

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Basile Housing Authority</u> PHA Code: <u>LA058</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 01/2011					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>22</u> Number of HCV units: <u>0</u>					
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) <b>N/A</b>					
	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:					
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:					
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.					
<b>6.0</b>	<b>PHA Plan Update</b>  (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <u>5-year plan</u> (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Basile Housing Authority, Administrative Offices Second Street Basile, LA 70515					
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i> <b>N/A</b>					

8.0	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.
8.1	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. <b>See attachment.</b>
8.2	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. <b>See attachment.</b>
8.3	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. <b>N/A</b>
9.0	<b>Housing Needs.</b> 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. <b>See Attachment</b>
9.1	<b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b>  <b>Maintain units so as to provide affordable safe, secure, and sanitary housing.</b>

<b>10.0</b>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <ol style="list-style-type: none"> <li>(1) Modernization: With 2009 capital funds will complete installation of central air and heat in 22 units.            Improve security in 22 units by installing new entrance locks and deadbolts and exterior lighting.            Improved energy conservation by installing weatherstripping on exterior doors.</li> <li>(2) Worked with nearby campuses of Louisiana Technical College and LSU-Eunice campus to educate students in educational opportunities that can lead to economic self- sufficiency of tenants.</li> <li>(3) Assist tenants in homeownership</li> <li>(4) Work with local police department.</li> </ol> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>Substantial Deviation from the 5-Year Plan:</b></p> <ul style="list-style-type: none"> <li>• Change in a CFP budget of greater than \$45,000.</li> <li>• 50% deletion from or addition to the goals and objectives as a whole</li> <li>• 50% or more decrease in the quantifiable measurement of an individual goal or objective</li> </ul> <p><b>Significant Amendment or Modification to the Annual Plan:</b></p> <ul style="list-style-type: none"> <li>• Reallocation of CFP funds of greater than 50% of the total budget among budget line items (development account numbers)</li> <li>• 50% variance in the funds projected in the CFP Annual Statement</li> <li>• Any increase or decrease over 50% in the funds projected in the CFP Annual Statement</li> <li>• Any submission to HUD that requires a separate notification to residents such as Hope VI, Public Housing Conversion, Demolition/Disposition, Designate Housing or Homeownership Programs</li> <li>• Any change inconsistent with the local, approved Consolidated Plan.</li> </ul>
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<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ol style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.(This narrative is included in the original submittal under the names of RAB members.)</li> <li>(g) Challenged Elements:</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ol>
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## 6.0 PHA PLAN ELEMENTS

1. The PHA maintains on file available to the public all policies including the following as required:
  1. Admissions and Continued Occupancy Policies (ACOP)
  2. Grievance Policy
  3. Income Integrity Policy
  4. Community Service Policy
  5. Ban/Debarred Non-resident Policy
  6. Pet Policy
  7. Sexual Harassment Policy
  8. Non-discrimination/Fair Housing Compliance
  9. Financial Reporting
    - a. Budgets, Revisions, and Financial Reporting Policy
    - b. Preparation of annual financial statements
  10. Capitalization Policy
  11. Disposition Policy
  12. Records Retention and Disposition Policies
  13. Disbursement Policy
  14. Inventory Policy
  15. Investment Policy
  16. Procurement Policy
  17. Equal Employment Policy
  18. Personnel Policy with Payroll and Attendance Policy
  19. Code of Ethics
  20. Drug/Substance Abuse Policy with Drug-Free Workplace Form
  21. Communications Policy (Telephone, Cell, Internet)
  22. Travel Policy
  23. Vehicle Policy (PHA Owned)
  24. Credit Card Policy
  25. Confidentiality of Client Information Policy
  26. Violence Against Women Policy
  27. Maintenance Plan

## 2. Statement of Financial Resources (Estimated)

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2011nts)</b>		
a) Public Housing Operating Fund	\$ 80,000.00	
b) Public Housing Capital Fund	35,000.00	
c) HOPE VI Revitalization	0.00	
d) HOPE VI Demolition	0.00	
e) Annual Contributions for Section 8 Tenant-Based Assistance	N/A	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0.00	
g) Resident Opportunity and Self- Sufficiency Grants	0.00	
h) Community Development Block Grant	0.00	
i) HOME	0.00	
Other Federal Grants (list below)	0.00	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
2009 CFP	34,035.00	Capital Improvements
2010CFP	33,921.00	Capital Improvements
<b>3. Public Housing Dwelling Rental Income</b>	<b>53,000.00</b>	Operations
<b>4. Other income (list below)</b>		
Interest	350.00	Operations
Other miscellaneous	1,300.00	Operations
<b>4. Non-federal sources (list below)</b>		
<b>Total resources</b>	<b>237,606.00</b>	

3. **Rent Determination:** Policies of the PHA previously listed govern rents charged.
4. **Operation and Management:** The PHA has adopted and follows a comprehensive Maintenance Plan.
5. **Grievance Procedures:** The PHA has adopted and adheres to a Grievance Policy.
6. **Designated Housing for Elderly and Disabled Families:** None specifically designated
7. **Community Service and Self-Sufficiency:** The PHA has adopted and adheres to a Community Service Policy.
8. **Safety and Crime Prevention:** The PHA works closely with the local police department who provide frequent patrols of the PHA developments. The PHA has adopted several policies for crime prevention (see list of policies).
9. **Pets:** The PHA has adopted a Pet Policy which it enforces.
10. **Civil Rights Certification:** A Civil Rights Certification is mailed to local office. The PHA operates on a non-discrimination policy. The PHA Plan is consistent with the Consolidated Plan of Louisiana.
11. **Fiscal Year Audit:** A copy was forwarded to the local field office.
12. Statement on Violence Women Act is attached.

**7.0 NOT APPLICABLE**

**8.0 Capital Improvements:**

- 8.1: (a) The PHA has completed and attached the initial budget for the 2010 Capital Fund Program.**
- 8.1: (b) A performance and evaluation report for each open capital fund grant is attached.**
- 8.2: Capital Fund Program Five-year Action Plan is submitted as an attachment.**
- 8.3: Not applicable**

## 9.0 Housing Needs of Families in the Jurisdiction/s Served by the PHA

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	23	N/A	N/A	N/A	N/A	N/A	N/A
Income >30% but <=50% of AMI	14	N/A	N/A	N/A	N/A	N/A	N/A
Income >50% but <80% of AMI	7	N/A	N/A	N/A	N/A	N/A	N/A
Elderly	10	N/A	N/A	N/A	N/A	N/A	N/A
Families with Disabilities	6	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity Caucasian	18	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity Black American	8	N/A	N/A	N/A	N/A	N/A	N/A
Hispanic	2	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity							

Sources of information:

Consolidated Plan of the Jurisdiction/s: 2009

### Housing Needs of Families on the Waiting List

Waiting list type: (select one)

- Section 8 tenant-based assistance  
 Public Housing  
 Combined Section 8 and Public Housing  
 Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	21		7
Extremely low income <=30% AMI	0	0%	
Very low income (>30% but <=50% AMI)	12	57%	
Low income (>50% but <80% AMI)	9	43%	
Families with children	14	67%	
Elderly families	5	24%	
Families with Disabilities	4	19%	
Race/ethnicity	6	28%	
Black American			
Race/ethnicity	14	67%	
Caucasian			
Hispanic	1	5%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	7	33%	1
2 BR	8	38%	3
3BR	6	29%	2

**11.0: THE FOLLOWING ARE BEING MAILED TO THE HUD NEW ORLEANS OFFICE:**

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
- (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)

## **11.F: ATTACHMENT**

### **1. LIST OF RESIDENT ADVISORY BOARD MEMBERS:**

Anna Manuel  
1517 Ford Street, Apt. 12  
Basile, LA 70515

Brenda Ceasar  
1118 Belton Street, Apt 19  
Basile, LA 70515

### **2. RESIDENT ADVISORY BOARD COMMENTS ON PLANS:**

- (1) The work planned is badly needed. All units need to have central air and heat.
- (2) Roofs are bad and need to be replaced. Repairs made are temporary fixes.
- (3) The inside of units need to be completely modernized: remove plywood walls, install insulation, and replace with sheetrock walls. Insulation is also needed in the attics. This would save on utility bills.

### **3. PHA RESPONSE:**

- (1) With the completion of the 2009 capital fund program, all units should have central air and heat.
- (2) After this, the PHA plans to replace all the roofs.
- (3) Then the PHA will begin working on the interior of the units and installing insulation in walls and ceilings as funds permit. This will take several years as capital funds are very limited.

### **11.G. CHALLENGED ELEMENTS: There were no challenged elements.**

**ATTACHMENT:  
RESIDENT ON BOARD OF COMMISSIONERS**

Marjorie Rougeau  
1528 Ardoin Street  
Basile, LA 70515

Term of Office: 6/30/2010—6/30/2015

**THE ATTACHED STATEMENT DESCRIBES THE BASILE HOUSING AUTHORITY'S VAWA GOALS AND OBJECTIVES. THIS STATEMENT IS POSTED ON THE BULLETIN BOARD IN THE PHA OFFICE AND IS GIVEN TO EACH TENANT WHEN APPROVED FOR OCCUPANCY AND DURING RE-EXAMINATIONS:**

**BASILE HOUSING AUTHORITY**  
**STATEMENT ON VIOLENCE AGAINST WOMEN ACT**

**GOALS OF THE BASILE HOUSING AUTHORITY**

The goals/objectives of the Basile Housing Authority are:

- To encourage prevention of all forms of violence against women who are residents and/or who are employees of the housing authority. and
- To support or assist victims (residents and employees) of violence including domestic violence, dating violence, sexual assault, or stalking.

**DOMESTIC VIOLENCE**

The Office on Violence Against Women (OVW) helps women who are victims of domestic violence. Like the OVW, the goals of the Basile Housing Authority are to encourage prevention and facilitate a greater public dialogue.

**SEXUAL ASSAULT**

According to the VAWA, sexual assault can be defined as any type of sexual contact or behavior that occurs without the explicit consent of the recipient. Falling under the definition of sexual assault is sexual activity such as forced sexual intercourse, sodomy, child molestation, incest, fondling, and attempted rape. Some more specific examples of sexual assault include:

- Unwanted vaginal, anal, or oral penetration with any object
- Forcing an individual to perform or receive oral sex
- Forcing an individual to masturbate, or to masturbate someone else
- Forcing an individual to look at sexually explicit material or forcing an individual to pose for sexually explicit pictures
- Touching, fondling, kissing, and any other unwanted sexual contact with an individual's body
- Exposure and/or flashing of sexual body parts

In general, state law assumes that a person does not consent to sexual activity if he or she is forced, threatened, unconscious, drugged, a minor, developmentally disabled, chronically mentally ill, or believe they are undergoing a medical procedure.

Perpetrators of sexual assault can be strangers, friends, acquaintances, or family members. Often, perpetrators commit sexual assault by way of violence, threats, coercion, manipulation, pressure, or tricks. In extreme cases, sexual assault may involve the use of force which may include, but is not limited to:

- Physical violence
- Use or display of a weapon
- Immobilization of victim

More often, however, sexual assault involves psychological coercion and taking advantage of an individual who is incapacitated or under duress and, therefore, is incapable of making a decision on his or her own.

Source: Rape, Abuse, and Incest National Network (RAINN)

## **STALKING**

According to the Louisiana Revised Statutes § 14:40.2 Stalking as amended 2005, Stalking is the intentional and repeated following or harassing of another person that would cause a reasonable person to feel alarmed or to suffer emotional distress. Stalking shall include but not be limited to the intentional and repeated uninvited presence of the perpetrator at another person's home, workplace, school, or any place

which would cause a reasonable person to be alarmed, or to suffer emotional distress as a result of verbal or behaviorally implied threats of death, bodily injury, sexual assault, kidnapping, or any other statutory criminal act to himself or any member of his family or any person with whom he is acquainted.

According to Louisiana Revised Statutes § 14:40.3 Cyberstalking. 2001, cyberstalking is the action of any person to accomplish any of the following:

- (1) Use in electronic mail or electronic communication of any words or language threatening to inflict bodily harm to any person or to such person's child, sibling, spouse, or dependent, or physical injury to the property of any person, or for the purpose of extorting money or other things of value from any person.
- (2) Electronically mail or electronically communicate to another repeatedly, whether or not conversation ensues, for the purpose of threatening, terrifying, or harassing any person.
- (3) Electronically mail or electronically communicate to another and to knowingly make any false statement concerning death, injury, illness, disfigurement, indecent conduct, or criminal conduct of the person electronically mailed or of any member of the person's family or household with the intent to threaten, terrify, or harass.
- (4) Knowingly permit an electronic communication device under the person's control to be used for the taking of an action in Paragraph (1), (2), or (3) of this Subsection.

## **PROGRAMS OF THE HOUSING AUTHORITY**

In order to inform residents of the Housing Authority of their rights and assistance available to them for violence against women, the Housing Authority will do the following:

- Provide women are victims of violence with names, phone numbers, and/or website addresses of agencies that can provide assistance,
- Recognize [National Domestic Violence Awareness Month](#)
- Maintain poster in office during VAWA month,
- Have available for women copies of the Louisiana Revised Statute of 2005 addressing forms of violence against women,

- Post in front office the names, phone numbers, and/or website addresses of agencies that can provide assistance; and
- Make available Internet service to women who were or may be victims of violence to learn more about violence against women and to be able to contact agencies for advice or assistance via the Internet.

## **ASSISTANCE RESOURCES**

National Center for Victims of Crime, Stalking Resource Center  
For Victim Assistance:

Call 1-800-FYI-CALL, M-F 8:30 AM - 8:30 PM EST, or  
E-mail [gethelp@ncvc.org](mailto:gethelp@ncvc.org) .

Office of Violence Against Women, U. S. Department of Justice

Call: 1-800-799-SAFE  
TTY: 1-800-787-3224  
E-mail: [www.enditnow.gov](http://www.enditnow.gov)

Rape, Abuse, and Incest National Network

Call: 1-800-656-HOPE (1-800-656-4673)

Louisiana Coalition Against Domestic Violence

P.O. Box 77308

Baton Rouge, LA 70879

(225) 752-1296 Fax: (225) 751-8927

Website: [www.lcadv.org](http://www.lcadv.org)

Evangeline Parish Sheriff's Office

Call: 337-363-2191

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**

<b>PHA Name:</b>  <b>BASILE HOUSING AUTHORITY</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48S-058-501-09 Replacement Housing Factor Grant No:	<b>Federal FY of Grant: 2009 ARRA</b>
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Original Annual Statement  
 Reserve for Disasters/ Emergencies  
 Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: 6/30/10  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	11,000.00	9,000.00	9,000.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	32,308.00	32,308.00	32,308.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable		2,000.00	2,000.00	0.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	43,308.00		0.00	0.00
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 Conservn 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: BASILE HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA 48S058-501-09 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2009 ARRA</b>			
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	
<b>LA 58-1</b>	<b>FEES AND COSTS</b>	1430		<b>11,000.00</b>	<b>9,000.00</b>	9,000.00	0.00	
	Retain A/E to prepare plans, specifications, and bid documents \$6000					6,000.00		
	Retain services of a modernization coordinator \$3,000					3,000.00		
	Physical needs assessment \$2,000							
<b>LA 58-1</b>	<b>DWELLING STRUCTURES</b>	1460		<b>32,308.00</b>	<b>32,308.00</b>	32,308.00	0.00	
	Install central air and heat in dwelling units, remove old wall heaters, repair space, and repair and paint damaged ceilings		4					
<b>LA 58-1</b>	<b>DWELLING EQUIPMENT--</b>	1465.1						
	<b>NON-EXPENDABLE</b>				2,000.00	2,000.00	0.00	
	Purchase 3 stoves 7 refrigerators							



<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b>  <b>BASILE HOUSING AUTHORITY</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P-058-501-09 Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2009</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	11,000.00	7,000.00	0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	32,308.00	27,035.00	0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
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21	Amount of Annual Grant: (sum of lines 2 – 20)	43,308.00	34,035.00	0.00	0.00
22	Amount of line 21 Related to LBP Activities				
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**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  
 Part II: Supporting Pages**

PHA Name: BASILE HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA 48P058-501-09 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2009</b>			
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	
<b>LA 58-1</b>	<b>FEES AND COSTS:</b>			<b>11,000.00</b>	<b>7,000.00</b>	0.00	0.00	
	Retain A/E to prepare plans and specs and inspect work			6,000.00	4,000.00			
	Retain mod. Coordinator to assist PHA with related labor compliance and related administrative responsibilities			3,000.00	3,000.00			
	Physical needs assessment			2,000.00				
<b>LA 58-1</b>	<b>DWELLING UNITS:</b>			<b>32,308.00</b>	<b>27,035.00</b>	0.00	0.00	
	Install central air and heat in dwelling units, remove old wall heaters, repair space, and repair damaged ceilings.							



<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b>  <b>BASILE HOUSING AUTHORITY</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P-058-501-08 Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2008</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration		3,400	3,400.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	9,000	8,000	8,000.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement	2,000	2,000	2,000.00	0.00
10	1460 Dwelling Structures	29,000	20,814	20,814.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	40,000	34,214	34,214.00	0.00
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 Conservn 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: BASILE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: LA 48P058-501-08 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2008</b>			
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	
<b>LA 58-1</b>	<b>ADMINISTRATION:</b> Assistance with PIC, MTCS, etc.				<b>3,400</b>	<b>3,400.00</b>	0.00	
<b>LA 58-1</b>	<b>FEES AND COSTS:</b> Retain A/E to prepare plans and contract documents and inspect work	1430		<b>9,000</b>	<b>8,000</b>	<b>8,000.00</b>	0.00	
	Retain coordinator to assist PHA with related labor compliance and related administrative responsibilities			6,000	5,000			
<b>LA 58-1</b>	<b>SITE IMPROVEMENTS</b> Replace broken sidewalks and remove tree affecting foundation of one unit	1450		<b>2,000</b>	<b>2,000</b>	<b>2,000.00</b>	0.00	
<b>LA 58-1</b>	<b>DWELLING UNITS:</b> Install central air and heat in dwelling units, remove old wall heaters, repair space, and repair damaged ceilings	1460	5	<b>29,000</b>	<b>20,814</b>	<b>20,814.00</b>	0.00	
	Replace heat/light/vents in bathrooms		10	4,000	2,000			



## 12. Capital Fund Program

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: <b>BASILE HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: LA48P-058-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2007</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/10		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000	9,000	9,000.00	9,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	2,000	2,000	2,000.00	2,000.00
10	1460 Dwelling Structures	38,000	23,946	23,946.00	21,130.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	50,000	34,946.00	34,946.00	32,130.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

## 12. Capital Fund Program

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: BASILE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: LA 48P058-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2007</b>			
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	
<b>LA 58-1</b>	<b>FEES AND COSTS:</b>	1430		<b>10,000</b>	<b>9,000</b>	9,000.00	9,000.00	
	Retain A/E to prepare plans and contract documents and inspect work			6,500	6,000			
	Retain coordinator to assist PHA with related labor compliance and related administrative responsibilities			3,500	3,000			
<b>LA 58-1</b>	<b>SITE IMPROVEMENTS</b>	1450		<b>2,000</b>	<b>2,000</b>	2,000.00	2,000.00	
	Replace broken sidewalks			2,000	2,000			
<b>LA 58-1</b>	<b>DWELLING UNITS:</b>	1460		<b>38,000</b>	<b>23,946</b>	23,946.00	21,130.00	
	Install central air and heat in dwelling units		5	28,800	23,946			
	Install new weatherstripping on exterior doors and new hardware			4,000				
	Replace hardware on interior locking doors			800				
	Replace heat/light/vents in bathrooms			4,400				



Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: <b>BASILE HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: LA48P-058-501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2006</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: ) No. 2	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>6-30-10</b>		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements		10,500.00	10,500.00	10,500.00
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	6,500.00	6,500.00	6,500.00	6,500.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	26,661.00	17,141.00	17,141.00	17,141.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	33,161.00	34,141.00	34,141.00	34,141.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: BASILE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: LA 48P058-501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2006</b>			
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	
LA 58-1	<b>MANAGEMENT IMPROVEMENTS</b>	1408			<b>10,500.00</b>	10,500.00	10,500.00	
	Technical assistance with PIC, WASS, and MTCS, etc.			0.00	4,500.00			
	Annual Plan & PHAS				4,000.00			
	Energy Audit				<b>2,000.00</b>			
LA 58-1	<b>FEES AND COSTS:</b>	1430		<b>6,500.00</b>	<b>6,500.00</b>	6,500.00	6,500.00	
	Retain A/E to prepare plans and contract documents and inspect work			4,000.00	4,000.00			
	Retain coordinator to assist PHA with related labor compliance and related administrative responsibilities			2,500.00	2,500.00			
LA 58-1	<b>DWELLING UNITS:</b>	1460			<b>17,141.00</b>	17,141.00	17,141.00	
	Install central air and heat in dwelling units (remove existing wall heaters)		3					
	Install new smoke detectors in all units (Existing ones are old , outdated, and malfunctioning) Put in location away from excessive heat.		22					



Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: <b>BASILE HOUSING AUTHORITY</b>		Grant Type and Number Capital Fund Program Grant No: LA48P-058-501-05 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2005</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: ) No. 2 (7/9/08)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>6-30-10</b>		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations		3,366.00	3,366.00	3,366.00
3	1408 Management Improvements		3,500.00	3,500.00	3,500.00
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7,500	7,500.00	7,500.00	7,500.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	27,866.00	21,000.00	21,000.00	21,000.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	35,366	35,366	35,366.00	35,366.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: BASILE HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA 48P058-501-05 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2005</b>			
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	
LA 58-1	<b>OPERATIONS</b>			0.00	<b>3,366</b>	3,366	3,366	
LA 58-1	<b>MANAGEMENT IMPROVEMENTS</b>	1408			<b>3,500</b>	3,500	3,500	
	Technical assistance with PIC, WASS, and MTCS, etc.							
LA 58-1	<b>FEES AND COSTS:</b>	1430		<b>7,500</b>	<b>7,500</b>	7,500	7,500	
	Retain A/E to prepare plans and contract documents and inspect work				5,000			
	Retain coordinator to assist PHA with related labor compliance and related administrative responsibilities				2,500			
LA 58-1	<b>DWELLING UNITS:</b>	1460		<b>27,866</b>	<b>21,000</b>	21,000	21,000	
	Install central air and heat in dwelling units (remove existing wall heaters)		3					
	Install new smoke detectors in all units (Existing ones are old , outdated, and malfunctioning) Put in location away from excessive heat.		22					



Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: <b>HOUSING AUTHORITY OF THE TOWN OF BASILE</b>		Grant Type and Number Capital Fund Program Grant No: LA 48P 058 501-04 Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2004</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no:3)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-10		<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				
3	1408 Management Improvements	2,000.00	5,000.00	5,000.00	5,000.00
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7500.00	7500.00	7,500.00	7,500.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	25,654	22,654	22,654.00	22,654.00
11	1465.1 Dwelling Equipment—Nonexpendable	4,800	4,800	4,800.00	4,800.00
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	39,954.00	39,954	39,954.00	39,954.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: HOUSING AUTHORITY OF THE TOWN OF BASILE		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA 48P 058 501 04 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2004</b>			
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	
PHA-Wide	<b>MANAGEMENT IMPROVEMENTS:</b>			<b>2,000.00</b>	<b>5,000.00</b>	<b>5,000</b>	<b>5,000</b>	
	Assistance with PHAS			1,000.00	1,000.00			
	Assistance with PIC & MTCSs			1,000.00	4,000.00			
LA 58-1	<b>FEES AND COSTS.</b>	1430		<b>7,500.00</b>	<b>7,500.00</b>	<b>7,500</b>	<b>7,500</b>	
	Retains A/E to prepare plans and contract documents and inspect work			5,000.00	5,000.00			
	Retain coordinator to assist PHA with related labor compliance and related administrative responsibilities			2,500.00	2,500.00			
LA 58-1	<b>DWELLING UNITS:</b>	1460		<b>25,654.00</b>	<b>22,654.00</b>	<b>22,654</b>	<b>22,654</b>	
	Install central air and heat in dwelling units		7					
LA 58-1	<b>DWELLING EQUIPMENT--NONEXPENDABLE</b>	1465.1		<b>4,800.00</b>	<b>4,800.00</b>	<b>4,800</b>	<b>4,800</b>	
	Refrigerators		12	4,800.00	4,800.00			

**Annual Statement/Performance and Evaluation Report  
 Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  
 Part III: Implementation Schedule**



## BASILE HOUSING AUTHORITY

### PART I: SUMMARY

PHA Name/Number BASILE HOUSING AUTHORITY		LA58		Locality (City/County & State) BASILE, LOUISIANA		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No: 2	
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>B.</b>	Physical Improvements Subtotal	Annual Statement	Complete Interior modernization of 2 dwelling units				
C.	Management Improvements						
D.	PHA-Wide Non-dwelling Structures and Equipment						
<b>E.</b>	<b>ADMINISTRATION</b>						
F.	Other						
G.	Operations						
H.	Demolition						
I.	Development						
J.	Capital Fund Financing – Debt Service						
K.	Total CFP Funds						
L.	Total Non-CFP Funds						
M.	Grand Total	34,035.00	38,000.00	38,000.00	38,000.00	38,000.00	38,000.00





**Part III: Supporting Pages – Management Needs Work Statement(s)**

**N/A**

Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	<b>Development Number/Name</b> General Description of Major Work Categories	Estimated Cost	<b>Development Number/Name</b> General Description of Major Work Categories	Estimated Cost
SEE				
ANNUAL				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

<b>Part I: Summary</b>	
<b>PHA Name: BASILE HOUSING AUTHORITY</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P05850110 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval: 2010</b>	

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no:2 )  
 Performance and Evaluation Report for Period Ending: 6/30/2010       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,000.00	7,000.00	0.00	0.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	30,000.00	26,921.00	0.00	0.00
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 <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> BASILE HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P05850110 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2010</b> <b>FFY of Grant Approval: 2010</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2010			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	38,000.00	33,921.00	0.00	0.00
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				
<b>Signature of Executive Director</b>		<b>Date 7/8/2010</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Basile Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P05850110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2010</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
LA58-1	<b>FEES AND COSTS:</b>	1430		8,000.00	7,000.00	0.00	0.00	
	Retain A/E to prepare plans and specs and inspect work			5,000.00	4,000.00			
	Retain mod. coordinator to assist PHA with related labor compliance and related administrative responsibilities			3,000.00	3,000.00			
LA 58-1	<b>DWELLING UNITS:</b>			30,000.00	26,921.00	0.00	0.00	
	Replace roofing on dwelling units including roof jacks and all vents and ventilation systems		8 units					

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

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







<b>Part I: Summary</b>	
<b>PHA Name: BASILE HOUSING AUTHORITY</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P05850111 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2011</b> <b>FFY of Grant Approval: 2011</b>	

**Type of Grant**  
 **Original Annual Statement**       **Reserve for Disasters/Emergencies**       **Revised Annual Statement (revision no: \_\_\_\_\_)**  
 **Performance and Evaluation Report for Period Ending: 6/30/2010**       **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	30,000.00			
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 <sup>4</sup>				

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> BASILE HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P05850111 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2011</b> <b>FFY of Grant Approval: 2011</b>			
<b>Type of Grant</b>					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	38,000.00			
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				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Basile Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: 20111 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2011</b>			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
LA58-1	<b>FEES AND COSTS:</b>	1430		8,000.00				
	Retain A/E to prepare plans and specs and inspect work			5,000.00				
	Retain mod. coordinator to assist PHA with related labor compliance and related administrative responsibilities			3,000.00				
LA 58-1	<b>DWELLING UNITS:</b>			30,000.00				
	Complete interior modernization:		2 units					
	Replace all windows & screens							
	Replace plywood walls& ceiling with sheetrock							
	Replace floors							
	Replace bathroom fixtures							
	Replace light fixtures							
	Replace interior door & hardware							
	Replace stove hoods and backsplashes							
	Replace countertops and damaged kitchen cabinets							
	Upgrade electrical system							
	Wall and ceiling insulation							

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

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





