

# PHA Plans

## Streamlined 5-Year/Annual Version

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

OMB No. 2577-  
0226  
(exp 05/31/2006)

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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

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## Streamlined 5-Year Plan for Fiscal Years 2010 - 2014

## Streamlined Annual Plan for Fiscal Year 2011

# MS REGIONAL HOUSING AUTHORITY NO. V

**NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.**

**Streamlined Annual PHA Plan**  
**PHA Fiscal Year 2011**  
[24 CFR Part 903.12(b)]

**Table of Contents**

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

**A. ANNUAL STREAMLINED PHA PLAN COMPONENTS**

**Attachment "A" MS030A01**

Civil Rights Certifications (included with PHA Certifications of Compliance) and Significant Amendment

**Attachment "B" MS030B01**

Violence Against Women Act

**Attachment "C" MS030C01**

Resident Advisory Board and Comments

**Attachment "D" MS030D01**

Capital Fund Program Original Annual Statement FY2011

**Attachment "E" MS030E01**

Capital Fund Program Original RHF Annual Statement FY2011

**Attachment "F" MS030F01**

P&E Statements for CFP FY 2010

**Attachment "G" MS030G01**

P&E Statements for RHF FY 2010

**Attachment "H" MS030H01**

P&E Statements for CFP FY 2009

**Attachment "I" MS030I01**

P&E Statements for RHF FY 2009

**Attachment "J" MS030J01**

P&E Statements for CFP FY 2008

**Attachment "K" MS030K01**

CFP Five Year Action Plan

**MS030V01**

PHA 5 Year and Annual Plan

**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**

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Mississippi Regional Housing Authority No. V</u> PHA Code: <u>MS26P030</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2011</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>578</u> Number of HCV units: <u>1,747</u>				
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	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:  The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.				

5.2

**Goals and Objectives.** Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- PHA Goal: Expand the supply of assisted housing  
Objectives:
  - Apply for additional rental vouchers:
  - Reduce public housing vacancies: **The PHA goal is to still reduce these vacancies annually to meet HUD requirement.**
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
  
- PHA Goal: Improve the quality of assisted housing  
Objectives:
  - Improve public housing management: (PHAS score 94.0 and MASS score 30)
  - Improve voucher management: (SEMAP score) 99.0
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
  - Renovate or modernize public housing units: **PHA will continue its ongoing efforts to improve the livability, security, energy efficiency, and preserve the physical integrity of the structures. By implementing these improvements, the PHA has established the goal of having the units totally compatible with the private market rentals in the area by the end of year 2014.**
  - Demolish or dispose of obsolete public housing:
  - Provide replacement public housing:
  - Provide replacement vouchers:
  - Other: (list below)
  
- PHA Goal: Increase assisted housing choices  
Objectives:
  - Provide voucher mobility counseling:
  - Conduct outreach efforts to potential voucher landlords
  - Increase voucher payment standards
  - Implement voucher homeownership program:
  - Implement public housing or other homeownership programs:
  - Implement public housing site-based waiting lists:
  - Convert public housing to vouchers:
  - Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- PHA Goal: Provide an improved living environment  
Objectives:
  - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: **With the use of flat rates and the adopted deconcentration policy, the PHA has a goal increasing the income level of the residency.**
  - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - Implement public housing security improvements:
  - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

- PHA Goal: Promote self-sufficiency and asset development of assisted households  
Objectives:
  - Increase the number and percentage of employed persons in assisted families: **By making job referrals and utilizing flat rents, the PHA has a goal of increasing the number of working residents.**
  - Provide or attract supportive services to improve assistance recipients' employability:
  - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
  - Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: **The PHA will continue to undertake affirmative equal access for all applicants that are reinforced in the Admission and Continued Occupancy Plan.**
  - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required: **Currently the PHA has apartments which have been modified for the handicapped in accordance with Statutory 504 Requirements. Additionally, the PHA is currently and will continue to make handicapped modifications based on individual need which exceed 504 requirements.**
  - Other: (list below)

6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b>NONE</b></p> <p><b>The PHA held its Public Hearing and Resident Advisory Board meeting on Friday, March 18, 2011 at 10:30 A. M.</b></p> <p><b>There were no comments or challenged elements regarding the annual and five year plan.</b></p> <p>(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. Mississippi Regional Housing Authority No. V 298 Northside Drive Newton, MS 39345</p>
7.0	<p><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></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><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.</p>
8.2	<p><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.</p>
8.3	<p><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.</p>
9.0	<p><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.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>

**Additional Information.** Describe the following, as well as any additional information HUD has requested.

(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.

1. Expand the supply of existing housing: The Housing Authority is meeting this goal with the main accomplishment being a reduction of vacancies over the past five years.
2. Improve the quality of assisted housing: The Housing Authority is meeting this goal with the main accomplishments being ongoing efforts to raise the standards of public housing with the use of CFP program funds. The PHA established the goal to improve apartments to achieve compatibility with private market rentals by the year 2013. Improvements are currently in progress with the use of CFP funds and the Housing Authority is on schedule to meeting this goal.
3. The PHA continues to improve its public housing management and improve advisory score to a higher performer level. The PHA is on schedule meeting this goal.
4. Increase assisted housing choices: The Housing Authority is achieving this goal by taking action over the past plan year increasing the voucher standard from 100% of the fair market rent to 110% additionally portability is covered in applicant briefings and they are provided with a "renters kit" which is very informative.
5. Provide an improved living environment: The PHA is maintaining a proper balanced income mix in all developments. The PHA meets income targeting requirements.
6. Promote self-sufficiency and asset development of families and individuals: The Housing Authority is meeting this goal by administering ongoing self-sufficiency programs and in addition, the Housing Authority has been able to accomplish an increase in working residents.
7. Ensure equal opportunity in housing for all Americans: The Housing Authority is meeting this goal with affirmative action measures as reinforced in the Fair Housing policy of the PHA.
8. Provide necessary professional development for PHA staff: The Housing Authority is meeting this goal by sending PHA staff to all HUD training workshops. In addition, PHA maintenance staff attended specialized training courses such as air conditioning repair, etc.
9. The PHA established the goal to provide services for elderly families through senior services. The PHA is meeting this goal.
10. The Housing Authority has adopted new policies and procedures to comply with current HUD regulations.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

**Criteria for Substantial Deviations and Significant Amendments**

**(I) Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:**

The Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notice for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in requirements for administration of Public Housing requiring public comment and/or public hearing.

**B. Significant Amendment or Modification to the Annual Plan**

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;
- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

10.0

<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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## ATTACHMENT “A”

### **Civil Rights Certifications**

[24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations. It is the policy of the Housing Authority to comply with all Federal, State, and local nondiscrimination laws and with rules and regulations governing Fair Housing and Equal Opportunity in housing and employment. The Housing Authority will comply with all laws relating to Civil Rights, including: Title VI and VIII of the Civil Rights Act, Executive Order 11063, Section 504, Age Discrimination Act and American With Disabilities Act.

To further our commitment to fully comply with applicable Civil Rights laws, the Housing Authority will provide Federal/State/Local information to public housing residents regarding “discrimination” and any recourse available to them during resident orientation session, resident meetings and reexaminations.

### **Criteria for Substantial Deviations and Significant Amendments**

#### **(1) Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### **A. Substantial Deviation from the 5-year Plan:**

The Housing Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notification for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet regulatory compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or Modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in statutory requirement for administration of Public Housing requiring public comment and/or public hearing.

#### **B. Significant Amendment or Modification to the Annual Plan**

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;

- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

**ATTACHMENT (B)**  
**Mississippi Regional Housing Authority No. V**  
**(MRHAV)**

**Violence Against Women Act (VAWA) Policy**

**I. Purpose and Applicability**

The purpose of this 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 MRHAV's policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by MRHAV of all federally subsidized public housing. 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. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by MRHAV;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between MRHAV, 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 MRHAV; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by MRHAV.

**III. Other MRHAV Policies and Procedures**

This Policy shall be referenced in and attached to MRHAV's Five-Year Public Housing Agency Plan and shall be incorporated in and made a part of MRHAV's Admissions and Continued Occupancy Policy. MRHAV's annual public housing agency plan shall also contain information concerning MRHAV's activities, 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 MRHAV, 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:
  - (i) The length of the relationship.
  - (ii) The type of relationship.
  - (iii) The frequency of interaction between the persons involved in the relationship.

C. *Stalking* – means –

- (A) (i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and (ii) to place under surveillance with the intent to kill, injure, harass or intimidate another person; and
- (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 –
  - (i) that person;
  - (ii) a member of the immediate family of that person; or
  - (iii) 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*. MRHAV will not deny admission to public housing to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

## **VI. Termination of Tenancy or Assistance**

A. *VAWA Protections.* Under VAWA, public housing residents have the following specific protections, which will be observed by MRHAV:

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be 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.

2. In addition to the foregoing, tenancy or assistance will not be terminated by MRHAV 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:

- (a) Nothing contained in this paragraph shall limit any otherwise available authority of MRHAV 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, MRHAV may apply a more demanding standard to the victim of domestic violence, dating violence or stalking than that applied to other tenants.
- (b) Nothing contained in this paragraph shall be construed to limit the authority of MRHAV to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or MRHAV, 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, MRHAV 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 resident 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 resident 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 MRHAV. Leases used for all public housing operated by MRHAV, 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, MRHAV 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., MRHAV shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by MRHAV.

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:

1. *HUD-approved form* - by providing to MRHAV 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.
2. *Other documentation* - by providing to MRHAV 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.
3. *Police or court record* – by providing to MRHAV 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 MRHAV, to provide verification, must provide such verification within 14 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 MRHAV, 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. 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 MRHAV 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:

1. requested or consented to by the individual in writing, or
2. required for use in a public housing eviction proceeding as permitted in VAWA, or
3. otherwise required by applicable law.

B. *Notification of rights.* All residents of public housing administered by MRHAV shall be notified in writing concerning their right to confidentiality and the limits on such rights to confidentiality.

## **IX. Court Orders/Family Break-up**

A. *Court orders.* It is MRHAV's policy to honor orders entered by courts of competent jurisdiction affecting individuals assisted by MRHAV. 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.

B. *Family break-up.* Other MRHAV policies regarding family break-up are contained in MRHAV's Public Housing Admissions and Continuing Occupancy Plan (ACOP).

## **X. Relationships with Service Providers**

It is the policy of MRHAV to cooperate with organizations and entities, both private and governmental that provides shelter and/or services to victims of domestic violence. If MRHAV staff become aware that an individual assisted by MRHAV is a victim of domestic violence, dating violence or stalking, MRHAV 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 MRHAV 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. MRHAV's annual public housing agency plan shall describe providers of shelter or services to victims of domestic violence with which MRHAV has referral or other cooperative relationships.

## **XI. Notification**

MRHAV shall provide written notification to applicants, tenants, 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 MRHAV as approved by the MRHAV Board of Commissioners.

**ATTACHMENT "C"**  
**LIST OF RESIDENT ADVISORY BOARD MEMBERS**

PRESIDENT----ROSE AGEE----JASPER COUNTY  
63 West 4<sup>th</sup> Avenue, Apt. 34, Bay Springs, MS 39422

VICE PRESIDENT---FRANKIE COLLINS---KEMPER COUNTY  
316 Avery Street, Scooba, MS 39358

SECRETARY-----TEALA GILL- NESHOPA COUNTY  
502 Lamar Circle, Philadelphia, MS 39350

TREASURER-----LAVONNE HARDEE - NEWTON COUNTY  
109 Congregate Road, Apt. 10, Newton, MS 39345

MEMBER-----LUCY SMITH- NOXUBEE COUNTY  
601 Deerbrook Drive, Brooksville, MS 39739

MEMBER-----DEIDRA TUCKER – LEAKE COUNTY  
312 Debra Street, Carthage, MS 39051

**SELECTION OF RESIDENT ADVISORY BOARD MEMBERS:**

The Resident Advisory Board consists of six (6) members. They are selected by the housing authority and resident body.

**CHALLENGED ELEMENTS: NONE**

**Resident Advisory Board Recommendations**

- a.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

If yes, provide the comments below:

- b. In what manner did the PHA address those comments? (select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary. N/A
  - The PHA changed portions of the PHA Plan in response to comments  
List changes below:
  - Other: (list below)

The PHA held its Public Hearing and Resident Advisory Board meeting on Friday, March 18, 2011 at 10:30 A. M.

There were no comments or challenged elements regarding the annual and five year plan.

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>			
PHA Name: MS Regional Housing Authority V	Grant Type and Number MS26P030501-11		
	Capital Fund Program Grant No:		
	Replacement Housing Factor Grant No:		
	Date of CFFP:		
		FFY of Grant: 2011	FFY of Grant Approval:

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		99,580			
3	1408 Management Improvements		45,000			
4	1410 Administration (may not exceed 10% of line 21)		100,836			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		42,000			
8	1440 Site Acquisition					
9	1450 Site Improvement		30,000			
10	1460 Dwelling Structures		564,951			
11	1465.1 Dwelling Equipment—Nonependable		36,000			
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment		90,000			
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 CFFP 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

Part I: Summary		FFY of Grant: 2011	
PHA Name: MS Regional Housing Authority		FFY of Grant Approval:	
Grant Type and Number: MS26P030501-11		OMB No. 2577-0226	
Capital Fund Program Grant No: MS26P		Expires 4/30/2011	
Replacement Housing Factor Grant No:			
Date of CFPP:			
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"/> Final Performance and Evaluation Report	
Performance and Evaluation Report for Period Ending:			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	1,008,367	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	21,000	
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	284,951	
Signature of Executive Director		Signature of Public Housing Director	
<i>[Signature]</i>		<i>[Signature]</i>	
Date		Date	
4/8/2011			

<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 CFPP 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  
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**Part II: Supporting Pages**

PHA Name: MS Regional Housing Authority V

Grant Type and Number  
 Capital Fund Program Grant No: MS26P030501-11  
 CFPP (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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
COCC	Management Fees	1410		100,836				
AMP I	Operations	1406		44,880				
30-3, 6, 10, 15, 17, 19,20,24	Service Coordinator	1408		45,000				
	A/E Fees, Inspections, Testing Consultant	1430		7,000				
	1430	1430		7,000				
	Site Improvements	1450		10,000				
	Vacancy Reduction	1460	15	30,000				
	Interior /Exterior Renovations	1460	10	10,000				
	Door/Hardware Installation	1460	100	25,000				
	Flooring	1460	10	10,000				
	HVAC Systems	1460	5	10,000				
	Modernization Coordinator	1460		22,000				
	Bath Face Bows (30-3)	1460	12	19,000				
	Windows (#3 – 12) (#6 – 32) \$250 ea	1460	440	128,000				
	Stoves	1465.1	13	5,000				
	Refrigerators	1465.1	15	7,000				
	Truck	1475	1	30,000				
AMP II	Operations	1406		30,430				
30-4, 5, 7, 11, 22,23, 25, 25A	A/E Fees, Inspections, Testing Consultant	1430		7,000				
	1430	1430		7,000				
	Site Improvements	1450		10,000				
	Vacancy Reduction	1460	5	5,000				
	Interior /Exterior Renovations	1460	5	10,000				
	Door/Hardware Installation	1460	100	25,000				

<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.







Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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<b>Part I: Summary</b>		<b>FFY of Grant: 2011</b>	
PHA Name: Mississippi Regional Housing Authority v		FFY of Grant Approval:	
Grant Type and Number		Date of CFFP:	
Capital Fund Program Grant No:			
Replacement Housing Factor Grant No: MS26R030501-11			

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: )		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
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	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
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>		15,935		

<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  
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 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2011	
PHA Name: Miss. Regional Housing Authority V	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R030501-11 Date of CFFP:	FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no: ) <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>
18a	1501 Collateralization or Debt Service paid by the PHA		Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		Expended
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	15,935	
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
<i>[Signature]</i>		4/8/2011	

<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.









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

<b>Part I: Summary</b>		<b>FFY of Grant: 2010</b>	
PHA Name: MS Regional Housing Authority V	Grant Type and Number Capital Fund Program Grant No: MS26P030501-10 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	

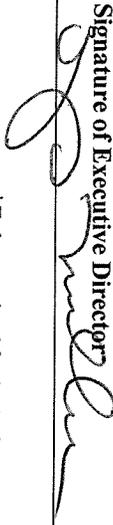
Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		Revised Annual Statement (revision no:01 ) <input type="checkbox"/> Revised Annual Statement and Evaluation Report		Total Actual Cost <sup>1</sup>	
		Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		99,580	99,580	0	0	0
3	1408 Management Improvements		45,000	45,000	0	0	0
4	1410 Administration (may not exceed 10% of line 21)		100,836	100,836	0	100,836	0
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs		52,990	87,990	0	0	0
8	1440 Site Acquisition						
9	1450 Site Improvement		205,000	205,000	0	0	0
10	1460 Dwelling Structures		328,511	443,511	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable		21,450	21,450	0	0	0
12	1470 Non-dwelling Structures		150,000	0	0	0	0
13	1475 Non-dwelling Equipment		5,000	5,000	0	0	0
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.

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

<b>Part I: Summary</b>		FFY of Grant: 2010	
PHA Name: MS Regional Housing Authority V	Grant Type and Number Capital Fund Program Grant No.: MS26F030501-10 Replacement Housing Factor Grant No. Date of CFFP:	FFY of Grant Approval:	

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)	1,008,367	1,008,367	100,836	0
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	165,000			
Signature of Executive Director		Date	Signature of Public Housing Director		Date
		7/8/2011			

<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.

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

Part II: Supporting Pages		Grant Type and Number		Federal FFY of Grant: 2010		Total Actual Cost		Status of Work	
PHA Name: MS Regional Housing Authority V		Capital Fund Program Grant No.: MS26P030501-10							
		CFPP (Yes/No):							
		Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
<b>HA Wide</b>	<b>COCC – Admin Fees</b>	1410		100,836	100,836	100,836	100,836	0	
	Site Improvements: Sidewalks, Trees, Drainage Improvements	1450		10,000	10,000	10,000			
	Mod Coordinator	1460		30,000	30,000	60,000			
	Flooring	1460	5	10,000	10,000	10,000			
	Interior Renovations, Vacancies	1460	5	10,000	10,000	90,000			
	Exterior Renovations	1460	5	5,000	5,000	5,000			
	HVAC	1460	5	10,000	10,000	30,000			
	Doors/Hardware	1460		0	0	90,396			
	Non Dwelling Equipment	1475		5,000	5,000	5,000			
<b>AMP I</b>	<b>Operations</b>	1406		44,880	44,880	44,880			
	Service Coordinator	1408		45,000	45,000	45,000			
	Consultant	1430		0	0	15,000			
	A/E Fees, Inspections, Testing	1430		2,400	2,400	2,400			
	Stoves	1465.1	8	2,400	2,400	2,400			
	Refrigerators	1465.1	10	4,750	4,750	4,750			
<b>AMP II</b>	<b>Operations</b>	1406		30,430	30,430	30,430			
	Consultant	1430		0	0	10,000			
	A/E Fees, Inspections, Testing	1430		42,590	42,590	42,590			
	Replace/Repave Macon Street	1450		195,000	195,000	195,000			
030-25, 25A	Replace HVAC/Water Heaters @ 5500 ea	1460	30	158,115	158,115	158,115			

<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.







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

<b>Part I: Summary</b>		<b>FFY of Grant: 2010</b>	
PHA Name: Mississippi Regional Housing Authority V		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R030501-10		Date of CFFP:	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	Summary by Development Account	Revised Annual Statement (revision no: )		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
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		1440 Site Acquisition			
9		1450 Site Improvement			
10		1460 Dwelling Structures			
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>	15,935	0	0

<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.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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 Expires 4/30/2011

Part I: Summary		FFY of Grant: 2010		
PHA Name: Miss. Regional Housing Authority V	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No. MS26R030501-10 Date of CFFP:	FFY of Grant Approval:		
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	Obligated	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	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)	15,935		0
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 4/8/2011	Signature of Public Housing Director	
			Date	

<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.









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 Expires 4/30/2011

**Part I: Summary**

PHA Name: MS Regional Housing Authority V	Grant Type and Number Capital Fund Program Grant No: MS26P030501-09 Replacement Housing Factor Grant No: Date of CFPP:	FY of Grant: 2009 FFY of Grant Approval:
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:03 ) <input type="checkbox"/> Final Performance and Evaluation Report	Original	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
				Revised <sup>2</sup>			Expended	
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		99,580	99,580	0	0	0	0
3	1408 Management Improvements		40,000	40,000	40,000	40,000	0	0
4	1410 Administration (may not exceed 10% of line 21)		101,600	101,600	101,600	101,600	0	0
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs		24,000	8,100	8,100	8,100	2,942	2,942
8	1440 Site Acquisition							
9	1450 Site Improvement		10,000	10,000	10,000	10,000	606.78	606.78
10	1460 Dwelling Structures		628,846	673,460.62	515,162.36	515,162.36	158,895.67	158,895.67
11	1465.1 Dwelling Equipment—Nonexpendable		30,000	26,000	18,000	18,000	8,302	8,302
12	1470 Non-dwelling Structures		32,000	32,785.38	32,785.38	32,785.38	20,623.85	20,623.85
13	1475 Non-dwelling Equipment		50,000	24,500	0	0	0	0
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>		FFY of Grant: 2009	
PHA Name: MS Regional Housing Authority V	Grant Type and Number Capital Fund Program Grant No: MS26F030501-09 Replacement Housing Factor Grant No: Date of CFPP:	FFY of Grant Approval:	

Line	Type of Grant	Performance and Evaluation Report for Period Ending: 12/31/10	Total Estimated Cost		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
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)	1,016,026	1,016,026	725,647.74	191,370.30
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date	Signature of Public Housing Director		Date
		4/8/2011			

<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 CFPP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
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U.S. Department of Housing and Urban Development  
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**Part II: Supporting Pages**

PHA Name: MS Regional Housing Authority V		Grant Type and Number Capital Fund Program Grant No: MS26P030501-09 CFPP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2009		Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>
<b>COCC</b>	Administration Management Fees	1410		101,600	101,600	101,600	0
<b>AMP 1</b>	Operations	1406		44,880	44,880	0	0
	Service Coordinator	1408		40,000	40,000	40,000	0
	Painting	1460		0	20,000	0	0
	Entrance Doors Installation	1460		0	30,000	30,000	28,882.63
	HVAC – Balance from “S”	1460		0	1,000	710.44	710.44
	Roofing – Balance from “S”	1460		0	146,000	131,911.62	76,313.50
	Panic Hardware	1460		0	11,000	10,991.98	10,991.98
	Refrigerators	1465.1	15	0	6,000	6,000	0
<b>AMP 2</b>	Operations	1406		30,430	30,430	0	0
	A/E Fees	1430		10,000	5,100	5,100	1,762
#4, #5, #7, #11	Windows	1460		168,715	0	0	0
#5	Roofing	1460		10,000	2,000	1,378	0
	Siding Repairs	1460		5,000	0	0	0
#4, #23	Entrance Doors/Hardware	1460		76,000	20,000	20,000	0
#4, #23	Security Screen Doors	1460		38,000	5,000	5,000	0
#23	Storage Room Doors	1460		30,000	3,000	3,000	0
#25	Replace HVAC	1460		75,000	138,865.86	138,865.86	1,008.36
	Panic Hardware	1460		7,631	12,500	12,500	5,037.99
	Painting	1460		0	5,000	0	0
	Mod Coordinator	1460		0	50,000	10,000	6,761.39
	Water Heaters	1460		0	17,940	0	0
	Stoves	1465.1		12,000	12,000	12,000	8,302
	Refrigerators	1465.1		18,000	8,000	0	0

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

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







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  
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 Expires 4/30/2011

<b>Part I: Summary</b>		<b>FFY of Grant: 2009</b>	
PHA Name: Mississippi Regional Housing Authority V		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R030501-09 Date of CFFP:			

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	
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	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
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>		16,061	0	0

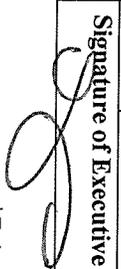
<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall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

Annual Statement/Performance and Evaluation Report  
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 Capital Fund Financing Program

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

<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: Miss. Regional Housing Authority	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R030501-09 Date of CFFP:	FFY of Grant Approval:	

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)	16,061	0		0
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 4/8/2011

Signature of Public Housing Director \_\_\_\_\_ Date \_\_\_\_\_

<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.









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<b>Part I: Summary</b>	<b>PHA Name: MS REGIONAL HOUSING AUTHORITY V</b>	<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval:</b>
	<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P030501-08 Replacement Housing Factor Grant No: Date of CFFP:	

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:04 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Obligated	Total Actual Cost <sup>1</sup> Expended
			Summary by Development Account	Original		
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		149,994	149,905	149,905	149,905
3	1408 Management Improvements		15,000	0	0	0
4	1410 Administration (may not exceed 10% of line 21)		99,589	99,589	99,589	99,589
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		59,700	60,566.30	60,566.30	60,566.30
8	1440 Site Acquisition					
9	1450 Site Improvement		59,000	49,558.07	49,558.07	49,558.07
10	1460 Dwelling Structures		426,753	481,888.04	481,888.04	481,888.04
11	1465.1 Dwelling Equipment—Nonependable		31,200	30,310.07	30,310.07	30,310.07
12	1470 Non-dwelling Structures		100,000	69,419.52	69,419.52	69,419.52
13	1475 Non-dwelling Equipment		54,649	54,649	54,649	54,649
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.

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<b>Part I: Summary</b>		FFY of Grant: 2008	
PHA Name: MS REGIONAL HOUSING AUTHORITY V	Grant Type and Number Capital Fund Program Grant No: MS26P030501-08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

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)	995,885	995,885	995,885	995,885
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 12/02/09 4/18/2011		Signature of Public Housing Director	
				Date	

<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.

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Part II: Supporting Pages		PHA Name: MS REGIONAL HOUSING AUTHORITY V		Grant Type and Number Capital Fund Program Grant No: MS26P030501-08 CFPP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2008			Status of Work
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost				
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
COCC	Management Fees	1410		99,589	99,589	99,589	99,589		
AMP 1	Operations	1406		68,918	68,918	68,918	68,918		
AMP 2	Operations	1406		45,798	45,798	45,798	45,798		
AMP 3	Operations	1406		35,278	35,189	35,189	35,189		
AMP 1	Service Coordinator	1408		15,000	0	0	0		
	Fees/Cost, A/E	1430		21,700	22,063.51	22,063.51	22,063.51		
	Site Improvements	1450		50,000	37,227.82	37,227.82	37,227.82		
(003 Decatur)	Roofing	1460	12	1,000	0	0	0		
(010 Taylorsville)	Roofing	1460	10	1,000	0	0	0		
(003 Decatur)	Living Room Windows	1460	12	0	0	0	0		
(006 Newton)	Living Room Windows	1460	32	0	0	0	0		
(006 Newton)	Entrance Doors/Hardware	1460	10	3,000	4,323.55	4,323.55	4,323.55		
(006 Newton)	Security Screen Doors	1460	10	0	1,670.26	1,670.26	1,670.26		
(020 Newton)	Panic Hardware	1460		17,164	2,902.83	2,902.83	2,902.83		
(024 Newton)	Panic Hardware	1460		17,164	2,902.82	2,902.82	2,902.82		
	Comprehensive Interior Renovations	1460		45,799	42,677.17	42,677.17	42,677.17		
	Mod Coordinator	1460		12,000	19,253.01	19,253.01	19,253.01		
	HVAC	1460		20,000	3,138.05	3,138.05	3,138.05		
	Flooring	1460		25,000	25,372.49	25,372.49	25,372.49		
	Exterior Repairs	1460	85	0	0	0	0		
	Siding Repairs	1460	85	1,000	0	0	0		
	Stoves	1465.1	15	6,000	5,025	5,025	5,025		
	Refrigerators	1465.1	15	6,000	5,505	5,505	5,505		
	Maintenance Equipment	1475		21,500	21,500	21,500	21,500		

<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.

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  
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 Expires 4/30/2011

Part II: Supporting Pages		PHA Name: MS REGIONAL HOUSING AUTHORITY v		Grant Type and Number Capital Fund Program Grant No: MS26P030501-08 CFPP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2008		Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost				
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>AMP 2</b>	Fees & Costs, A/E	1430		6,000	5,812.20	5,812.20	5,812.20		
(025 Brooksville)	Site Improvements	1450		2,000	7,666.18	7,666.18	7,666.18		
(004 Philadelphia)	Living Room Windows	1460	30	0	0	0	0		
(011 Union)	Living Room Windows	1460	9	0	0	0	0		
(004 Philadelphia)	Roofing	1460	0	1,000	0	0	0		
(005 Philadelphia)	Roofing	1460	0	1,000	0	0	0		
(007 DeKalb)	Roofing	1460	0	1,000	0	0	0		
(011 Union)	Roofing	1460	0	1,000	0	0	0		
(004 Philadelphia)	Exterior Repairs	1460	0	0	0	0	0		
(007 DeKalb)	Exterior Repairs	1460	0	0	0	0	0		
(4,5,7)	Entrance Doors/Locks	1460	152	16,000	82,570.23	82,570.23	82,570.23		
(011, 22, 23)	Entrance Doors/Locks	1460	103	9,000	55,953.72	55,953.72	55,953.72		
(007 DeKalb)	Security Screen Doors	1460	0	0	0	0	0		
(011, 25)	Security Screen Doors	1460	43	6,300	9,164.50	9,164.50	9,164.50		
(007 DeKalb)	Electrical/HVAC	1460	32	1,000	2,445.77	2,445.77	2,445.77		
(007 DeKalb)	Flooring	1460	32	4,000	3,223.14	3,223.14	3,223.14		
	Cabinets/Stove Hoods	1460	0	0	0	0	0		
	Mod Coordinator	1460		20,000	7,316.12	7,316.12	7,316.12		
(022 Union Congreg)	Panic Hardware	1460		17,163	3,473.83	3,473.83	3,473.83		
(023 Scooba)	Entrance Doors/Locks	1460		24,000	0	0	0		
(023 Scooba)	Security Screen Doors	1460	60	13,000	12,787.80	12,787.80	12,787.80		
	Interior Renovations	1460		0	208.40	208.40	208.40		
	Stoves	1465.1	9	3,000	2,726.37	2,726.37	2,726.37		
	Refrigerators	1465.1	10	3,500	3,418.70	3,418.70	3,418.70		
	Maintenance Equipment	1475		22,399	22,399	22,399	22,399		
(022 Union Congreg)	Washers/Dryers	1475	6	0	0	0	0		

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







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

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

<b>Part I: Summary</b>						
PHA Name/Number <b>Mississippi Regional Housing Authority V</b>		Locality (City/County & State) <b>Newton, Newton, MS</b>			<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	668,367	668,367	668,367	668,367
C.	Management Improvements		45,000	45,000	45,000	45,000
D.	PHA-Wide Non-dwelling Structures and Equipment		30,000	30,000	30,000	30,000
E.	Administration		80,000	80,000	80,000	80,000
F.	Other		95,000	95,000	95,000	95,000
G.	Operations		90,000	90,000	90,000	90,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		1,008,367	1,008,367	1,008,367	1,008,367
L.	Total Non-CFP Funds					
M.	Grand Total		1,008,367	1,008,367	1,008,367	1,008,367

<b>Part I: Summary (Continuation)</b>						
PHA Name/Number <b>Mississippi Regional Housing Authority V</b>			Locality: <b>Newton, Newton, MS</b>		<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
A.	Development Number and Name Number	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>Annual Statement</b>				
	COCC		80,000	80,000	80,000	80,000
	PHA WIDE:		928,367	928,367	928,367	928,367
	AMP 1 MS 030-001P					
	AMP 2 MS 030-002P					
	AMP 3 MS 030-003P					

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012			Work Statement for Year: 3 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	COCC - Management Fees		80,000	COCC - Management Fees		80,000
	<b>PHA WIDE:</b>		90,000	<b>PHA WIDE:</b>		90,000
	Operations			Operations		
	Consultants		10,000	Consultants		10,000
	A/E Fees, Inspections		45,000	A/E Fees, Inspections		45,000
	Site Improvements:		10,000	Site Improvements:		10,000
	Corrections of Drainage, Erosion, Sidewalk & Tree Trimming needs as Identified via UPCS			Corrections of Drainage, Erosion, Sidewalk & Tree Trimming needs as Identified via UPCS		
	Inspections: Top Soil & Sod \$50/yd.; Sidewalks \$4.50/ln. ft. Tree Trim @ 400 per unit & Tree Removal @ 1000 per tree			Inspections: Top Soil & Sod \$50/yd.; Sidewalks \$4.50/ln. ft. Tree Trim @ 400 per unit & Tree Removal @ 1000 per tree		
	Replace Flooring Indefinite	15	85,000	Replace Flooring Indefinite	15	85,000
	Quantity of Vacancies: Average Flooring 950 sq.ft. @ 2.50 per sq. ft.; Total Per Unit			Quantity of Vacancies: Average Flooring 950 sq.ft. @ 2.50 per sq. ft.; Total Per Unit		
	HVAC/Electrical Upgrades Indefinite quantity of vacancies- Install central heat/air (2500 per Unit) with electrical upgrades including panel replacement, Ground fault interrupters, Switches & receptacle replacements	15	85,000	HVAC/Electrical Upgrades Indefinite quantity of vacancies- Install central heat/air (2500 per Unit) with electrical upgrades including panel replacement, Ground fault interrupters, Switches & receptacle replacements	15	85,000
	Kitchen Renovations	15	78,367	Kitchen Renovations	15	78,367
	Bath Renovations	15	45,000	Bath Renovations	15	45,000
	Plumbing	15	20,000	Plumbing	15	20,000
	Termite Treatment	100	25,000	Termite Treatment	100	25,000
	Electrical	15	25,000	Electrical	15	25,000
	Interior Renovations	15	40,000	Interior Renovations	15	40,000
	Windows/Screens	200	70,000	Windows/Screens	200	70,000
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$



<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014			Work Statement for Year: 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	COCC - Management Fees		80,000	COCC - Management Fees		80,000
Annual Statement	<b>PHA WIDE:</b>		90,000	<b>PHA WIDE:</b>		90,000
	Operations			Operations		
	Consultants		10,000	Consultants		10,000
	A/E Fees, Inspections		45,000	A/E Fees, Inspections		45,000
	Site Improvements:		10,000	Site Improvements:		10,000
	Corrections of Drainage, Erosion, Sidewalk & Tree Trimming needs as Identified via UPCS			Corrections of Drainage, Erosion, Sidewalk & Tree Trimming needs as Identified via UPCS		
	Inspections: Top Soil & Sod \$50/yd.;			Inspections: Top Soil & Sod \$50/yd.;		
	Sidewalks \$4.50/ln. ft. Tree Trim @ 400			Sidewalks \$4.50/ln. ft. Tree Trim @ 400		
	per unit & Tree Removal @ 1000 per tree			per unit & Tree Removal @ 1000 per tree		
	Replace Flooring Indefinite	15	85,000	Replace Flooring Indefinite	15	85,000
	Quantity of Vacancies: Average Flooring			Quantity of Vacancies: Average Flooring		
	950 sq.ft. @ 2.50 per sq. ft.; Total Per Unit			950 sq.ft. @ 2.50 per sq. ft.; Total Per Unit		
	HVAC/Electrical Upgrades Indefinite quantity	15	85,000	HVAC/Electrical Upgrades Indefinite quantity	15	85,000
	of vacancies- Install central heat/air (2500 per Unit) with electrical upgrades including panel			of vacancies- Install central heat/air (2500 per Unit) with electrical upgrades including panel		
	replacement, Ground fault interrupters,			replacement, Ground fault interrupters,		
	Switches & receptacle replacements			Switches & receptacle replacements		
	Kitchen Renovations	15	76,367	Kitchen Renovations	15	76,367
	Bath Renovations	15	45,000	Bath Renovations	15	45,000
	Plumbing	15	20,000	Plumbing	15	20,000
	Termite Treatment	100	25,000	Termite Treatment	100	25,000
	Electrical	15	25,000	Electrical	15	25,000
	Interior Renovations	15	40,000	Interior Renovations	15	40,000
	Windows/Screens	200	70,000	Windows/Screens	200	70,000
	Water Heaters	50	50,000	Water Heaters	50	50,000
	Roofing	4	50,000	Roofing	4	50,000
	ADA Compliance	2	50,000	ADA Compliance	2	50,000
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$





<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014		Work Statement for Year: 5 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	<b>PHA Wide</b>		<b>PHA Wide</b>	
Annual Statement	Congregate Housing Social Services Coordinator	45,000	Congregate Housing Social Services Coordinator	45,000
	Subtotal of Estimated Cost	\$45,000	Subtotal of Estimated Cost	\$45,000