

# 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

# CANTON HOUSING AUTHORITY

**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" MS061A01**

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

**Attachment "B" MS061B01**

Violence Against Women Act

**Attachment "C" MS061C01**

Resident Advisory Board and Comments

**Attachment "D" MS061D01**

Capital Fund Program Original Annual Statement FY2011

**Attachment "E" MS061E01**

P&E Statements for CFP FY 2010

**Attachment "F" MS061F01**

P&E Statements for CFP FY 2009

**Attachment "G" MS061G01**

P&E Stimulus Annual Statement FY2009

**Attachment "H" MS061H01**

P&E Statements for CFP FY 2008

CFP Five Year Action Plan

**Attachment "I" MS061I01**

**MS061V01**

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>Canton Housing Authority</u> PHA Code: <u>MS26P061</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>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>150</u> Number of HCV units: _____					
<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 under HUD guidelines..**
  - 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 and MASS score )
  - Improve voucher management: (SEMAP score)
  - 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: **With the use of the Capital Fund Program, the PHA will continue its ongoing efforts to improve the livability, security, energy efficiency, and preserve the physical integrity of the structures.**
  - 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: **The PHA will continue efforts to provide proper security as a preventative deterrent to drugs and criminal activity.**
  - 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 by two a year by the year 2014.**
  - Provide or attract supportive services to improve assistance recipients' employability: **Currently the Housing Authority is working with local agencies and programs to enhance the opportunity of employment for residents.**
  - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
  - 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: NONE</p> <p><b>The PHA held its Public Hearing and Resident Advisory Board meeting on Thursday, April 14, 2011 at 3:00 P. M. There were no challenged elements or comments 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. Canton Housing Authority 120 Faith Lane Canton, MS 39046</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> <p>Canton Housing Authority will be purchasing property for a mixed finance property development within five (5) years to replace public housing units and / or to provide additional affordable housing.</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.

The PHA will continue to improve its public housing management and improve advisory score to a higher performer level. The PHA is on schedule meeting this goal.

The PHA will continue its PHDEP efforts to improve security. The PHA is working closely with the city and county law enforcement agencies and obtains arrest information on any tenant for necessary appropriate action. The PHA is on schedule meeting this goal.

The PHA will continue to partnership with community agencies to provide residents drug prevention, educational and recreational programs. The PHA is on schedule meeting this goal.

The PHA will continue its goal to ensure equal access to assisted housing.

The PHA will continue to inspect all housing units annually. We have prioritized our needs for CFP funds. The PHA is on schedule meeting this goal.

The PHA will continue to counseled with residents on homeownership and pledged our support if they choose to pursue homeownership.

The PHA will continue to ensure Equal Opportunity in housing for all applicants regardless of their needs.

The PHA will continue to improve the physical condition of units and grounds. The PHA is on schedule meeting this goal.

The PHA established the goal of having units compatible with private market rentals by the year 2014. With the use of Capital Fund the PHA is on schedule meeting this goal.

The PHA established the goal to make handicapped modifications to units exceeding 504 requirements based on individual need. The PHA is in the process of meeting this goal.

10.0

The Housing Authority will continue to adopted new policies and procedures to comply with current 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**

**(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 Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper 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 shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in 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.

<b>11.0</b>	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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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”**

### **CANTON HOUSING AUTHORITY POLICY ON VIOLATION AGAINST WOMEN (VAWA) AND JUSTICE DEPARTMENT REAUTHORIZATION ACT OF 2005**

The VAWA prohibits the Canton Housing Authority (CHA) to evict or remove assistance from certain persons (including members of the victim’s immediate family) living in the CHA developments if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking, as described in Section 3 of the U.S. Housing Act of 1937, and amended by the Violence Against Women Reauthorization Act (VAWA) of 2005.

The CHA will accept certification from alleged victims in verifying this claim by a CHA resident.

The VAWA provides “criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of the tenancy or occupancy rights, if the tenant or immediate family member of the tenant’s family is the victim or threatened victim of that abuse.” VAWA further provides that incidents of actual or threatened domestic violence, dating violence, or stalking may not be construed either as serious or repeated violations of the lease by the victim of such violence or as good cause for terminating the tenancy or occupancy rights of the victim of such violence.

VAWA does not limit the CHA’s authority to terminate the tenancy of any tenant if the CHA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property.

When a tenant family is facing lease termination because of the actions of a tenant, household member, guest, or other person under the tenant’s control and a tenant or immediate family member of the tenant’s family claims that she or he is the victim of such actions and that the actions are related to domestic violence, dating violence, or stalking, the CHA will require the individual to submit documentation affirming that claim.

The documentation must include two elements:

- A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking.
- One of the following:
  - A police or court record documenting the actual or threatened abuse

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

The required certification and supporting documentation must be submitted to the CHA within fourteen (14) business days after the individual claiming victim status receives a request for such certification. The CHA, owner or manager will be aware that the delivery of the certification form to the tenant in response to an incident via mail may place the victim at risk, e.g., the abuser may monitor the mail. The CHA may require that the tenant come into the office to pick up the certification form and will work with tenants to make delivery arrangements that do not place the tenant at risk. This 14-day deadline may be extended at the CHA's discretion. If the individual does not provide the required certification and supporting documentation within fourteen (14) business days, or the approved extension period, the CHA may proceed with assistance termination.

The CHA also reserves the right to waive these victim verification requirements and accept only a self-certification from the victim if the CHA deems the victim's life to be in imminent danger.

In extreme circumstances when the CHA can demonstrate an actual and imminent threat to other participants or those employed at or providing service to the property if the participant's (including the victim's) tenancy is not terminated, the CHA will bypass the standard process and proceed with the immediate termination of the family's assistance.

The CHA will request that a victim of the domestic violence described in this policy to provide evidence or certify to the CHA that the incident or incidents of abuse are bona fide

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

The CHA's five-year and Annual Plan contains information regarding any goals, activities, objectives, policies, or programs of the CHA that are intended to support assist victims of domestic violence described above.

## **Required Attachment C: Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

### **Advisory Board FYE 2011**

1. Mr. Joe Chambers  
375-D Boyd Street  
Canton, MS 39046
2. Ms. Shirley Bloodsaw  
311-E Welch Street  
Canton, MS 39046
3. Ms. Nettie Ratliff  
359-E Welch Street  
Canton, MS 39046
4. Ms. Denise Spencer  
379-E Welch Street  
Canton, MS 39046
5. Ms. Rena Matlock  
204-B Dobson Avenue  
Canton, MS 39046
6. Ms. Delosie Brown  
843-C Welch Street  
Canton, MS 39046

#### **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 Thursday, April 14, 2011 at 3:00 P. M.**

**There were no challenged elements or comments 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: Canton Housing Authority	Grant Type and Number Capital Fund Program Grant No: MS26P061501-11 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 7-2011 FFY of Grant Approval: 7-2011	

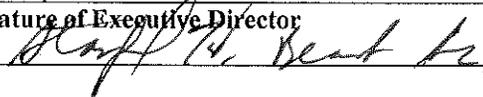
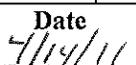
Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending:       Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <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>	72,000			
3	1408 Management Improvements	38,000			
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit	2,500			
6	1415 Liquidated Damages				
7	1430 Fees and Costs	50,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	20,000			
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	58,046			
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>						
PHA Name: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P061501-11 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:7-2011 FFY of Grant Approval: 7-2011	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:                      ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <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)	240,546				
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			Signature of Public Housing Director			
						
Date			Date			
7/14/11						

<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>	
PHA Name: Canton Housing Authority	Grant Type and Number Capital Fund Program Grant No: MS26P061501-10 Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 7-2010 FFY of Grant Approval: 7-2010	

Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 12/31/10       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>	40,000	40,000	40,000	40,000
3	1408 Management Improvements	38,000	38,000	38,000	-0-
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit	2,500	2,500	2,500	-0-
6	1415 Liquidated Damages				
7	1430 Fees and Costs	17,500	17,500	4,000	4,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	125,000	-0-	-0-	-0-
12	1470 Non-dwelling Structures	-0-	122,724	-0-	-0-
13	1475 Non-dwelling Equipment	19,822	19,822	18,229.95	18,229.95
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> Canton Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P061501-10 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:7-2010</b> <b>FFY of Grant Approval: 7-2010</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10		<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)	242,822	240,546	102,729.95	62,229.95
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> <i>[Signature]</i>		<b>Date</b> 4/14/11		<b>Signature of Public Housing Director</b> <i>[Signature]</i>	
				<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.





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: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P061501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 7-2009 FFY of Grant Approval: 7-2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10 <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	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	40,000	152,017.07	152,017.07	40,000	
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit	2,500	2,500	2,500	2,500	
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	10,000	10,000	-0-	-0-	
10	1460 Dwelling Structures	191,105	78,304.93	78,304.93	49,504.93	
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.

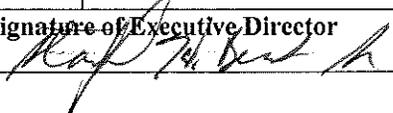
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<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>							
PHA Name: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P061501-09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:7-2009 FFY of Grant Approval: 7-2009		
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10 <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)	243,605	242,822	232,822	92,004.93		
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 4/14/11		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.

Part II: Supporting Pages								
PHA Name: Canton Housing Authority			Grant Type and Number Capital Fund Program Grant No: MS26P061501-09 CFFP (Yes/No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 7-2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
MS061 HA-WIDE	Operations	1406		40,000	152,017.07	152,017.07	40,000	
MS061 HA-WIDE	Annual Audit for all CFP Funds	1411		2,500	2,500	2,500	2,500	
MS061 HA-WIDE	A/E - Consultant Services	1430		35,000	-0-	-0-	-0-	
MS061 HA-WIDE	Paint and Repair Fencing at 002 and New for 001 - Cont. Program from CFP 501S- 09	1450	2 Sites	5,000	-0-	-0-	-0-	
MS061 HA-WIDE	Clean and Strip Parking Lots	1450	2 Sites	10,000	10,000	-0-	-0-	
MS061 HA-WIDE	Install New Screen Doors - Cont. Program from CFP 501S-09	1460	150 Units	12,800	12,800	12,800	-0-	
MS061 HA-WIDE	Install New Vinyl Siding - Cont. Program from CFP 501S-09	1460	34 Bldgs.	9,000	-0-	-0-	-0-	
MS061 HA-WIDE	Install New Windows and Security Screens - Cont. Program from CFP 501S- 09	1460	150 Units	129,305	49,504.93	49,504.93	49,504.93	
MS061-002	Foundation Repair	1460	1 Bldg.	-0-	16,000	-0-	-0-	
			TOTAL	243,605	242,822	216,822	92,004.93	

<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  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>				FFY of Grant: 7-2009 FFY of Grant Approval: 7-2009	
PHA Name: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26S061501-09 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:1 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/10 <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
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	-0-	37,750	37,750	37,702
8	1440 Site Acquisition				
9	1450 Site Improvement	21,300	40,000	40,000	40,000
10	1460 Dwelling Structures	287,055	230,605	230,605	230,605
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> Canton Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26S061501-09 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:</b> 7-2009 <b>FFY of Grant Approval:</b> 7-2009	
<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: 12/31/10 <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)	308,355	308,355	308,355	308,307
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> 4/14/11		<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.





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: 7/2008 FFY of Grant Approval: 7/2008	
PHA Name: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P06150108 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:2 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:12/31/10 <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
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	40,000	40,000	40,000	40,000
3	1408 Management Improvements	38,000	38,000	38,000	29,100.01
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit	2,500	2,500	2,500	2,500
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4,000	4,000	4,000	4,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	116,105	149,880	149,880	149,880
11	1465.I Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	-0-	9,225	9,225	-0-
13	1475 Non-dwelling Equipment	43,000	-0-	-0-	-0-
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.I 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>						
PHA Name: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P06150108 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:7/2008 FFY of Grant Approval: 7/2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:12/31/10 <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)	243,605	243,605	243,605	225,480.01	
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 <i>[Signature]</i>			Date 4/14/11		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 CFF Grants for operations.  
<sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Canton Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P06150108 CFPP (Yes/ No): Replacement Housing Factor Grant No:			Federal FYP of Grant: 7/2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
MS061 HA-Wide	Operations	1406		40,000	40,000	40,000	40,000	
MS061 HA-Wide	Police Patrol Services	1408		38,000	38,000	38,000	29,100.01	
MS061 HA-Wide	Annual Audit for All CFP Funds	1411		2,500	2,500	2,500	2,500	
MS061 HA-Wide	Modernization Coordinator and A/E Services	1430		4,000	4,000	4,000	4,000	
MS061 HA-Wide	Replace Soffitt and Facia	1460	34 Bldgs	91,105	95,000	95,000	95,000	
MS061 HA-Wide	Install Locks in Storm Doors	1460	300 Doors	-0-	15,000	15,000	15,000	
MS061 HA-Wide	Foundation Repairs	1460	2 Bldgs.	25,000	-0-	-0-	-0-	
MS061 HA-Wide	Install TV Cable in each Unit	1460	150 Units	-0-	39,880	39,880	39,880	
MS061-002	Increase the Height of Fence around the Maint. Shop	1470	Fence	-0-	9,225	9,225	-0-	
MS061 HA-Wide	Install Cameras	1475	2 Sites	43,000	-0-	-0-	-0-	
	<b>TOTAL</b>			243,605	243,605	243,605	225 480.01	

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

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



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

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

<b>Part I: Summary</b>						
PHA Name/Number <b>Canton Housing Authority MS26P090</b>		Locality (City/County & State) <b>Canton, Madison County, MS</b>			<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
A.	Development Number and Name	Work Statement for Year 1 FFY 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	25,000	25,000	-0-	-0-
C.	Management Improvements		57,000	38,000	38,000	38,000
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other		18,500	18,500	18,500	18,500
G.	Operations		40,000	40,000	40,000	40,000
H.	Demolition		100,046	119,046	144,046	144,046
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		240,546	240,546	240,546	240,546
L.	Total Non-CFP Funds					
M.	Grand Total		240,546	240,546	240,546	240,546

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







