

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</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.</p> <p>(a) None</p> <p>(b) Administrative Office Winbrook 223 Martin Luther King Blvd. White Plain, NY 10601</p> <p>Lakeview Apartments 120 Lake Street White Plains, NY 10604</p> <p>Schylor/Dekalb Apartments 86 De Kalb Ave White Plains, NY 10605</p> <p>Also available information for the following items at the locations listed above:</p> <ol style="list-style-type: none"> 1. Eligibility, Selection and Admission Policies, including Deconcentration and Wait List Procedures. 2. Financial Resources 3. Rent Determinations 4. Operation and Management Procedures 5. Grievance Procedures 6. Designated Housing for Elderly and Disable Families (None are planned for the upcoming year) 7. Community Service and Self-Sufficiency 8. Safety and Crime Prevention 9. Pet Policy 10. Civil Rights Certifications 11. Fiscal Year Audit 12. Asset Management Plans 13. Violence Against Women Act (VAWA)
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>The Winbrook site is being analyzed by a development partner for funding incentives to convert the existing 450 public housing units to mixed used and retail, Environmental studies will commence in the Spring 2011</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>Attachment NY042a02 – CFP2011 Annual Statement Attachment NY042c02 – CFP2010 Progress and Evaluation Report Attachment NY042d02 – CFP2009 Progress and Evaluation Report Attachment NY042e02 – CFRG2009 Progress and Evaluation Report Attachment NY042f02 – CFRC2009 (NY04200000309R) Progress and Evaluation Report Attachment NY042g02 – CFRC2009 (NY04200000109E) Progress and Evaluation Report Attachment NY042h02 RAB Comments Attachment NY042i02 - VAWA Attachment NY042j02 -- Housing Needs Attachment NY042k02 – Strategy for Addressing Housing Needs</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>Attachment NY042b02</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><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>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <table border="1" data-bbox="178 262 1356 703"> <thead> <tr> <th colspan="8">Housing Needs of Families in the Jurisdiction by Family Type</th> </tr> <tr> <th>Family Type</th> <th>Overall</th> <th>Affordability</th> <th>Supply</th> <th>Quality</th> <th>Access-ibility</th> <th>Size</th> <th>Loca-tion</th> </tr> </thead> <tbody> <tr> <td>Income <= 30% of AMI</td> <td>2,052</td> <td>5</td> <td>5</td> <td>5</td> <td>5</td> <td>5</td> <td>5</td> </tr> <tr> <td>Income >30% but <=50% of AMI</td> <td>1,145</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>Income >50% but <80% of AMI</td> <td>504</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>Elderly</td> <td>760</td> <td>5</td> <td>5</td> <td>4</td> <td>5</td> <td>4</td> <td>4</td> </tr> <tr> <td>Families with Disabilities</td> <td>840</td> <td>5</td> <td>5</td> <td>4</td> <td>5</td> <td>4</td> <td>4</td> </tr> <tr> <td>Black NH</td> <td>866</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>Hispanic</td> <td>1,808</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>White-Non-Hispanic</td> <td>1,773</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>Asian NH</td> <td>214</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>Pacific Island. NH</td> <td>0</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> <tr> <td>Native Amer. NH</td> <td>4</td> <td>5</td> <td>5</td> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> </tbody> </table> <p>* U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset</p>	Housing Needs of Families in the Jurisdiction by Family Type								Family Type	Overall	Affordability	Supply	Quality	Access-ibility	Size	Loca-tion	Income <= 30% of AMI	2,052	5	5	5	5	5	5	Income >30% but <=50% of AMI	1,145	5	5	4	4	4	4	Income >50% but <80% of AMI	504	5	5	4	4	4	4	Elderly	760	5	5	4	5	4	4	Families with Disabilities	840	5	5	4	5	4	4	Black NH	866	5	5	4	4	4	4	Hispanic	1,808	5	5	4	4	4	4	White-Non-Hispanic	1,773	5	5	4	4	4	4	Asian NH	214	5	5	4	4	4	4	Pacific Island. NH	0	5	5	4	4	4	4	Native Amer. NH	4	5	5	4	4	4	4
Housing Needs of Families in the Jurisdiction by Family Type																																																																																																									
Family Type	Overall	Affordability	Supply	Quality	Access-ibility	Size	Loca-tion																																																																																																		
Income <= 30% of AMI	2,052	5	5	5	5	5	5																																																																																																		
Income >30% but <=50% of AMI	1,145	5	5	4	4	4	4																																																																																																		
Income >50% but <80% of AMI	504	5	5	4	4	4	4																																																																																																		
Elderly	760	5	5	4	5	4	4																																																																																																		
Families with Disabilities	840	5	5	4	5	4	4																																																																																																		
Black NH	866	5	5	4	4	4	4																																																																																																		
Hispanic	1,808	5	5	4	4	4	4																																																																																																		
White-Non-Hispanic	1,773	5	5	4	4	4	4																																																																																																		
Asian NH	214	5	5	4	4	4	4																																																																																																		
Pacific Island. NH	0	5	5	4	4	4	4																																																																																																		
Native Amer. NH	4	5	5	4	4	4	4																																																																																																		
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The White Plains Housing Authority maintains a 99% occupancy rate. This high occupancy rate ensures that as many families as possible are being served. The ten year strategic plan being devised will take into account the needs of the families in the jurisdiction.</p>																																																																																																								
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>A. Substantial Deviation from the 5-year Plan:</p> <ul style="list-style-type: none"> Any change to the Mission Statement; 50% deletion from or addition to the goals and objectives as a whole; and 50% or more decrease in the quantifiable measure of any individual goal or objective. <p>B. Significant Amendment or Modification to the Annual Plan:</p> <ul style="list-style-type: none"> Any increase or decrease over 50% in the funds projected in the Financial Resource Statement; Any change in the policy or procedure that requires a regulatory 30-day posting; Any submission to HUD that requires a separate notification to residents, such as Homeownership programs; and Any change inconsistent with the local, approved Consolidated Plan. 																																																																																																								
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>																																																																																																								

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.

Privacy Act Notice. The United States Department of Housing and Urban Development 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. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.
2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to

support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.

3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.
9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the

resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.

11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of:
 - 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking;
 - 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and
 - 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.**
 - 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and
 - 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act:
 - (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and
 - (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent that **approved and/or pending** demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA:
 - 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert;
 - 2) An analysis of the projects or buildings required to be converted; and
 - 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>
- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by

the agency or for which the PHA has applied or will apply for approval.

- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those

needs. (**Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (**Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (**Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.**)
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (**Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.**)
- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (**Note: Standard and Troubled PHAs complete annually.**)

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Part I: Summary	
PHA Name: WHITE PLAINS HOUSING AUTHORITY	Grant Type and Number NY36P04250111 Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:
	FFY of Grant: 2011 FFY of Grant Approval: 2011

Type of Grant

Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for period Ending: 9/30/2010
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) ³	\$274,505.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$25,000.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$134,892.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$227,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$208,000.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$398,702.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$35,000.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$130,935.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$1,434,034.00	\$0.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Part I: Summary				
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P04250111 Date of CFFP: Replacement Housing Factor Grant No:		FFY of Grant: 2011 FFY of Grant Approval: 2011
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1
		Original	Revised 2	Obligated Expended
Signature of Executive Director & Date: <i>Mark Carter 1/18/2011</i>		Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Part II: Supporting Pages

PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP:		NY36P04250111 CFFP (Yes/No):	Federal FFY Grant : 2011			
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Operations	1406						
	Operations			\$274,505.00				
	Total 1406			\$274,505.00				
	Management Improvements	1408						
	Central Security, Training, Uniforms, Travel,			\$25,000.00				
	Total 1406			\$25,000.00				
	Administration	1410						
	Central Admin Salaries			\$29,732.00				
	Central Modernization Coordinator			\$101,160.00				
	Central Per Diem Accountant			\$4,000.00				
	Total 1410			\$134,892.00				
	Fees and Costs	1430						
NY042-00001	A/E Fees			\$45,000.00				
NY042-00003	A/E Fees			\$1,000.00				
NY042-00006	A/E Fees			\$30,000.00				
	Central Management Consultant			\$50,000.00				
	Central Sundry			\$1,000.00				
NY042-0006	Development Consultant Fees			\$100,000.00				
	Total 1430			\$227,000.00				
	Page Subtotal			\$661,397.00				

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: WHITE PLAINS HOUSING AUTHORITY				Federal FFY of Grant: NY36P04250111	
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Reason for Revised Target Dates (1)		
1406	7/14/2013	7/14/2015			
1408	7/14/2013	7/14/2015			
1410	7/14/2013	7/14/2015			
1430	7/14/2013	7/14/2015			
1450	7/14/2013	7/14/2015			
1460	7/14/2013	7/14/2015			
1465	7/14/2013	7/14/2015			
1475	7/14/2013	7/14/2015			

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

Capital Fund Program Five-Year Action Plan

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 4/30/2011

Part I: Summary						
PHA Name/Number White Plains HA, NY042		Locality (City/County & State) White Plains, Westchester, NY		<input checked="" type="checkbox"/> Original		<input type="checkbox"/> Revision No. _____
A.	Development Number and Name	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5
	White Plains Housing Authority NY042	2011	FFY <u>2012</u>	FFY <u>2013</u>	FFY <u>2014</u>	FFY <u>2015</u>
B.	NY042-0001	Annual	201,000.00	99,000.00	310,000.00	204,000.00
	NY042-0003	Statement	211,000.00	539,373.00	152,834.00	453,000.00
	NY042-0006		141,000.00	94,000.00	310,000.00	114,034.00
	Total Physical Improvements:			\$553,000.00	\$732,373.00	\$772,834.00
C.	Management Improvements		25,000.00	20,000.00	20,000.00	40,000.00
D.	PHA-Wide Non-Dwelling Structures and Equipment		190,000.00	71,661.00	0.00	0.00
E.	Administration		135,746.00	137,000.00	137,000.00	137,000.00
F.	Other		255,024.00	214,000.00	245,200.00	227,000.00
G.	Operations		275,264.00	259,000.00	259,000.00	259,000.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds		1,434,034.00	1,434,034.00	1,434,034.00	1,434,034.00
L.	Total Non-CFP Funds					
M.	Grand Total		1,434,034.00	1,434,034.00	1,434,034.00	1,434,034.00

Capital Fund Program Five-Year Action Plan

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

OMB No. 2577-0226

Expires 4/30/2011

Part I: Summary

PHA Name/Number White Plains HA, NY042		Locality (City/County & State) White Plains, Westchester, NY		<input checked="" type="checkbox"/> Original		<input type="checkbox"/> Revision No. _____	
A.	Development Number and Name	Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5	
	White Plains Housing Authority NY042	2011	FFY <u>2012</u>	FFY <u>2013</u>	FFY <u>2014</u>	FFY <u>2015</u>	
B.	NY042-0001	Annual					
	NY042-0003	Statement					
	NY042-0006						
	Total Physical Improvements:		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
C.	Management Improvements						
D.	PHA-Wide Non-Dwelling Structures and Equipment						
E.	Administration						
F.	Other						
G.	Operations						
H.	Demolition						
I.	Development						
J.	Capital Fund Financing - Debt Service						
K.	Total CFP Funds		0.00	0.00	0.00	0.00	0.00
L.	Total Non-CFP Funds						
M.	Grand Total		0.00	0.00	0.00	0.00	0.00

Capital Fund Program Five-Year Action Plan

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

Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2011	Work Statement for Year <u>2012</u>			Work Statement for Year <u>2013</u>		
	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	Central 1406 Operations		\$275,264.00	Central 1406 Operations		\$259,000.00
Annual	1408 Management Improvements			1408 Management Improvements		
Statement	Central Security/Clerk/Training/Travel		\$25,000.00	Central Security/Clerk/Training/Travel		\$20,000.00
	1410 Administration			1410 Administration		
	Central Admin Salaries		\$18,701.00	Central Admin Salaries		\$20,000.00
	Central Mod. Coordinator		\$113,045.00	Central Mod. Coordinator		\$113,000.00
	Central Per Diem Accountant		\$4,000.00	Central Per Diem Accountant		\$4,000.00
	1430 Fees & Costs			1430 Fees & Costs		
	NY042-0006 A/E Services		\$61,213.00	NY042-0001 A/E Services		\$10,000.00
	NY042-0001 A/E Services		\$43,295.00	NY042-0003 A/E Services		\$60,000.00
	NY042-0003 A/E Services		\$44,855.00	NY042-0006 A/E Services		\$10,000.00
	Central Management Consultant Fee		\$71,661.00	NY042-0006 Development Consultant Fees		\$100,000.00
	Central Sundry		\$1,000.00	Central Management Consultant Fee		\$18,000.00
	NY042-0006 Development Consultant Fees		\$18,000.00	Central Sundry		\$1,000.00
	1450 Site Improvement			1450 Site Improvement		
	NY042-0001 Landscaping/Sidewalks/Paving		\$10,000.00	NY042-0001 Site Improvements		\$20,000.00
	NY042-0003 Landscaping/Sidewalks/Paving		\$20,000.00	NY042-0003 Site Improvements		\$15,000.00
	NY042-0006 Landscaping/Sidewalks/Paving		\$30,000.00	NY042-0006 Site Improvements		\$15,000.00
	1460 Dwelling Structures					
	NY042-0001 Roofs		\$100,000.00			
	NY042-0003 Roofs		\$100,000.00			
	Subtotal of Estimated Cost		\$ See Page 4	Subtotal of Estimated Cost		\$ See Pg 4

Capital Fund Program Five-Year Action Plan

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

Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2011	Work Statement for Year <u>2012</u> FFY			Work Statement for Year <u>2013</u>		
	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	Continued from page 3			Continued from page 3		
Annual Statement	1460 Dwelling Structures (con't)			1460 Dwelling Structures		
	NY042-0006 Roofs		\$50,000.00	NY042-0001 Paint/Stucco Building Façade		\$79,000.00
	NY042-0001 Exterior pointing (lintels, sills)		\$25,000.00	NY042-0003 Paint/Stucco Building Façade		\$79,000.00
	NY042-0003 Exterior pointing (lintels, sills)		\$25,000.00	NY042-0006 Paint/Stucco Building Façade		\$79,000.00
	NY042-0006 Exterior pointing (lintels, sills)		\$15,000.00	NY042-0003 New Windows		\$445,373.00
	NY042-0001 Boilers		\$46,000.00			
	NY042-0003 Boilers		\$46,000.00	1465 Dwelling Equipment		
	NY042-0006 Boilers		\$46,000.00	NY042-0001 Stoves / Refrigerators		\$5,000.00
	NY042-0001 Replace Windows		\$20,000.00	NY042-0003 Stoves / Refrigerators		\$5,000.00
	NY042-0003 Replace Windows		\$20,000.00	NY042-0006 Stoves / Refrigerators		\$5,000.00
	1465 Dwelling Equipment			1475 Nondwelling Equipment		
	NY042-0001 Stoves / Refrigerators		\$5,000.00	Central Equip./Vehicles		\$71,661.00
	NY042-0003 Stoves / Refrigerators		\$5,000.00			
	NY042-0006 Stoves / Refrigerators		\$5,000.00			
	1475 Nondwelling Equipment					
	Central Equip./Vehicles/Bldg System Equip		\$90,000.00			
	Central Office upgrade heating system		\$100,000.00			
	Subtotal of Estimated Cost		\$1,434,034.00	Subtotal of Estimated Cost		\$1,434,034.00

Part I: Summary			
PHA Name: WHITE PLAINS HOUSING AUTHORITY	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Grant Type and Number Capital Fund Program Grant No: Date of CFFP:</td> <td style="width:50%;">NY36P04250110 Replacement Housing Factor Grant No:</td> </tr> </table>	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	NY36P04250110 Replacement Housing Factor Grant No:
Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	NY36P04250110 Replacement Housing Factor Grant No:		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>FFY of Grant: CFP2010</td> </tr> <tr> <td>FFY of Grant Approval: CFP2010</td> </tr> </table>	FFY of Grant: CFP2010	FFY of Grant Approval: CFP2010
FFY of Grant: CFP2010			
FFY of Grant Approval: CFP2010			

Type of Grant

Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for period Ending: 9/30/2010
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) 3	\$243,142.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$20,000.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$134,892.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$141,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$840,000.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment - Nonexpandable	\$25,000.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$30,000.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities 4	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$1,434,034.00	\$0.00	\$0.00	\$0.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Part I: Summary				
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36P04250110 Date of CFFP: Replacement Housing Factor Grant No:		FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant				
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 9/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director & Date: <i>Mark Carter, 4/18/2011</i>		Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Part II: Supporting Pages

PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP:		NY36P04250110 CFFP (Yes/No):		Federal FFY Grant : 2010		
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Operations	1406						
	Operations			\$243,142.00				
	Total 1406			\$243,142.00				
	Management Improvements	1408						
	Central Security, Training, Uniforms, Travel			\$20,000.00				
	Total 1406			\$20,000.00				
	Administration	1410						
	Central Admin Salaries			\$33,732.00				
	Central Modernization Coordinator			\$101,160.00				
	Total 1410			\$134,892.00				
	Fees and Costs	1430						
NY042-00001	A/E Fees			\$55,000.00				
NY042-00003	A/E Fees			\$15,000.00				
NY042-00006	A/E Fees			\$20,000.00				
	Central Management Consultant			\$50,000.00				
	Central Sundry			\$1,000.00				
	Total 1430			\$141,000.00				
	Page Subtotal			\$539,034.00				

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP:		NY36P04250110 CFFP (Yes/No):		Federal FFY Grant : 2010		
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Dwelling Structures	1460						
NY042-0001	Apartment Renovations			\$680,000.00				
NY042-0001	Apartment Painting			\$10,000.00				
NY042-0003	Apartment Painting			\$5,000.00				
NY042-0006	Apartment Painting			\$25,000.00				
NY042-0003	Apt. Doors, Locks & Hardware			\$85,000.00				
NY042-0006	Replacement Compactor Rm. A/C Units			\$15,000.00				
NY042-0001	Gas Meter			\$10,000.00				
NY042-0003	Hot Water Heaters			\$10,000.00				
	Total 1460			\$840,000.00				
	Dwelling Equipment	1465						
NY042-0001	Stoves / Refrigerators			\$5,000.00				
NY042-0003	Stoves / Refrigerators			\$5,000.00				
NY042-0006	Stoves / Refrigerators			\$15,000.00				
	Total 1465			\$25,000.00				
	Non-Dwelling Equipment	1475						
	Vehicles			\$30,000.00				
	Total 1475			\$30,000.00				
	Page Subtotal			\$895,000.00				
	Total CFP 2010			\$1,434,034.00				

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

2 To be completed for the Performance and Evaluation Report.

Part I: Summary	
PHA Name: WHITE PLAINS HOUSING AUTHORITY	Grant Type and Number NY36P04250109 Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:
	FFY of Grant: CFP2009 FFY of Grant Approval: CFP2009

Type of Grant

Original Annual Statement
 Reserved for Disasters/Emergencies
 Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for period Ending: 9/30/2010
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) 3	\$247,198.00	\$247,198.00	\$147,198.00	\$147,198.00
3	1408 Management Improvements	\$20,000.00	\$10,000.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$84,747.00	\$84,747.00	\$29,587.00	\$22,005.87
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$259,157.00	\$259,157.00	\$140,125.00	\$69,691.62
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$34,400.00	\$6,000.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$802,479.00	\$840,879.00	\$769,533.00	\$383,455.12
11	1465.1 Dwelling Equipment - Nonexpandable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities 4	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$1,447,981.00	\$1,447,981.00	\$1,086,443.00	\$622,350.61
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

\$0.00

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

Part I: Summary				
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36S04250109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 Stimulus FFY of Grant Approval: 2009 Stimulus
Type of Grant				
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 9/30/10 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1
		Original	Revised 2	Obligated Expended
Signature of Executive Director & Date: <i>Mark Carter 1/18/2011</i>		Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Part II: Supporting Pages		Grant Type and Number		NY36P04250109		Federal FFY Grant :		
PHA Name:		Capital Fund Program Grant No:		CFFP (Yes/No):		2009		
WHITE PLAINS HOUSING AUTHORITY		Date of CFFP:						
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Operations	1406						
	Operations			\$247,198.00	\$247,198.00	\$147,198.00	\$147,198.00	60% Completed
	Total 1406			\$247,198.00	\$247,198.00	\$147,198.00	\$147,198.00	
	Management Improvements	1408						
	Security, Training, Uniforms, Travel			\$20,000.00	\$10,000.00	\$0.00	\$0.00	0% Completed
	Total 1406			\$20,000.00	\$10,000.00	\$0.00	\$0.00	
	Administration	1410						
	Admin Salaries			\$29,587.00	\$29,587.00	\$29,587.00	\$22,005.87	74% Completed
	Modernization Coordinator			\$51,160.00	\$51,160.00	\$0.00	\$0.00	0% Completed
	Per Diem Accountant			\$4,000.00	\$4,000.00	\$0.00	\$0.00	0% Completed
	Total 1410			\$84,747.00	\$84,747.00	\$29,587.00	\$22,005.87	
	Fees and Costs	1430						
NY042-00001	A/E Fees			\$65,125.00	\$65,125.00	\$65,125.00	\$46,741.62	72% Completed
NY042-00006	Management Consultant			\$18,000.00	\$18,000.00	\$0.00	\$0.00	0% Completed
NY042-00006	Master Development Funding			\$75,000.00	\$75,000.00	\$75,000.00	\$22,950.00	31% Completed
NY042-00006	Development Consultant			\$100,000.00	\$100,000.00	\$0.00	\$0.00	0% Completed
	Sundry			\$1,032.00	\$1,032.00	\$0.00	\$0.00	0% Completed
	Total 1430			\$259,157.00	\$259,157.00	\$140,125.00	\$69,691.62	
	Page Subtotal			\$611,102.00	\$601,102.00	\$316,910.00	\$238,895.49	

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

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number NY36P04250109 Capital Fund Program Grant No: Date of CFFP:		CFFP (Yes/No):		Federal FFY Grant : 2009		
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Site Improvements	1450						
NY042-00001	Site Work Improvements			\$10,800.00	\$2,000.00	\$0.00	\$0.00	0% Completed
NY042-00003	Site Work Improvements			\$10,800.00	\$2,000.00	\$0.00	\$0.00	0% Completed
NY042-00006	Site Work Improvements			\$12,800.00	\$2,000.00	\$0.00	\$0.00	0% Completed
	Total 1450			\$34,400.00	\$6,000.00	\$0.00	\$0.00	
	Dwelling Structures	1460						
NY042-00001	Apt. Doors & Hardware			\$200,000.00	\$207,000.00	\$207,000.00	\$27,045.00	13% Completed
NY042-00001	Apt. & Common Area Painting			\$50,000.00	\$11,000.00	\$11,000.00	\$0.00	0% Completed
NY042-00001	A/C Sleeves			\$60,000.00	\$83,293.00	\$83,293.00	\$33,492.60	40% Completed
NY042-00001	Master Antenna			\$15,000.00	\$11,000.00	\$11,000.00	\$0.00	0% Completed
	Subtotal 120 Lake Street			\$325,000.00	\$312,293.00	\$312,293.00	\$60,537.60	
	Dwelling Structures	1460						
NY042-00003	Stair Treads			\$25,319.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00003	A/C Sleeves			\$70,000.00	\$179,080.00	\$179,080.00	\$134,289.63	75% Completed
NY042-00003	Apt. & Common Area Painting			\$50,000.00	\$21,346.00	\$0.00	\$0.00	0% Completed
NY042-00003	Kitchen Improvements			\$267,160.00	\$267,160.00	\$267,160.00	\$188,627.89	71% Completed
NY042-00003	Master Antenna			\$15,000.00	\$11,000.00	\$11,000.00	\$0.00	0% Completed
	Subtotal 86 DeKalb Ave.			\$427,479.00	\$478,586.00	\$457,240.00	\$322,917.52	
	Page Subtotal			\$786,879.00	\$796,879.00	\$769,533.00	\$383,455.12	

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary			
PHA Name: WHITE PLAINS HOUSING AUTHORITY	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">Grant Type and Number Capital Fund Program Grant No: Date of CFFP:</td> <td style="width:50%;">NY36S04250109 Replacement Housing Factor Grant No:</td> </tr> </table>	Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	NY36S04250109 Replacement Housing Factor Grant No:
Grant Type and Number Capital Fund Program Grant No: Date of CFFP:	NY36S04250109 Replacement Housing Factor Grant No:		
	FFY of Grant: 2009 Stimulus		
	FFY of Grant Approval: 2009 Stimulus		

Type of Grant			
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserved for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 9/30/2010		<input type="checkbox"/> Final Performance and Evaluation Report	

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations (May not to exceed 20% of line 21) ³	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration (may not exceed 10% of line 21)	\$0.00	\$170,563.00	\$170,563.00	\$170,563.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$80,000.00	\$102,608.13	\$102,608.13	\$102,608.13
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvements	\$50,000.00	\$15,242.76	\$15,242.76	\$15,242.76
10	1460 Dwelling Structures	\$1,292,634.00	\$1,366,095.11	\$1,366,095.11	\$1,366,095.11
11	1465.1 Dwelling Equipment - Nonexpandable	\$188,000.00	\$8,625.00	\$8,625.00	\$8,625.00
12	1470 Nondwelling Structures	\$30,000.00	\$42,500.00	\$42,500.00	\$42,500.00
13	1475 Nondwelling Equipment	\$65,000.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	\$0.00	\$0.00	\$0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency (May not to exceed 8% of line 20)	\$0.00	\$0.00	\$0.00	\$0.00
20	Amount of Annual Grant (Sum of lines 2 - 19)	\$1,705,634.00	\$1,705,634.00	\$1,705,634.00	\$1,705,634.00
21	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
22	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

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

Part I: Summary				
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: NY36S04250109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 Stimulus FFY of Grant Approval: 2009 Stimulus
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserved for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for period Ending: 9/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1
		Original	Revised 2	Obligated
Signature of Executive Director & Date: <i>Michael Carter</i> 4/18/2011		Signature of public Housing Director/Office of Native American Programs Administrator & Date:		

Part II: Supporting Pages								
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number NY36S04250109		Federal FFY Grant : 2009 Stimulus				
		Capital Fund Program Grant No:		CFFP (Yes/No):				
		Date of CFFP:						
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Administration	1410						
	Admin Cost.			\$0.00	\$170,563.00	\$170,563.00	\$170,563.00	100% Completed
	Total 1410			\$0.00	\$170,563.00	\$170,563.00	\$170,563.00	
	Fees and Costs	1430						
NY042-00001	A/E Fees			\$35,200.00	\$37,275.65	\$37,275.65	\$37,275.65	100% Completed
NY042-00003	A/E Fees			\$20,800.00	\$41,220.75	\$41,220.75	\$41,220.75	100% Completed
NY042-00006	A/E Fees			\$24,000.00	\$24,111.73	\$24,111.73	\$24,111.73	100% Completed
	Total 1430			\$80,000.00	\$102,608.13	\$102,608.13	\$102,608.13	
	Site Improvements	1450						
NY042-00006	Site Work Improvements			\$25,000.00	\$2,742.76	\$2,742.76	\$2,742.76	100% Completed
NY042-00003	Site Work Improvements			\$12,500.00	\$12,500.00	\$12,500.00	\$12,500.00	100% Completed
NY042-00001	Site Work Improvements			\$12,500.00	\$0.00	\$0.00	\$0.00	No Activity
	Total 1450			\$50,000.00	\$15,242.76	\$15,242.76	\$15,242.76	
	Dwelling Structures	1460						
NY042-00001	Elevator Rehab			\$221,534.00	\$309,200.00	\$309,200.00	\$309,200.00	100% Completed
NY042-00001	Boiler Room Equip. Modernization			\$10,500.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00001	Stair Treatment			\$5,000.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00001	Oil Tank Replacement			\$150,000.00	\$174,200.00	\$174,200.00	\$174,200.00	100% Completed
NY042-00001	Bath/Kitchen Renovations			\$40,000.00	\$162,737.00	\$162,737.00	\$162,737.00	100% Completed
NY042-00001	Painting, Stucco, Closet Doors			\$142,500.00	\$198,476.00	\$198,476.00	\$198,476.00	100% Completed
	Subtotal 120 Lake Street			\$569,534.00	\$844,613.00	\$844,613.00	\$844,613.00	
	Page Subtotal			\$699,534.00	\$1,133,026.89	\$1,133,026.89	\$1,133,026.89	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: WHITE PLAINS HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP:		NY36S04250109 CFFP (Yes/No):		Federal FFY Grant : 2009 Stimulus		
Development Number/Name PHA-wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised (1)	Funds Obligated (2)	Fund Expended (2)	
	Dwelling Structures	1460						
NY042-00003	Boiler Room Equip. Modernization			\$10,500.00	\$10,500.00	\$10,500.00	\$10,500.00	100% Completed
NY042-00003	Stair Treatment			\$5,000.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00003	Painting, Stucco			\$52,500.00	\$458,876.11	\$458,876.11	\$458,876.11	100% Completed
NY042-00003	Doors, Hardware			\$90,000.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00003	Doors			\$125,000.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00003	Doors			\$58,000.00	\$0.00	\$0.00	\$0.00	No Activity
	Subtotal 86 DeKalb Ave.			\$341,000.00	\$469,376.11	\$469,376.11	\$469,376.11	
	Dwelling Structures	1460						
NY042-00006	Boiler Room - Water Heaters			\$60,000.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00006	Stair Treatment			\$60,000.00	\$0.00	\$0.00	\$0.00	No Activity
NY042-00006	Painting			\$209,600.00	\$52,106.00	\$52,106.00	\$52,106.00	100% Completed
NY042-00006	Boiler Room Equip., Modernization			\$52,500.00	\$0.00	\$0.00	\$0.00	No Activity
	Subtotal Winbrook Apts.			\$382,100.00	\$52,106.00	\$52,106.00	\$52,106.00	
	Total 1460			\$1,292,634.00	\$1,366,095.11	\$1,366,095.11	\$1,366,095.11	
	Dwelling Equipment	1465						
NY042-00001	Stoves & Refrigerators			\$88,000.00	\$1,380.00	\$1,380.00	\$1,380.00	100% Completed
NY042-00003	Stoves & Refrigerators			\$100,000.00	\$7,245.00	\$7,245.00	\$7,245.00	100% Completed
	Total 1465			\$188,000.00	\$8,625.00	\$8,625.00	\$8,625.00	
	Non Dwelling Structures	1470						
NY042-00006	Windows, Maintenance Area Upgrade			\$30,000.00	\$42,500.00	\$42,500.00	\$42,500.00	100% Completed
	Total 1470			\$30,000.00	\$42,500.00	\$42,500.00	\$42,500.00	100% Completed
	Page Subtotal			\$941,100.00	\$572,607.11	\$572,607.11	\$572,607.11	

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

² To be completed for the Performance and Evaluation Report.

CFP 2009
 Stimulus

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: WHITE PLAINS HOUSING AUTHORITY				Federal FFY of Grant: NY36S04250109	
Development Number Name/PHA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reason for Revised Target Dates (1)
1410	3/17/2010	2/28/2010	3/17/2012	9/30/2010	
1430	3/17/2010	2/28/2010	3/17/2012	9/30/2010	
1450	3/17/2010	2/28/2010	3/17/2012	9/30/2010	
1460	3/17/2010	2/28/2010	3/17/2012	9/30/2010	
1465	3/17/2010	2/28/2010	3/17/2012	9/30/2010	
1470	3/17/2010	2/28/2010	3/17/2012	9/30/2010	
1475	3/17/2010	2/28/2010	3/17/2012	9/30/2010	

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

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

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

Part I: Summary	
PHA Name: White Plains Housing Authority 223 Dr. Martin Luther King Jr. Blvd. White Plains NY, 10601	Grant Type and Number Capital Fund Program Grant No: NY04200000309R Replacement Housing Factor Grant No: Date of CFRC: 09/28/2009 Creation of an Energy Efficient Green Community – Option 2 Moderate Rehabilitation
FFY of Grant: 2009 FFY of Grant Approval: 9/28/2009	

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 ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds		\$0.00		0.00
2	1406 Operations (may not exceed 20% of line 21) ³		\$0.00		0.00
3	1408 Management Improvements		\$0.00		0.00
4	1410 Administration (may not exceed 10% of line 21)		\$178,000.00		\$142,203.90
5	1411 Audit		\$0.00		0.00
6	1415 Liquidated Damages		\$0.00		0.00
7	1430 Fees and Costs		\$178,000.00		\$178,000.00
8	1440 Site Acquisition		\$0.00		0.00
9	1450 Site Improvement		\$0.00		0.00
10	1460 Dwelling Structures		\$1,424,000.00		\$1,222,489.81
11	1465.1 Dwelling Equipment—Nonexpendable		\$0.00		0.00
12	1470 Non-dwelling Structures		\$0.00		0.00
13	1475 Non-dwelling Equipment		\$0.00		0.00
14	1485 Demolition		\$0.00		0.00
15	1492 Moving to Work Demonstration		\$0.00		0.00
16	1495.1 Relocation Costs		\$0.00		0.00
17	1499 Development Activities ⁴		\$0.00		0.00

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

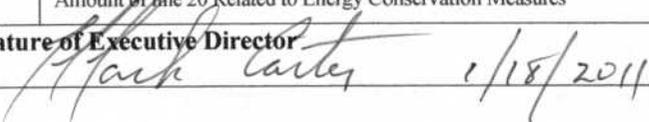
Part I: Summary		
PHA Name: White Plains Housing Authority 223 Dr. Martin Luther King Jr. Blvd. White Plains NY, 10601	Grant Type and Number Capital Fund Program Grant No: NY04200000309R Replacement Housing Factor Grant No: Date of CFRC: 9/28/2009 Creation of an Energy Efficient Green Community – Option 2 Moderate Rehabilitation	FFY of Grant:2009 FFY of Grant Approval: 09/28/2009

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 ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00		\$0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00		\$0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00		\$0.00	0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,780,000.00		\$1,780,000.00	\$1,542,693.71
21	Amount of line 20 Related to LBP Activities	\$0.00		\$0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	\$0.00		\$0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	\$0.00		\$0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	\$0.00		\$0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	\$0.00		\$0.00	0.00

Signature of Executive Director 	Date	Signature of Public Housing Director	Date
---	------	--------------------------------------	------

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

Part II: Supporting Pages								
PHA Name: White Plains Housing Authority 223 Dr. Martin Luther King Jr. Blvd. White Plains NY, 10601			Grant Type and Number Capital Fund Program Grant No: NY04200000309R CFFP (Yes/ No): No - CFRC Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY042000003	Administration	1410						
	WPHA Administration			\$178,000.00		\$178,000.00	\$142,203.90	
	Total 1410			\$178,000.00		\$178,000.00	\$142,203.90	
NY042000003	Fees and Costs	1430						
	Consulting Services			178,000.00		178,000.00	178,000.00	
	Total 1430			\$178,000.00		\$178,000.00	\$178,000.00	
NY042000003	Dwelling Structures	1460						
	Demolition	1460		\$45,000.00		\$45,000.00	\$40,500.00	
	HVAC	1460		\$779,000.00		\$779,000.00	\$701,100.00	
	Plumbing	1460		\$85,000.00		\$85,000.00	\$64,600.00	
	Roof Restoration	1460		\$160,000.00		\$160,000.00	\$136,000.00	
	Electric	1460		\$95,000.00		\$95,000.00	\$85,500.00	
	Photovoltaic System	1460		\$260,000.00		\$260,000.00	\$194,789.81	
	Total 1460			\$1,424,000.00		\$1,424,000.00	\$1,222,489.81	

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

² To be completed for the Performance and Evaluation Report.

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

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

Part I: Summary	
PHA Name: White Plains Housing Authority 223 Dr. Martin Luther King Jr. Blvd. White Plains NY, 10601	Grant Type and Number Capital Fund Program Grant No: NY04200000109E Replacement Housing Factor Grant No: Date of CFRC: 09/28/2009 Capital Funds Elderly & Persons with Disabilities Recovery Competitive Grant
FFY of Grant: 2009 FFY of Grant Approval: 09/28/2009	

Type of Grant
 Original Annual Statement
 Performance and Evaluation Report for Period Ending: 12-31-10
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) ³	\$0.00	\$0.00	\$0.00	0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	\$178,000.00	\$178,000.00	\$178,000.00	112,597.14
5	1411 Audit	\$0.00	\$0.00	\$0.00	0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	0.00
7	1430 Fees and Costs	\$178,000.00	\$235,479.75	\$235,479.75	\$235,479.75
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	0.00
9	1450 Site Improvement	\$50,000.00	\$50,000.00	\$50,000.00	0.00
10	1460 Dwelling Structures	\$1,299,000.00	\$1,299,000.00	\$1,299,000.00	\$862,873.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00	\$0.00	0.00
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	0.00
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	0.00
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	0.00
16	1495.1 Relocation Costs	\$75,000.00	\$17,520.25	\$17,520.25	\$17,520.25
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	0.00

¹ To be completed for the Performance and Evaluation Report.

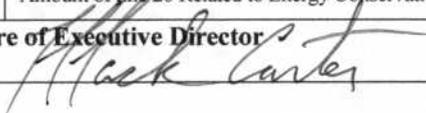
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary					
PHA Name: White Plains Housing Authority 223 Dr. Martin Luther King Jr. Blvd. White Plains NY, 10601	Grant Type and Number Capital Fund Program Grant No: NY04200000109E Replacement Housing Factor Grant No: Date of CFRC: 09/28/2009 Capital Funds Elderly & Persons with Disabilities Recovery Competitive Grant	FFY of Grant:2009 FFY of Grant Approval: 09/28/2009			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no): <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12-31-10 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	\$0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	\$0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	\$0.00	0.00	0.00	0.00
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,780,000.00	1,780,000.00	1,780,000.00	\$1,228,461.14
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00
Signature of Executive Director 		Date 1/18/2011		Signature of Public Housing Director _____	
				Date _____	

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

Part II: Supporting Pages								
PHA Name: White Plains Housing Authority 223 Dr. Martin Luther King Jr. Blvd. White Plains NY, 10601			Grant Type and Number Capital Fund Program Grant No: NY04200000109E CFFP (Yes/ No): No - CFRC Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
NY042000001	Administration	1410						
	WPHA Administration			178,000.00	178,000.00	178,000.00	112,597.14	
	Total 1410			\$178,000.00	\$178,000.00	\$178,000.00	112,597.14	
NY042000001	Fees and Costs	1430						
	Consulting Services			178,000.00	235,479.75	235,479.75	235,479.75	
	Total 1430			\$178,000.00	\$235,479.75	\$235,479.75	\$235,479.75	
NY042000001	Site Improvements	1450						
	Total 1450			\$50,000.00	\$50,000.00	\$50,000.00	0.00	
NY042000001	Dwelling Structures	1460						
	Demolition	1460		\$55,000.00	\$55,000.00	\$55,000.00	54,450.00	
	Woods and Plastics	1460		\$143,929.00	\$143,929.00	\$143,929.00	90,154.00	
	Door Frames and Hardware	1460		\$66,725.00	\$66,725.00	\$66,725.00	66,057.00	
	Finishes	1460		\$307,342.00	\$307,342.00	\$307,342.00	190,552.00	
	Specialties	1460		\$5,564.00	\$5,564.00	\$5,564.00	.00	
	Plumbing	1460		\$107,675.00	\$107,675.00	\$107,675.00	96,907.00	
	Fire Protection	1460		\$47,673.00	\$47,673.00	\$47,673.00	45,289.00	
	HVAC	1460		\$215,968.00	\$215,968.00	\$215,968.00	183,572.00	
	Electric	1460		\$199,124.00	\$199,124.00	\$199,124.00	135,892.00	
	Equipment	1460		\$150,000.00	\$150,000.00	\$150,000.00	0.00	
	Total 1460			\$1,299,000.00	\$1,299,000.00	\$1,299,000.00	862,873.00	
NY042000001	Relocation Costs	1495.1						
	Total 1495.1			\$75,000.00	\$17,520.25	\$17,520.25	\$17,520.25	

Attachment NY042h02

Resident Advisory Board Comments

The White Plains Housing Authority held a public hearing on January 11, 2010 @ 4:30PM to discuss the program work activities. There were no comments from the RAB Resident Advisory Board during the public hearing session.

VAWA PROTECTIONS

Under the Violence Against Women Act (VAWA), public housing residents have the following specific protections, which will be observed by the White Plains Housing Authority:

An incident or incidents or actual or threatened domestic violence, dating violence, or stalking will not be construed as a serious or repeated violation of the lease by the victim or threatened victim of that violence, and shall not in itself be good cause for terminating the assistance, tenancy, or occupancy rights of the victim of such violence.

The Housing Authority may terminate the assistance to remove a lawful occupant or tenant who engages in criminal acts or threatened acts of violence or stalking to family members or others without terminating the assistance or evicting victimized lawful occupants. This is also true even if the household member is not a signatory to the lease. Under VAWA, the White Plains Housing Authority is granted the authority to bifurcate the lease.

The Housing Authority will honor court orders regarding the rights of access or control of the property.

There is no limitation on the ability of the Housing Authority to evict for other good cause unrelated to the incident or incidents of domestic violence, dating violence or stalking, other than the victim may not be subject to a “more demanding standard” than non-victims.

There is no prohibition on the Housing Authority evicting if it “can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant’s (victim’s) tenancy is not terminated.”

Any protections provided by law which give greater protection to the victim are not superseded by these provisions.

The White Plains Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority. Types of acceptable verifications are outlined below, and must be submitted within 14 business days after receipt of the Housing Authority’s written request for verification.

20.2B VERIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE OR STALKING

The White Plains Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority.

- A. **Requirement for Verification.** The law allows, but does not require, the White Plains Housing Authority 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. The Housing Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Housing Authority.

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 (HUD-50066)** - By providing to the Housing Authority a written certification, on the 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 the Housing Authority 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 the Housing Authority a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.
- B. **Time allowed to provide verification/ failure to provide.** An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by the Housing Authority to provide

verification, must provide such verification within 14 business days after receipt of the written 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.

20.2C CONFIDENTIALITY

All information provided under VAWA including the fact that an individual is a victim of domestic violence, dating violence, or stalking, shall be retained in confidence and shall not be entered into any shared database or provided to any related entity except to the extent that the disclosure is:

- A. Requested or consented to by the individual in writing;
- B. Required for used in an eviction proceeding; or
- C. Otherwise required by applicable law.

NY is a due
process state

The White Plains Housing Authority shall provide its tenants notice of their rights under VAWA including their right to confidentiality and the limits thereof.

Housing Needs of Families on the Waiting List

Waiting list type: (select one)

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

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	516		30-40
Extremely low income <=30% AMI	432	83.72	
Very low income (>30% but <=50% AMI)	72	13.95	
Low income (>50% but <80% AMI)	12	2.32	
Families with children	203	39.34	
Elderly families	163	31.59	
Families with Disabilities	64	12.40	
Black NH	198	36.82	
White NH	172	33.33	
Hispanic	136	26.36	
Asian NH	3	0.58	
Pacific Island NH	1	0.19	
Native American NH	6	1.16	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	209	40.50	
2 BR	172	33.33	
3 BR	32	6.20	
4 BR	27	5.23	
5 BR	0	0	
0 BR	76	14.73	

Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? No

Yes

If yes:

How long has it been closed (# of months) 09/2010 2 & 4 Bd. Rm.

Does the PHA expect to reopen the list in the PHA Plan year?

No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes (**Elderly**)

WHITE PLAINS HOUSING AUTHORITY

Strategy for Addressing Housing Needs

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

- ✓ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ✓ Reduce turnover time for vacated public housing units
- ✓ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

Strategy 2: Increase the number of affordable housing units by:

- ✓ Leverage affordable housing resources in the community through the creation of mixed - finance housing

WPHA developed a comprehensive strategy for repositioning its housing assets to meet the affordable housing needs of White Plains and Westchester County. One component of this strategy contemplates revitalization of the Winbrook Apartment Homes. The concept for redevelopment takes advantage of the available zoning and allowable height to reposition the Winbrook community as a downtown neighborhood reconnected to the City's traditional street grid. A development of ten to twelve new buildings stepping from 4 to 15 stories is envisioned. It is the goal that this revitalization creates a continuum of affordability in White Plains with a program that fully integrates the WPHA property into the City of White Plain's track record of redevelopment success. It is anticipated that the existing high-rise residential structures would be demolished in an incremental, phased redevelopment.

The above can only be accomplished with a mixed finance approach to funding. To pull together the layers of required funding sources WPHA engaged a development consultant and a developer partner following the Federal Procurement Guidelines. The Winbrook Apartments, which consists of five, nine story, ninety family housing units are a Federally Funded low income housing site in White Plains, NY 10601.

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

- ✓ Adopt rent policies to support and encourage work

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

- ✓ Employ admissions preferences aimed at families who are working
- ✓ Adopt rent policies to support and encourage work

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

- ✓ Seek designation of public housing for the elderly
- ✓ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ✓ Other: (list below) NEED WORDING

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

- ✓ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

- ✓ Affirmatively market to races/ethnicities shown to have disproportionate housing needs

Reasons for Selecting Strategies

- ✓ Funding constraints
- ✓ Staffing constraints
- ✓ Limited availability of sites for assisted housing
- ✓ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ✓ Influence of the housing market on PHA programs
- ✓ Community priorities regarding housing assistance
- ✓ Results of consultation with local or state government
- ✓ Results of consultation with residents and the Resident Advisory Board

