of the City of Abbreville	Grant Type and Number Capital Fund Program Grant No: AI09P10150111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval:
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Obligated	Total Actual Cost ¹	
				Original	Revised ²		Expended	
1	Total non-CFFP Funds							
2	1406 Operations (may not exceed 20% of line 21) ³				30,000.00			
3	1408 Management Improvements				2,000.00			
4	1410 Administration (may not exceed 10% of line 21)				1,000.00			
5	1411 Audit				750.00			
6	1415 Liquidated Damages							
7	1430 Fees and Costs				500.00			
8	1440 Site Acquisition							
9	1450 Site Improvement				5,000.00			
10	1460 Dwelling Structures				15,275.00			
11	1465.1 Dwelling Equipment—Nonexpendable				4,000.00			
12	1470 Non-dwelling Structures							
13	1475 Non-dwelling Equipment				3,000.00			
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 CFFP Grants for operations.
⁴ RHF funds shall be included here:

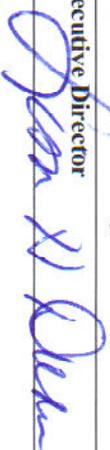
Part I: Summary

PHA Name: The Housing Authority of the City of Abbeville
 Grant Type and Number: Capital Fund Program Grant No: AL09P10150111
 Replacement Housing Factor Grant No: _____
 Date of CFFP: _____

FFY of Grant: 2011
 FFY of Grant Approval: _____

Type of Grant: Original Annual Statement Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: _____

Revised Annual Statement (revision no: _____)
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
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)	61,525.00			
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		Date		Signature of Public Housing Director	
		11/30/2010			
		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.
⁴ RHF funds shall be included here.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary						
PHA Name/Number Abbeville –AL101		Locality Abbeville, Henry County, Alabama			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
B.	Physical Improvements Subtotal	Annual Statement	24,775.00	24,775.00	44,368.00	29,492.00
C.	Management Improvements		2,000.00	2,000.00	4,000.00	4,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment		2,000.00	2,000.00	2,000.00	2,000.00
E.	Administration		1,000.00	1,000.00	1,602.00	1,602.00
F.	Other		1,750.00	1,750.00	2,750.00	2,750.00
G.	Operations		30,000.00	30,000.00	6,805.00	4,000.00
H.	Demolition					17,681.00
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		61,525.00	61,525.00	61,525.00	61,525.00
L.	Total Non-CFP Funds					
M.	Grand Total		61,525.00	61,525.00	61,525.00	61,525.00

Part I: Summary	
PHA Name: The Housing Authority of the City of Abbeville	Grant Type and Number Capital Fund Program Grant No: AL09P10150110 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2010 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 06/30/2010 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	30,000.00		00	00
3	1408 Management Improvements	2,000.00		00	00
4	1410 Administration (may not exceed 10% of line 21)	1,000.00		00	00
5	1411 Audit	750.00		00	00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	2,046.00		00	00
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00		00	00
10	1460 Dwelling Structures	13,729.00		00	00
11	1465.1 Dwelling Equipment—Nonexpendable	4,000.00		00	00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	3,000.00		00	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: The Housing Authority of the City of Abbeville		Grant Type and Number Capital Fund Program Grant No: AL09P10150110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2010 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				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	61,525.00		00	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		Date		Signature of Public Housing Director	
				Date	

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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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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the City of Abbeville					Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
1460-PHA Wide	06/2011		06/2014		
1408-PHA Wide	06/2011		06/2014		
1410-PHA Wide	06/2011		06/2014		
1411-PHA Wide	06/2011		06/2014		
1430-PHA Wide	06/2011		06/2014		
1450-AL101-01	06/2011		06/2014		
1460-AL101-01	06/2011		06/2014		
1465.1 AL101-01	06/2011		06/2014		
1475 PHA Wide	06/2011		06/2014		

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

Part I: Summary	
PHA Name: The Housing Authority of the City of Abbeville	Grant Type and Number Capital Fund Program Grant No: AL09S10150109 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2009 FFY of Grant Approval:	

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
 Performance and Evaluation Report for Period Ending: 08/11/2010 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	7,316.00	4,043.49	4,043.49	4,043.49
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00	00	00	00
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	5,000.00	5,000.00	5,000.00	5,000.00
12	1470 Non-dwelling Structures	47,842.00	64,114.51	64,114.51	64,114.51
13	1475 Non-dwelling Equipment	8,000.00	00	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: The Housing Authority of the City of Abbeville		Grant Type and Number Capital Fund Program Grant No: AL09S10150109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 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: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 08/11/2010 <input checked="" 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)	73,158.00	73,158.00	73,158.00	73,158.00	
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	5,000.00				
Signature of Executive Director		Date 08/11/2010		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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the City of Abbeville					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AL101-1430	03/2010	06/2009	03/2013	08/2010	
AL101-1465.1	03/2010	06/2009	03/2013	08/2010	
AL101-1470	03/2010	01/2010	03/2013	08/2010	

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

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
X Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	9,435.00		9,435.00	
3	1408 Management Improvements	2,000.00		2,000.00	
4	1410 Administration	500.00		500.00	
5	1411 Audit	750.00		750.00	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	2,422.00		2,422.00	2,422.00
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00		5,000.00	
10	1460 Dwelling Structures	10,000.00		10,000.00	
11	1465.1 Dwelling Equipment—Nonexpendable	1,000.00		1,000.00	
12	1470 Nondwelling Structures	25,000.00		25,000.00	
13	1475 Nondwelling Equipment	1,000.00		1,000.00	
14	1485 Demolition	5,000.00		5,000.00	
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	62,107.00		62,107.00	2,422.00
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				

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:		Federal FY of Grant: 2009
Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) X Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150109 Replacement Housing Factor Grant No:			Federal FY of Grant: 2009		
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	
AL101	Operations	1406		9,435.00		9,435.00		
AL101	Management Improv	1408		2,000.00		2,000.00		
AL101	Administration	1410		500.00		500.00		
AL101	Audit	1411		750.00		750.00		
AL101	Fees & Costs	1430		2,422.00		2,422.00	2,422.00	
AL101	Site Improvements	1450		5,000.00		5,000.00		
AL101	Dwelling Structures	1460	2	10,000.00		10,000.00		
AL101	Dwelling Equip	1465.1	2	1,000.00		1,000.00		
AL101	Non-Dwelling Struct	1470		25,000.00		25,000.00		

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1) X Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	5,000.00	8,000.00	8,000.00	6,092.00
3	1408 Management Improvements	2,000.00	1,000.00	1,000.00	00
4	1410 Administration	500.00	500.00	500.00	00
5	1411 Audit	750.00	750.00	750.00	00
6	1415 Liquidated Damages	00	00	00	
7	1430 Fees and Costs	200.00	2,000.00	2,000.00	2,000.00
8	1440 Site Acquisition	00	00	00	
9	1450 Site Improvement	20,000.00	1,546.00	1,546.00	00
10	1460 Dwelling Structures	23,583.00	4,000.00	4,000.00	00
11	1465.1 Dwelling Equipment—Nonexpendable	1,000.00	3,000.00	3,000.00	00
12	1470 Nondwelling Structures	00	35,000.00	35,000.00	
13	1475 Nondwelling Equipment	1,000.00	2,000.00	2,000.00	00
14	1485 Demolition	3,763.00	00	00	00
15	1490 Replacement Reserve	00			
16	1492 Moving to Work Demonstration	00			
17	1495.1 Relocation Costs	00			
18	1499 Development Activities	00			
19	1501 Collateralization or Debt Service	00			
20	1502 Contingency	00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	57,796.00	57,796.00	57,796.00	8,092.90
22	Amount of line 21 Related to LBP Activities	00			
23	Amount of line 21 Related to Section 504 compliance	00			
24	Amount of line 21 Related to Security – Soft Costs	00			
25	Amount of Line 21 Related to Security – Hard Costs	00			
26	Amount of line 21 Related to Energy Conservation	000			

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150108 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150108 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	
H/A WIDE	OPERATIONS	1406		5,000	8,000	8,000	6,092.90	
H/A WIDE	COMPUTER UPGRADES	1408		2,000	1,000	1,000	00	
H/A WIDE	ADMINISTRATION	1410		500	500	500	00	
H/A WIDE	AUDIT	1411		750	750	750	00	
H/A WIDE	FEES & COSTS	1430		200	2,000	2,000	2,000.00	
101-01	PAVING & ANNUAL MAINTENANCE	1450		20,000	1,546	1,546	00	
101-01	ROOFING	1460					00	

8. Capital Fund Program Five-Year Action Plan

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150108 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	
101-01	KITCHEN/BATH RETROFIT	1460	2	21,310	2,000	2,000	00	
101-01	A/C REPLACEMENTS	1460	1	2,273	2,000	2,000	00	
101-01	STOVES/REFRIGERATORS/WATER HEATERS	1465.1	2	1,000	3,000	3,000	00	
	NEW MAINTENANCE & COMMUNITY BLD	1470		00	35,000	35,000		
PHA-WIDE	MISC TOOLS	1475	1	1,000	2,000	2,000		

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program Grant No: AL09P10150107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	6,332.00		6,332.00	6332.00
3	1408 Management Improvements	4,000.00		4,000.00	395.00
4	1410 Administration	5,602.00		5,602.00	
5	1411 Audit	750.00		750.00	700.00
6	1415 Liquidated Damages	00		00	
7	1430 Fees and Costs	750.00		750.00	269.28
8	1440 Site Acquisition	00		00	
9	1450 Site Improvement	4,000.00		4,000.00	9,500.00
10	1460 Dwelling Structures	33,599.00		33,599.00	21,574.14
11	1465.1 Dwelling Equipment—Nonexpendable	2,200.00		2,200.00	4,167.85
12	1470 Nondwelling Structures	00		00	
13	1475 Nondwelling Equipment	1,800.00		1,800.00	
14	1485 Demolition	00		00	
15	1490 Replacement Reserve	00		00	
16	1492 Moving to Work Demonstration	00		00	
17	1495.1 Relocation Costs	00		00	
18	1499 Development Activities	00		00	
19	1501 Collateralization or Debt Service	00		00	
20	1502 Contingency	00		00	
21	Amount of Annual Grant: (sum of lines 2 – 20)	59,033.00		59,033.00	42,938.27
22	Amount of line 21 Related to LBP Activities	00		00	
23	Amount of line 21 Related to Section 504 compliance	00		00	
24	Amount of line 21 Related to Security – Soft Costs	00		00	
25	Amount of Line 21 Related to Security – Hard Costs	00			
26	Amount of line 21 Related to Energy Conservation	000			

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	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: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
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	
H/A WIDE	OPERATIONS	1406		6,332		6,332	6,332.00	
H/A WIDE	COMPUTER UPGRADES	1408		4,000		4,000	395.00	
H/A WIDE	ADMINISTRATION	1410		5,602		5,602		
H/A WIDE	AUDIT	1411		750		750	700.00	
H/A WIDE	FEES & COSTS	1430		750		750	269.28	
101-01	LANDSCAPING & ANNUAL MAINTENANCE	1450		4,000		4,000	9,500.00	

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: ABBEVILLE			Grant Type and Number Capital Fund Program Grant No: AL09P10150107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
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	
101-01	ROOFING	1460	3	18,310		18,310		
101-01	KITCHEN/BATH RETROFIT	1460	3	13,016		13,016	21,574.14	
101-01	A/C REPLACEMENTS	1460	3	2,273		2,273		
101-01	STOVES/REFRIGERATORS/WATER HEATERS	1465.1	4	2,200		2,200	4,167.85	
PHA-WIDE	MISC TOOLS	1475	1	1,800		1,800		

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

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: ABBEVILLE		Grant Type and Number Capital Fund Program No: AL09P10150107 Replacement Housing Factor No:					Federal FY of Grant: 2007
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406-H/A WIDE	09/2008			09/2011			
1408-H/A WIDE	09/2008			09/2011			
1410-H/A WIDE	09/2008			09/2011			
1411-H/A WIDE	09/2008			09/2011			
1430-H/A WIDE	09/2008			09/2011			
1430-101-01	09/2008			09/2011			
1450-101-01	09/2008			09/2011			
1460-101-01	09/2008			09/2011			
1465.1-101-01	09/2008			09/2011			
1475-H/A WIDE	09/2008			09/2011			

8. Capital Fund Program Five-Year Action Plan

2010
LIST OF RESIDENT ADVISORY BOARD MEMBERS

Ms. Phyllis Sherrer 106 Southdale Ct. Apt 10
Abbeville, AL 36310

Ms. Peggy Herring 101 Southdale Ct. Apt 23
Abbeville, AL 36310

Mr. Mickey Nelson 105 Girard Ct. Apt 36
Abbeville, AL 36310

Resident Advisory Board Meeting Held August 5, 2010

Two suggestions were voiced at the above meeting concerning future work items:

1. Possible demolition of old storage building at Girard Court.

2. Possible demolition of unpaved planting area containing power pole at Girard Court.

Violence Against Women Act Statement

The following notice was review and presented to the residents of the Housing Authority of the City of Abbeville, Alabama in Resident Meeting on August 31, 2010.

Residents were notified in said meeting that referrals for domestic violence will be made to:

**HOUSE OF RUTH
DOMESTIC VIOLENCE SERVICES/SEXUAL
ASSAULT SERVICES
(334) 793-5214
24-HOUR CRISIS LINE (800) 650-6522**

NOTICE TO ALL RESIDENTS OF ABBEVILLE HOUSING AUTHORITY

Please be advised that PIH 2006-23 advises all Housing Authorities to notify their clients residing within their subsidized units that under the Violence Against Women Act and Department of Justice Reauthorization Act of 2005 (VAWA) PHA's are prohibited from eviction of and removal of assistance from certain persons living in public or Section 8 assisted housing if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking, as those terms are defined in Section 3 of the United States Housing Act of 1937 as amended by VAWA. Any client who fears that their lease may be in jeopardy due to Domestic Violence, Dating Violence, or Stalking by a member of a tenant's household, any guest or other person under the tenant's control, is hereby directed to report such abuse to the Executive Director and provide either a completed HUD Form 50066, Certification of Domestic Violence, Dating Violence, or Stalking. In lieu of providing the HUD Form 50066 a tenant may provide to PHAs (1) a police record or court record, (2) documentation signed and attested to by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from whom the victim has sought assistance in addressing domestic violence.

Any relief sought from any incident which may be considered grounds for possible termination of tenancy under VAWA should be submitted within 14 business days from the offense in order to qualify for consideration.

Please see attached documentation for guidance and submission.

PIH – 2006-42

HUD-50066

Memorandum of Understanding between The Housing Authority of the City of Abbeville and the Abbeville Police Department

Whereas the Housing Authority of the City of Abbeville has been approved by the U.S. Department of Housing and Urban Development (HUD) to take one (1) bedroom unit out of rental inventory for the expressed purpose of providing housing for a Police Officer of the City of Abbeville Police Department to deter criminal activity and/or drug activity on public housing properties, and the Board of Commissioners has approved a Police Rent of zero dollars, therefore this agreement is entered into by both parties to outline specific responsibilities expected by the Abbeville Housing Authority, above and beyond the Abbeville Police Department responsibility of providing the same level of police and protective services to all residents of Abbeville, including residents located in public housing. The City of Abbeville Police Department agrees to provide the following additional services at no additional expense, in exchange for the occupancy of a public housing unit by a qualified police officer at a zero rent.

1. Assigned Officer is to have at his/her disposal a visibly marked police vehicle that will be parked on public housing property when not in routine service.
2. While on duty, assigned officer is expected to provide a minimum of (2) two per day, neighborhood watch drive-thrus in each of the two housing sites, specifically Ash Drive-Southdale Court, and Girard Court.
3. To report any emergency situations to the Maintenance Mechanic immediately.
4. To provide consultation, at the request of the Executive Director on any NCIC Background review, and attend resident meetings when requested.
5. To submit written reports to the Executive Director of contacts and activities concerning any complaints, observed lease violations, or any health or safety issues, including all incident reports responded to by any Abbeville Police Officer on Public Housing properties.

Signed this the 1st day of June, 2009_

Lisa H. Dunn- Executive Director
The Housing Authority of the City of Abbeville

Mike Jones-Chief of Police
City of Abbeville Police Department

**DWELLING LEASE BETWEEN THE HOUSING AUTHORITY AND THE CITY
OF ABBEVILLE POLICE DEPARTMENT**

I. Identification of Parties and premises:

The Housing Authority of the City of Abbeville, (called AHA) hereby enters into a lease agreement with the City of Abbeville Police Department. The apartment is located at 101 Girard Court Apt. 41, Abbeville, Alabama.

II. Special Lease Agreement

This lease agreement is designed specifically for representatives of the City of Abbeville Police Department to provide space for a police officer within Girard Court, therefore, this unit is not subject to our standard lease agreement because the public housing unit is being used to deter criminal activity and ensure the safety of public housing residents and has been removed from occupancy according to Department of Housing and Urban Development (HUD) regulations.

III. Term, Amount and due date of Rent, Security Deposit, and Other Charges:

Term: The term of the lease is one year effective June 1, 2010 and expires June 1, 2011. The lease may be renewed upon mutual agreement between the City of Abbeville Police Department and the AHA and approved by HUD.

Due Date of Rent: n/a

Security Deposit: n/a

Utilities: Representatives from the City of Abbeville Police Department will be required to pay electricity and gas. The AHA will provide water and sewage.

Other Charges: The City of Abbeville Police Department Representative will be required to reimburse the AHA for the weekly trash pickup in the amount of \$15.00 per month.

Note: The City of Abbeville Police Department is not charged rent and security deposit because their presence is providing a service to the residents of public housing, which is considered a mutual consideration in lieu of rent. (Board Approval March 14, 2007)

IV. Obligation of the City of Abbeville Police Department:

SEE ATTACHED MEMORANDUM OF UNDERSTANDING

V. Obligation of the AHA:

The AHA will provide the services necessary to maintain the apartment in a safe condition and provide the necessary repairs for normal use of the apartment. AHA staff will inspect the unit annually for compliance with HUD's Housing Quality Standards. AHA maintenance staff will only enter the unit after providing written notice, unless there is an emergency. If there is an emergency (reported fire, gas, or water leak) AHA staff will enter the unit without notice. AHA staff will also enter the unit if a work order is requested, or to perform routine preventative maintenance.

VI. Termination of the Lease:

The lease may be terminated by the Chief of Police or the AHA Executive Director after a 60 day notice has been provided by either party of the lease.

Signature – City of Abbeville Chief of Police

Date

Signature – Executive Director AHA

Date

–

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 01/01/2011, 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.

THE HOUSING AUTHORITY OF THE CITY OF ABBEVILLE AL101

PHA Name

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2011 - 2015

Annual PHA Plan for Fiscal Year 2011

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

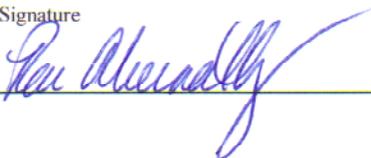
Name of Authorized Official

RON ABERNATHY

Title

CHAIRMAN

Signature



Date

OCTOBER 12, 2010

Civil Rights Certification

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

Civil Rights Certification

Annual Certification and Board Resolution

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

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

THE HOUSING AUTHORITY OF THE CITY OF ABBEVILLE

AL101

PHA Name

PHA Number/HA Code

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

Name of Authorized Official

RON ABERNATHY

Title

CHAIRMAN

Signature

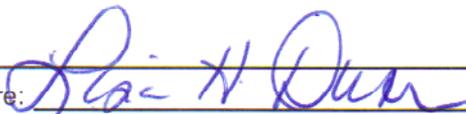


Date 10/11/2010

DISCLOSURE OF LOBBYING ACTIVITIES

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

(See reverse for public burden disclosure.)

<p>1. Type of Federal Action:</p> <p><input type="checkbox"/> a. contract <input checked="" 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</p>	<p>2. Status of Federal Action:</p> <p><input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award</p>	<p>3. Report Type:</p> <p><input type="checkbox"/> a. initial filing <input checked="" type="checkbox"/> b. material change</p> <p>For Material Change Only: year _____ quarter _____ date of last report _____</p>
<p>4. Name and Address of Reporting Entity:</p> <p><input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee</p> <p align="center">Tier _____, <i>if known:</i></p> <p>The Housing Authority of the City of Abbeville P.O. Box 515 Abbeville, AL 36310</p> <p>Congressional District, if known: 2</p>	<p>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</p> <p>Congressional District, if known:</p>	
<p>6. Federal Department/Agency:</p> <p>U.S. Department of Housing and Urban Development</p>	<p>7. Federal Program Name/Description:</p> <p>Public Housing</p> <p>CFDA Number, <i>if applicable:</i> _____</p>	
<p>8. Federal Action Number, if known:</p>	<p>9. Award Amount, if known:</p> <p>\$</p>	
<p>10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i></p> <p>NONE</p>	<p>b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i></p> <p>NONE</p>	
<p>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.</p>	<p>Signature: </p> <p>Print Name: <u>Lisa H. Dunn</u></p> <p>Title: <u>Executive Director</u></p> <p>Telephone No.: <u>(334) 585-2165</u> Date: <u>10/12/2010</u></p>	

Certification for a Drug-Free Workplace

Applicant Name

The Housing Authority of the City of Abbeville, Alabama

Program/Activity Receiving Federal Grant Funding

Capital Fund Program (CFP)

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.)

AL101 Southdale Court, Henry County, Abbeville, Alabama 36310
AL101 Girard Court, Henry County, Abbeville, Alabama 36310

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

Lisa H. Dunn

Title

Executive Director

Signature



Date

10/12/2010

Certification of Payments to Influence Federal Transactions

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

Applicant Name

The Housing Authority of the City of Abbeville, Alabama

Program/Activity Receiving Federal Grant Funding

Capital Fund Program (CFP)

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.

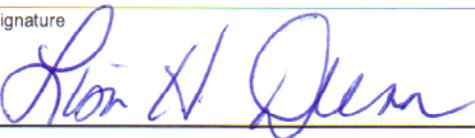
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this 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 Lisa H. Dunn	Title Executive Director
Signature 	Date (mm/dd/yyyy) 10/12/2010