

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Housing Authority of the County of Williamson</u> PHA Code: IL050 PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/01/2011</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>725</u> Number of HCV units: <u>163</u>																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia Not Applicable <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																			
		PH	HCV																								
PHA 1:																											
PHA 2:																											
PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:																										
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.																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. 1. See Section 6.0 Attachment a 2. The WCHA Plan documents are available for public review at the administrative office located at 300 Hickory St., Carterville, IL; AMP 1 office located at 417 N. 6 th St., Herrin, IL; AMP 2 office located at 507 James St., Carterville, IL; and the AMP 3 office located at 138 Parkview, Johnston City, IL. Monday through Friday between the hours of 8:00 a.m. and 4:30 p.m.																										
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> The Williamson County Housing Authority has been approached by the Illinois Coalition for the Homeless to enter into a Memorandum of Understanding whereby the WCHA would finance the construction of a ten (10) apartment complex to be utilized under the Project Based Voucher Program. This project would be consistent with the mission of the WCHA to provide affordable housing to the community; to maintain safe quality housing for our residents; to provide rental assistance and other related services; to promote self-sufficiency; to operate in a non-discriminatory, economically responsible, and professional manner; and to create and/or maintain partnerships with our residents and appropriate community agencies.																										
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. See Attachments b, c, d, and e																										
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. See Attachments f, g, and h																										

8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p> <p>Not applicable.</p>
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>See Attachment i</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.</p> <ol style="list-style-type: none"> 1. To Employ effective maintenance and management policies to minimize the number of public housing units off-line. 2. To reduce turnover time for vacated public housing units. 3. To reduce time to renovate public housing units. 4. To maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction. 5. To undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required. 6. To maintain or increase Section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration.
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The WCHA has neared completion (95%) of renovations to a 100 unit development including installation of a new sanitary sewer system; repaving of streets and parking drives; and installation of a new lift station. The WCHA has also completed installation of 360 energy efficient furnaces with ARRA funding. In addition, interior renovations and new sanitary sewers, water lines, underground electrical services, storage sheds, siding, parking and sidewalks have been completed on 12 units in Creal Springs.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>Definition of Substantial Deviation and Significant Amendment or Modification.</p> <p>The WCHA defines Substantial Deviations or Significant Amendments/ modifications as discretionary changes in the plans or policies of the of the WCHA that fundamentally change the mission, goals, objectives or plans of the agency and which require formal approval of the Board of Commissioners.</p> <p>The Housing Authority of the County of Williamson reserves the right to full fungibility in the accomplishment of its goals and objectives in the capital improvement plan. Funds from one year's plan may be utilized to accomplish any work item scheduled during the five-year plan and shall not be considered a substantial deviation. Any excess funds remaining after completion of the scheduled work items for the annual plan year may be utilized for a future year's planned work items or transferred into the operations account. This shall not be considered a substantial deviation. Capital Funds may be transferred into Operations at any time to prevent the Housing Authority from being designated as financially troubled.</p> <p>A change to rent or admission policies, additions of non-emergency items, other than transfers to operations, not included in the current Annual Statement of Five-Year Action Plan, or a change with regard to demolition, disposition, designation, homeownership programs or conversion activities shall be considered a significant amendment or modification. An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements or State laws. Such changes will not be considered significant amendments.</p>

A. VAWA COMPLIANCE

The Williamson County Housing Authority has instituted the use of the HUD form 50066, Certification of Domestic Violence, Dating Violence or Stalking; and no applicant or resident will be denied admission, if they are otherwise qualified, if they are a victim of domestic violence or stalking. The Williamson County Housing Authority's VAWA Policy is attached as **Attachment j**.

B. CARBON MONOXIDE DETECTOR COMPLIANCE

Prior to January 1, 2007, The Williamson County Housing Authority completed installation of carbon monoxide detectors in all applicable public housing units.

C. RESIDENT ADVISORY BOARD MEMBERS

Grace Aaron 211 W. Adams Herrin, IL 62948	Phyllis Denam PO Box 261 Hurst, IL 62949	Dennis Modglin 201 W. 5 th Street Johnston City, IL 62951	Marie Tucker 203 Stone Street Carterville, IL 62918
George Alexander 301 N. Hickory Apt. 201 Carterville, IL 62918	Terry Harris 301 N. 14 th Apt. 503 Herrin, IL 62948	Keith Pike 301 N. 14 th Apt. 212 Herrin, IL 62948	Billy Tweedy PO Box 344 Hurst, IL 62949
Virginia Davis PO Box 371 Hurst, IL 62949	Sue Johnson 3001 N. 14 th Apt. 402 Herrin, IL 62948	Dorothy Prather 419 N. 17 th Herrin, IL 62948	Debbie Wilson 803 W. 5 th Street Johnston City, IL 62951

RESIDENT ADVISORY BOARD COMMENTS:

1. Terry Harris: "Need to upgrade elevator and cords."
2. Keith Pike: "I agreed with the 5 Year Plan. We just need a few things done. Elevator."

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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ATTACHMENTS

- a. Section 6 Plan Elements
- b. Performance and Evaluation Report - 501-07
- c. Performance and Evaluation Report - 501-08
- d. Performance and Evaluation Report - 501-09
- e. Performance and Evaluation Report - 501-09 ARRA
- f. 2010 PHA Plan Annual Statement - 501-10
- g. 2011 PHA Five-Year Action Plan
- h. 2011 PHA Plan Annual Statement - 501-11
- i. Housing Needs
- j. VAWA Policy
- k. Challenged Elements

Attachment A

Section 6.0 -- PHA Plan Elements. (24 CFR 903.7)

Instructions:

*For each Element below that **HAS** changed since the last PHA Plan, using the HUD 50075 instructions, enter the “changed” text in column 3.*

*For each Element below that **HAS NOT** changed since the last PHA Plan, enter “No Change” in column 3.*

Housing Authority #	Housing Authority Name	Fiscal Year Begin Date
IL050	Williamson County Housing Authority	01/01/2011

	Plan Element	Column #3
1.	Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.	No Change
2.	Financial Resources.	No Change
3.	Rent Determination.	No Change
4.	Operation and Management.	No Change
5.	Grievance Procedures.	No Change
6.	Designated Housing for Elderly and Disabled Families.	No Change
7.	Community Service and Self-Sufficiency.	No Change
8.	Safety and Crime Prevention.	No Change
9.	Pets.	No Change
10.	Civil Rights Certification.	No Change
11.	Fiscal Year Audit.	No Change
12.	Asset Management.	No Change

Attachment A

Section 6.0 -- PHA Plan Elements. (24 CFR 903.7)

13.	Violence Against Women Act (VAWA).	VAWA Policy adopted October 6, 2010 attached.
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Part I: Summary		
PHA Name: The Housing Authority of the County of Williamson	Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-07 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007

Type of Grant	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)
	<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
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	100,000		100,000	100,000
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	52,000		52,000	52,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000		100,000	100,000
8	1440 Site Acquisition				
9	1450 Site Improvement	737,129		737,129	542,024.34
10	1460 Dwelling Structures	87,000		87,000	87,000
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of 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: Williamson County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-07 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2007 FFY of Grant Approval: 2007	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input 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)	1,076,129		1,076,129	881,024.34
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-07 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-2	a. Sanitary Sewers	1450	100 Units	737,129		737,129	542,024.34	In Progress
	Subtotal			737,129		737,129	542,024.34	
IL-50-16	a. Boilers	1460	22 Units	87,000		87,000	87,000	Completed
	Subtotal			87,000		87,000		
HA Wide	a. Modernization Coordinator Salary	1410		51,144.17		51,144.17	51,144.17	Completed
	Subtotal			51,144.17		51,144.17	51,144.17	
HA Wide	Accountant Salary	1410		855.38		855.38	855.38	Completed
	Subtotal			855.38		855.38	855.38	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the County of Williamson					Federal FFY of Grant: 2007
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	
IL-50-2	9/12/09	9/12/09	9/12/11		
IL-50-16	9/12/09	9/12/09	9/12/11	9/25/09	
HA Wide	9/12/09	7/31/09	9/12/11	7/31/09	

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 County of Williamson	Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 05/31/10 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	100,000		66,492.62	66,492.62
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	52,000		52,000	52,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000	50,560.01	27,439	715.56
8	1440 Site Acquisition				
9	1450 Site Improvement	225,144	257,796.99	257,796.99	-0-
10	1460 Dwelling Structures	598,430	615,217	615,217	291,044.49
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	10,000		10,000	
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	5,000		1,850.00	1,850.00
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: Williamson County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-08 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval: 2008	
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 checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 05/31/10		<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)	1,090,574		1,030,795.61	412,102.67
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-10	a. Water Lines	1450	12 Units	77,644	-0-			
	b. Sewers	1450	12 Units	72,000	-0-			
	c. Parking	1450	12 Units	50,000	69,536	69,536		
	d. Sidewalks	1450	12 Units	25,500	-0-			
	e. Plumbing	1460	12 Units	60,000		60,000	29,000	
	f. Electrical	1460	12 Units	60,000		60,000	33,000	
	g. Bathrooms	1460	12 Units	77,370		77,370	29,000	
	h. Kitchens	1460	12 Units	75,070		75,070	29,000	In Progress
	i. Interior Doors	1460	12 Units	45,399	62,186	62,186	36,103.37	
	j. Exterior Storage	1460	12 Units	71,200	-0-			
	k. Drywall/Insulation	1460	12 Units	75,000		75,000	31,482.91	
	l. Asbestos Abatement	1460	12 Units	71,391	142,591	142,591	83,046.15	
	m. Floor Tile	1460	12 Units	63,000		63,000	20,412.06	
	o. Relocation	1495	12 Units	5,000		1,850	1,850	
	Subtotal			828,574	689,753			

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-21	a. Windows	1460	1 Comm.	9,000		9,000		
	b. Doors		Building	1,000		1,000		In Progress
	Subtotal			10,000		10,00		
IL-50-2	a. Sanitary Sewers	1450	100 Units	-0-	188,260.99	188,260.99		In Progress
	Subtotal			-0-	188,260.99	188,260.99		
HA Wide	a. Operations	1406		100,000		66,492.62	66,492.62	In Progress
	Subtotal			100,000		66,492.62	66,492.62	
HA Wide	a. Modernization Coordinator Salary	1410		52,000		52,000	52,000	Completed
	Subtotal			52,000		52,000	52,000	
Fees & Costs	a. A/E for IL-50-10 and IL-50-21	1430		100,000	50,560.01	27,439	715.56	In Progress
	Subtotal			100,000	50,560.01	27,439	715.56	
	Grand Total			1,090,574				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the County of Williamson					Federal FFY of Grant: 2008
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	
IL-50-10	6/12/10		6/12/12		
IL-50-21	6/12/10		6/12/12		
HA Wide	6/12/10		6/12/12		

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 County of Williamson	Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-09 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Final Performance and Evaluation Report
 Performance and Evaluation Report for Period Ending: 05/31/10

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	100,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	52,000	57,000	57,000	23,750
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	204,535			
10	1460 Dwelling Structures	628,430	623,430		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	3,000			
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: Williamson County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-09 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 05/31/10		<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)	1,087,965		57,000	23,500
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				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-10	a. Water Lines	1450	12 Units	67,644				
	b. Sewers	1450	12 Units	61,391				
	c. Parking	1450	12 Units	50,000				
	d. Sidewalks	1450	12 Units	25,500				
	e. Plumbing	1460	12 Units	60,000	55,000			
	f. Electrical	1460	12 Units	60,000				
	g. Bathrooms	1460	12 Units	77,370				
	h. Kitchens	1460	12 Units	75,070				Not Started
	i. Interior Doors	1460	12 Units	45,399				
	j. Exterior Storage	1460	12 Units	71,200				
	k. Drywall/Insulation	1460	12 Units	75,000				
	l. Asbestos Abatement	1460	12 Units	71,391				
	m. Floor Tile	1460	12 Units	63,000				
	o. Siding	1460	12 Units	30,000				
	p. Relocation	1495	12 Units	3,000				
	Subtotal			835,965	830,965			

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary		
PHA Name: The Housing Authority of the County of Williamson	Grant Type and Number Capital Fund Program Grant No: IL06-S050-501-09 (ARRA) Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 2009

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 05/31/10 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	210,901		210,901	115,599.80
8	1440 Site Acquisition				
9	1450 Site Improvement	299,099		299,099	-0-
10	1460 Dwelling Structures	870,451		870,451	191,142.16
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

³ PHAs with under 250 units in management may use 100% of 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: Williamson County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06-S050-501-09 (ARRA) Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 05/31/10		<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)	1,380,451		1,380,451	306,741.96	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature of Executive Director			Date		Signature of Public Housing Director	
					Date	

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-S050-501-09 (ARRA) CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-2	a. Gas Furnaces	1460	100 Units	201,000		201,000	2,700	In Progress
IL-50-11	a. Gas Furnaces	1460	22 Units	41,800		41,800	2,700	In Progress
IL-50-12	a. Gas Furnaces	1460	70 Units	133,000		133,000	2,700	In Progress
IL-50-19	a. Gas Furnaces	1460	24 Units	45,600		45,600	2,700	In Progress
IL-50-20	a. Gas Furnaces	1460	24 Units	45,600		45,600	11,000.28	In Progress
IL-50-21	a. Gas Furnaces	1460	30 Units	57,000		57,000	57,000	Completed
IL-50-22	a. Gas Furnaces	1460	30 Units	57,000		57,000	57,000	Completed
IL-50-23	a. Gas Furnaces	1460	30 Units	57,000		57,000	2,700	In Progress
IL-50-24	a. Gas Furnaces	1460	30 Units	57,000		57,000	3,345.98	In Progress

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-S050-501-09 (ARRA) CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-10	a. Water Lines	1450	12 Units	90,000		90,000	-0-	
	b. Sanitary Sewers	1450	12 Units	95,000		95,000	-0-	
	c. Parking	1450	12 Units	70,099		70,099	-0-	
	d. Sidewalks	1450	12 Units	44,000		44,000	-0-	In Progress
	e. Electrical	1460	12 Units	40,000		40,000	-0-	
	f. Exterior Storage	1460	12 Units	24,000		24,000	-0-	
	g. Siding	1460	12 Units	36,451		36,451	-0-	
	Subtotal			399,550				
IL-50-16	a. Roofing	1460	30 Units	75,000		75,000	49,295.90	In Progress
Fees and Costs	a. A/E for 50-2, 50-10, 50-11, 50-12 50-16, 50-19, 50-20, 50-21, 50-22 50-23, 50-24	1430		210,901		210,901	115,599.80	In Progress
	Grand Total			1,380,451				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the County of Williamson					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	
IL-50-2	3/17/10	3/17/10	3/17/12		
IL-50-10	3/17/10	3/17/10	3/17/12		
IL-50-11	3/17/10	3/17/10	3/17/12		
IL-50-12	3/17/10	3/17/10	3/17/12		
IL-50-16	3/17/10	3/17/10	3/17/12		
IL-50-19	3/17/10	3/17/10	3/17/12		
IL-50-20	3/17/10	3/17/10	3/17/12		
IL-50-21	3/17/10	3/17/10	3/17/12		
IL-50-22	3/17/10	3/17/10	3/17/12		
IL-50-23	3/17/10	3/17/10	3/17/12		
IL-50-24	3/17/10	3/17/10	3/17/12		
HA Wide	3/17/10	3/17/10	3/17/12		

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 County of Williamson	Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-10 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:
 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	100,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	57,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	24,087			
10	1460 Dwelling Structures	805,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

Part I: Summary					
PHA Name: Williamson County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-10 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
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)	1,086,087			
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 07/07/10		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.

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⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson			Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-10 CFFP (Yes/ No): No Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-12	a. Electrical	1460	24 Units	120,000				
IL-50-13	a. Electrical	1460	14 Units	70,000				
IL-50-15	a. Windows	1460	63 Units	20,000				
IL-50-18	a. Emergency Generator	1460	24 Units	55,000				
IL-50-19	a. Windows	1460	24 Units	120,000				
IL-50-20	a. Windows	1460	24 Units	120,000				
IL-50-21	a. Parking	1450	30 Units	24,087				
IL-50-23	a. Windows	1460	30 Units	150,000				
IL-50-24	a. Windows	1460	30 Units	150,000				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the County of Williamson				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	
IL-50-12	7/15/12		7/15/14		
IL-50-13	7/15/12		7/15/14		
IL-50-15	7/15/12		7/15/14		
IL-50-18	7/15/12		7/15/14		
IL-50-19	7/15/12		7/15/14		
IL-50-20	7/15/12		7/15/14		
IL-50-21	7/15/12		7/15/14		
IL-50-23	7/15/12		7/15/14		
IL-50-24	7/15/12		7/15/14		
HA Wide	7/15/12		7/15/14		

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.

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 Williamson County P050		Carterville, Williamson, Illinois			<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	830,965	830,965	830,965	830,965
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		57,000	57,000	57,000	57,000
F.	Other		100,000	100,000	100,000	100,000
G.	Operations		100,000	100,000	100,000	100,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		1,087,965	1,087,965	1,087,965	1,087,965
L.	Total Non-CFP Funds					
M.	Grand Total		1,087,965	1,087,965	1,087,965	1,087,965

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 (Continuation)						
PHA Name/Number Williamson County P050		Carterville, Williamson, Illinois			<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____
		Annual Statement				
	IL-50-2					
	IL-50-5		165,000			
	IL-50-6		384,000			
	IL-50-9		91,200			
	IL-50-11		190,765			
	IL-50-12			660,000		800,965
	IL-50-13			170,965	632,965	
	IL-50-15					20,000
	IL-50-16				198,000	
	HA Office					10,000

Part I: Summary		
PHA Name: The Housing Authority of the County of Williamson	Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval:

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 ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	100,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	57,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	100,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	830,965			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

Part I: Summary						
PHA Name: Williamson County Housing Authority		Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-11 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
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)	1,087,965				
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.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: The Housing Authority of the County of Williamson		Grant Type and Number Capital Fund Program Grant No: IL06-P050-501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
IL-50-2	a. Electrical	1460	100 Units	450,000				
	Subtotal			450,000				
IL-50-12	a. Electrical	1460	75 Units	380,965				
	Subtotal			380,965				
HA Wide	a. Operations	1406		100,000				
	Subtotal			100,000				
HA Wide	a. Modernization Coordinator Salary	1410		57,000				
	Subtotal			57,000				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: The Housing Authority of the County of Williamson					Federal FFY of Grant: 2011
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	
IL-50-2	9/14/13		9/14/15		
IL-50-12	9/14/13		9/14/15		
HA Wide	9/14/13		9/14/15		

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.

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income <30% of AMI	1859	5	5	3	1	2	4
Income >30% but <=50% of AMI	1024	5	5	4	1	2	4
Income >50% but <80% of AMI	1125	5	5	4	1	2	4
Elderly	1186	5	5	4	4	1	4
Families with Disabilities	n/a	5	5	4	5	2	4
African American	135	5	5	4	1	2	4
Hispanic	48	5	5	4	1	2	4
Race/Ethnicity							
Race/Ethnicity							

Housing Needs of Families on the Waiting List Public Housing			
	Number of families	Percentage of total families	Annual Turnover
Waiting list total	431		195
Extremely low income <30% AMI	399	92.6%	
Very low income 30% but <50% AMI	19	04.4%	
Low income >50% but <80% AMI	13	03.0%	
Families with children	259	11.0%	
Elderly families	252	22.0%	
Families with Disabilities	184	02.0%	
Caucasian	368	85.3%	
African American	55	12.8%	
Multiracial	8	01.9%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	271	62.9%	
2 BR	86	20.0%	
3 BR	58	13.4%	
4 BR	16	03.7%	

Housing Needs of Families on the Waiting List Section 8 Tenant Based Assistance			
	Number of families	Percentage of total families	Annual Turnover
Waiting list total	148		23
Extremely low income <30% AMI	112	75.7%	
Very low income >30% but <50% AMI	25	16.8%	
Low income >50% but <80% AMI	11	07.5%	
Families with children	141	95.0%	
Elderly families	8	05.0%	
Families with Disabilities	35	23.0%	
Caucasian	108	72.0%	
African American	38	25.0%	
Multiracial	3	02.0%	

WILLIAMSON COUNTY HOUSING AUTHORITY

VAWA POLICY Violence Against Women Act

I. Purpose and Applicability

The purpose of this policy (herein called "Policy") is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and more generally to set forth the Williamson County Housing Authority's (WCHA) policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by the WCHA of all federally subsidized Public Housing and Section 8 Housing Choice Voucher Program under the United States Housing Act of 1937 (42 U.S.C. §1437 et seq.). Notwithstanding its title, this policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

II. Goals and Objectives

This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Insuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by the WCHA;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between the WCHA, law enforcement authorities, victim service providers, and others to promote the safety and well-being of victims of actual and threatened domestic violence, dating violence and stalking, who are assisted by the WCHA; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by the WCHA.

III. Other Williamson County Housing Authority Policies and Procedures

This Policy shall be referenced in and attached to the WCHA's Five-Year Public Housing Agency Plan. The WCHA's annual public housing agency plan shall also contain information concerning the WCHA's, services or programs relating to domestic violence, dating violence, and stalking.

To the extent any provision of this policy shall vary or contradict any previously adopted policy or procedure of the WCHA, the provisions of this Policy shall prevail.

IV. Definitions

As used in this Policy:

- A. **Domestic Violence** – The term 'domestic violence' includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family

violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction."

- B. **Dating Violence** – means: violence committed by a person:
- a. who is or has been in a social relationship of a romantic or intimate nature with the victim; and
 - b. where the existence of such a relationship shall be determined based on a consideration of the following factors:
 1. The length of the relationship.
 2. The type of relationship.
 3. The frequency of interaction between the persons involved in the relationship.
- C. **Stalking** – means:
- a. to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and (b) to place under surveillance with the intent to kill, injure, harass or intimidate another person; and
 - b. 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 the spouse or intimate partner of that person;
- D. **Immediate Family Member** - means, with respect to a person:
- a. a spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in loco parentis; or
 - b. any other person living in the household of that person and related to that person by blood or marriage.
- E. **Perpetrator** – means person who commits an act of domestic violence, dating violence or stalking against a victim.

V. **Admissions and Screening**

- A. **Non-Denial of Assistance.** The WCHA will not deny admission to public housing or to the Section 8 rental assistance program to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided such person is otherwise qualified for such admission.
- B. **Mitigation of Disqualifying Information.** When so requested in writing by an applicant for assistance whose history includes incidents in which the applicant was a victim of domestic violence, the WCHA, may, but shall not be obligated to, take such information into account in mitigation of potentially disqualifying information, such as poor credit history or previous damage to a dwelling. If requested by an applicant to take such mitigating information into account, the WCHA shall be entitled to conduct such inquiries as are reasonably necessary to verify the claimed history of domestic violence and its probable relevance to the potentially disqualifying information. The WCHA will not disregard or mitigate potentially disqualifying information if the applicant household includes a perpetrator of a previous incident or incidents of domestic violence.

VI. Termination of Tenancy or Assistance

- A. **VAWA Protections.** Under VAWA, public housing residents and persons assisted under the Section 8 Housing Choice Voucher program have the following specific protections, which will be observed by the WCHA:
- a. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to a “serious or repeated” violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of or assistance to the victim of that violence.
 - b. In addition to the foregoing, tenancy or assistance will not be terminated by the WCHA as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant’s control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance described in this paragraph is subject to the following limitations:
 1. Nothing contained in this paragraph shall limit any otherwise available authority of the WCHA or a Section 8 owner or manager to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant’s household. However, in taking any such action, neither the WCHA nor a Section 8 manager or owner may apply a more demanding standard to the victim of domestic violence dating violence or stalking than that applied to other tenants.
 2. Nothing contained in this paragraph shall be construed to limit the authority of the WCHA or a Section 8 owner or manager to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or the WCHA, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance.
- B. **Removal of Perpetrator.** Further, notwithstanding anything in paragraph VI.A.2. or Federal, State or local law to the contrary, the WCHA or a Section 8 owner or manager, as the case may be, may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to a lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the tenant or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by the WCHA. Leases used for all public housing operated by the WCHA and, at the option of Section 8 owners or managers, leases for dwelling units occupied by families assisted with Section 8 rental assistance administered by the WCHA, shall contain provisions setting forth the substance of this paragraph.

VII. Verification of Domestic Violence, Dating Violence or Stalking

- A. **Requirement for Verification.** The law allows, but does not require, the WCHA or a Section 8 owner or manager to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets

the requirements of the applicable definitions set forth in this policy. Subject only to waiver as provided in paragraph VII. C., the WCHA shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the WCHA. Section 8 owners or managers receiving rental assistance administered by the WCHA may elect to require verification, or not to require it as permitted under applicable law.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

- a. **HUD-approved form** - by providing to the WCHA or to the requesting Section 8 owner or manager a written certification, on a form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.
 - b. **Other documentation** - by providing to the WCHA or to the requesting Section 8 owner or manager documentation signed 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 the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The professional providing the documentation must sign and attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse meeting the requirements of the applicable definition(s) set forth in this policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the documentation must also sign and attest to the documentation under penalty of perjury.
 - c. **Police or court record** – by providing to the WCHA or to the requesting Section 8 owner or manager a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.
- B. **Time allowed to provide verification/ failure to provide.** An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by the WCHA, or a Section 8 owner or manager to provide verification, must provide such verification within 10 business days (i.e., 14 calendar days, excluding Saturdays, Sundays, and federally-recognized holidays) after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action.
- C. **Waiver of verification requirement.** The Executive Director of the WCHA, or a Section 8 owner or manager, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this policy based on the victim's statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director, owner or manager. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

VIII. Confidentiality

- A. **Right of confidentiality.** All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to the WCHA or to a Section 8 owner or manager in connection with a verification required under section VII of this policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving

party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:

- a. requested or consented to by the individual in writing, or
- b. required for use in a public housing eviction proceeding or in connection with termination of Section 8 assistance, as permitted in VAWA, or
- c. otherwise required by applicable law.

IX. Court Orders

- A. **Court orders.** It is the WCHA's policy to honor orders entered by courts of competent jurisdiction affecting individuals assisted by the WCHA and their property. This includes cooperating with law enforcement authorities to enforce civil protection orders issued for the protection of victims and addressing the distribution of personal property among household members in cases where a family breaks up.

X. Relationships with Service Providers

It is the policy of the WCHA to cooperate with organizations and entities, both private and governmental, which provide shelter and/or services to victims of domestic violence. If the WCHA staff becomes aware that an individual assisted by the WCHA is a victim of domestic violence, dating violence or stalking, the WCHA will refer the victim to such providers of shelter or services as appropriate. Notwithstanding the foregoing, this Policy does not create any legal obligation requiring the WCHA either to maintain a relationship with any particular provider of shelter or services to victims of domestic violence or to make a referral in any particular case.

XI. Notification

The WCHA shall provide written notification to applicants, tenants, and Section 8 owners and managers, concerning the rights and obligations created under VAWA relating to confidentiality, denial of assistance and, termination of tenancy or assistance.

XII. Relationship with Other Applicable Laws

Neither VAWA nor this Policy implementing it shall preempt or supersede any provision of Federal, State or local law that provides greater protection than that provided under VAWA for victims of domestic violence, dating violence or stalking.

XIII. Amendment

This policy may be amended from time to time by the WCHA as approved by the WCHA Board of Commissioners.

Williamson County Housing Authority
IL050

2011 5-Year Plan

Attachment k

Section 11(g)

Challenged Elements.

The Williamson County Housing Authority had no challenged elements to its 2011 5-Year Plan.

A handwritten signature in blue ink, appearing to read "Mark A. [unclear]", is written over a horizontal line.

Executive Director