

**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**

*2011  
CFP Submission*

*Newkirk Housing Authority,*

*Newkirk, OK*

*OK056v01*



<p><b>10.0</b></p>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p>
<p><b>11.0</b></p>	<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> <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>

8.1 Capital Fund Annual Statement/ Performance and Evaluation Report

<b>Part I: Summary</b>					
PHA Name: <b><i>Newkirk Housing Authority</i></b>	<b>Grant Type and Number</b> Capital Fund Grant Number: <b><i>OK56P056501-11</i></b> Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: <b><i>2011</i></b> FFY of Grant Approval: <b><i>2011</i></b>			
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
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>	<b><i>\$500.00</i></b>			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	<b><i>\$500.00</i></b>			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees & Costs	<b><i>\$6,500.00</i></b>			
8	1440 Site Acquisition				
9	1450 Site Improvement	<b><i>\$41,685.00</i></b>			
10	1460 Dwelling Structures	<b><i>\$12,600.00</i></b>			
11	1465.1 Dwelling Equipment – Nonexpendable				
12	1470 Non-Dwelling Structures				
13	1475 Non-Dwelling Equipment	<b><i>\$500.00</i></b>			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Cost				
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 Evaluations Report or a revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grant for Operations.  
<sup>4</sup> RHF funds shall be included here.

8.1 Capital Fund Annual Statement/ Performance and Evaluation Report

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56P056501-11</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2011</b> FFY of Grant Approval: <b>2011</b>	
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					
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)	<b>\$62,285.00</b>				
20	Amount of Annual Grant:: (sum of lines 2 – 19)					
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>Debra J. Falkenberg</i>		Date <b>10/14/10</b>		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 Evaluations Report or a revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grant for Operations.  
<sup>4</sup> RHF funds shall be included here.

### 8.1 Capital Fund Annual Statement/ Performance and Evaluation Report

<i>Part II: Supporting Pages</i>								
<b>PHA Name: <i>Newkirk Housing Authority</i></b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>OK56P056501-11</b> CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2011</b>			
<i>Development Number Name/PHA-Wide Activities</i>	<i>General Description of Major Work Categories</i>	<i>Development Account No.</i>	<i>Quantity</i>	<i>Total Estimated Cost</i>		<i>Total Actual Cost</i>		<i>Status of Work</i>
				<i>Original</i>	<i>Revised<sup>1</sup></i>	<i>Funds Obligated<sup>2</sup></i>	<i>Funds Expended<sup>2</sup></i>	
<b>PHA Wide</b>	<b>Operations</b>	<b>1406</b>		<b>\$500.00</b>				
<b>PHA Wide</b>	<b>Bidding &amp; Advertising</b>	<b>1410</b>		<b>\$500.00</b>				
<b>PHA Wide</b>	<b>A&amp;E Fees &amp; Costs</b>	<b>1430</b>		<b>\$5,000.00</b>				
<b>PHA Wide</b>	<b>Energy Audits</b>	<b>1430</b>		<b>\$1,500.00</b>				
<b>OK056-000001</b>	<b>Landscaping – tree trimming</b>	<b>1450</b>		<b>\$1,000.00</b>				
<b>OK056-000001</b>	<b>Replace sidewalks &amp; curbs</b>	<b>1450</b>	<b>5500 LF</b>	<b>\$40,685.00</b>				
<b>OK056-000001</b>	<b>Replace kitchen cabinets</b>	<b>1460</b>	<b>2 units</b>	<b>\$4,000.00</b>				
<b>OK056-000001</b>	<b>Replace kitchen sinks &amp; faucets</b>	<b>1460</b>	<b>2 units</b>	<b>\$600.00</b>				
<b>OK056-000001</b>	<b>Replace kitchen countertops &amp; backsplashes</b>	<b>1460</b>	<b>2 units</b>	<b>\$1,000.00</b>				
<b>OK056-000001</b>	<b>Replace carpeting &amp; tile</b>	<b>1460</b>	<b>2 units</b>	<b>\$1,000.00</b>				
<b>OK056-000001</b>	<b>Replace appliances</b>	<b>1460</b>	<b>2</b>	<b>\$1,000.00</b>				
<b>OK056-000001</b>	<b>Replace heat &amp; air units</b>	<b>1460</b>	<b>1</b>	<b>\$5,000.00</b>				
<b>PHA Wide</b>	<b>Replace various office equipment</b>	<b>1475</b>		<b>\$500.00</b>				

<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.

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56P056501-10</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2010</b> FFY of Grant Approval: <b>2010</b>	
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: <b>1</b> ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>6/30/10</b> <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total Non- CFP Funds – Reserved Budget 0100	<b>\$43,599.00</b>				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		<b>\$529.00</b>			
3	1408 Management Improvements	<b>\$12,457.00</b>				
4	1410 Administration (may not exceed 10% of line 21)	<b>\$6,299.00</b>	<b>\$1,000.00</b>			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees & Costs		<b>\$6,000.00</b>			
8	1440 Site Acquisition					
9	1450 Site Improvement		<b>\$38,156.00</b>			
10	1460 Dwelling Structures		<b>\$14,600.00</b>			
11	1465.1 Dwelling Equipment – Nonexpendable					
12	1470 Non-Dwelling Structures					
13	1475 Non-Dwelling Equipment		<b>\$2,000.00</b>			
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Cost					
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 Evaluations Report or a revised Annual Statement

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

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

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>					
PHA Name: <b>Newkirk Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Grant Number: <b>OK56P056501-00</b> Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: <b>2010</b> FFY of Grant Approval: <b>2010</b>			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: <b>1</b> ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>6/30/2010</b> <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				
18b	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)	<b>\$62,285.00</b>	<b>\$62,285.00</b>		
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> <small>Signature of Executive Director:</small> 		<b>Date</b> <b>10/14/10</b>	<b>Signature of Public Housing Director</b>		<b>Date</b>

<sup>1</sup>To be completed for the Performance and Evaluation Report  
<sup>2</sup>To be completed for the Performance and Evaluations Report or a revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grant for Operations.  
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8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<i>Part II: Supporting Pages</i>								
<i>PHA Name: <b>Newkirk Housing Authority</b></i>		<i>Grant Type and Number Capital Fund Program Grant No: <b>OK56P056501-10</b> CFFP (Yes/ No): Replacement Housing Factor Grant No:</i>			<i>Federal FFY of Grant: <b>2010</b></i>			
<i>Development Number Name/PHA-Wide Activities</i>	<i>General Description of Major Work Categories</i>	<i>Development Account No.</i>	<i>Quantity</i>	<i>Total Estimated Cost</i>		<i>Total Actual Cost</i>		<i>Status of Work</i>
				<i>Original</i>	<i>Revised<sup>1</sup></i>	<i>Funds Obligated<sup>2</sup></i>	<i>Funds Expended<sup>2</sup></i>	
<i>PHA Wide</i>	<i>Reserved Budget</i>	<i>0100</i>		<i>\$42,599.00</i>	<i>-0-</i>			
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>-0-</i>	<i>\$529.00</i>			
<i>PHA Wide</i>	<i>Management Improvements</i>	<i>1408</i>		<i>\$12,457.00</i>	<i>-0-</i>			
<i>PHA Wide</i>	<i>Bidding &amp; Advertising</i>	<i>1410</i>		<i>\$6,299.00</i>	<i>\$1,000.00</i>			
<i>PHA Wide</i>	<i>A&amp;E Fees &amp; Costs</i>	<i>1430</i>		<i>-0-</i>	<i>\$6,000.00</i>			
<i>PHA Wide</i>	<i>Replace signage</i>	<i>1450</i>		<i>-0-</i>	<i>\$2,000.00</i>			
<i>OK056-000001</i>	<i>Repair/ Replace sidewalks &amp; curbs</i>	<i>1450</i>		<i>-0-</i>	<i>\$34,156.00</i>			
<i>OK056-000001</i>	<i>Replace security lighting</i>	<i>1450</i>		<i>-0-</i>	<i>\$2,000.00</i>			
<i>OK056-000001</i>	<i>Replace tile &amp; carpet in units</i>	<i>1460</i>	<i>2 units</i>	<i>-0-</i>	<i>\$2,000.00</i>			
<i>OK056-000001</i>	<i>Replace kitchen cabinets</i>	<i>1460</i>	<i>2 units</i>	<i>-0-</i>	<i>\$5,000.00</i>			
<i>OK056-000001</i>	<i>Replace kitchen sinks &amp; faucets</i>	<i>1460</i>	<i>2 units</i>	<i>-0-</i>	<i>\$600.00</i>			
<i>OK056-000001</i>	<i>Replace kitchen countertops/ backsplashes</i>	<i>1460</i>	<i>2 units</i>	<i>-0-</i>	<i>\$1,000.00</i>			
<i>OK056-000001</i>	<i>Replace appliances</i>	<i>1460</i>	<i>2</i>	<i>-0-</i>	<i>\$1,000.00</i>			
<i>OK056-000001</i>	<i>Replace heat &amp; air units</i>	<i>1460</i>	<i>1</i>	<i>-0-</i>	<i>\$5,000.00</i>			
<i>PHA Wide</i>	<i>Replace various office equipment</i>	<i>1475</i>		<i>-0-</i>	<i>\$2,000.00</i>			

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

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8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56P056501-09</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2009</b> FFY of Grant Approval: <b>2009</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: <b>6/30/10</b> <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 – Initial Budget					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	<b>\$500.00</b>				
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	<b>\$1,000.00</b>				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees & Costs	<b>\$6,000.00</b>				
8	1440 Site Acquisition					
9	1450 Site Improvement	<b>\$25,529.00</b>				
10	1460 Dwelling Structures	<b>\$3,600.00</b>				
11	1465.1 Dwelling Equipment – Nonexpendable					
12	1470 Non-Dwelling Structures	<b>\$19,500.00</b>				
13	1475 Non-Dwelling Equipment	<b>\$7,000.00</b>				
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Cost					
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 Evaluations Report or a revised Annual Statement

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

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8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>					
PHA Name: <b>Newkirk Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Grant Number: <b>OK56P056501-09</b> Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: <b>2009</b> FFY of Grant Approval: <b>2009</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: <b>6/30/10</b> <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				
18b	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)	<b>\$63,129.00</b>		<b>\$0.00</b>	<b>\$0.00</b>
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				
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25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director:</b> <small>Signature of Executive Director:</small> 		<b>Date</b> <b>10/14/10</b>	<b>Signature of Public Housing Director</b>		<b>Date</b>

<sup>1</sup>To be completed for the Performance and Evaluation Report  
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<i>Part II: Supporting Pages</i>								
<i>PHA Name: <b>Newkirk Housing Authority</b></i>		<i>Grant Type and Number Capital Fund Program Grant No: <b>OK56P056501-09</b> CFFP (Yes/ No): Replacement Housing Factor Grant No:</i>			<i>Federal FFY of Grant: <b>2009</b></i>			
<i>Development Number Name/PHA-Wide Activities</i>	<i>General Description of Major Work Categories</i>	<i>Development Account No.</i>	<i>Quantity</i>	<i>Total Estimated Cost</i>		<i>Total Actual Cost</i>		<i>Status of Work</i>
				<i>Original</i>	<i>Revised<sup>1</sup></i>	<i>Funds Obligated<sup>2</sup></i>	<i>Funds Expended<sup>2</sup></i>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>\$500.00</i>				
<i>PHA Wide</i>	<i>Bidding &amp; Advertising</i>	<i>1410</i>		<i>\$1,000.00</i>				
<i>PHA Wide</i>	<i>A&amp;E fees &amp; Costs</i>	<i>1430</i>		<i>\$6,000.00</i>				
<i>PHA Wide</i>	<i>Replace fencing around compound</i>	<i>1450</i>	<i>500 lf</i>	<i>\$20,000.00</i>				
<i>PHA Wide</i>	<i>Repair/ Replace sidewalks &amp; curbs &amp; parking</i>	<i>1450</i>	<i>691 lf</i>	<i>\$5,529.00</i>				
<i>OK056-000001</i>	<i>Replace carpeting &amp; tile</i>	<i>1460</i>	<i>2 units</i>	<i>\$2,000.00</i>				
<i>OK056-000001</i>	<i>Repair bath enclosures</i>	<i>1460</i>	<i>2 units</i>	<i>\$1,600.00</i>				
<i>PHA Wide</i>	<i>Replace tile in community room</i>	<i>1470</i>	<i>1250 sf</i>	<i>\$7,000.00</i>				
<i>PHA Wide</i>	<i>Replace 1 set of cabinets in community room</i>	<i>1470</i>	<i>1</i>	<i>\$2,500.00</i>				
<i>PHA Wide</i>	<i>Remodel Community Room bathroom</i>	<i>1470</i>	<i>1</i>	<i>\$10,000.00</i>				
<i>PHA Wide</i>	<i>Replace Lawnmower</i>	<i>1475</i>	<i>1</i>	<i>\$5,000.00</i>				
<i>PHA Wide</i>	<i>Replace office computer</i>	<i>1475</i>	<i>1</i>	<i>\$2,000.00</i>				

<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.

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56S056501-09</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2009-S</b> FFY of Grant Approval: <b>2009-S</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: <b>6/30/2010</b> <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 – Initial Budget					
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 & Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	<b>\$68,130.00</b>	<b>\$80,030.00</b>	<b>\$80,030.00</b>	<b>\$80,030.00</b>	
11	1465.1 Dwelling Equipment – Nonexpendable	<b>\$11,900.00</b>	<b>-0-</b>	<b>-0-</b>	<b>-0-</b>	
12	1470 Non-Dwelling Structures					
13	1475 Non-Dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Cost					
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 Evaluations Report or a revised Annual Statement

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

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

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56S056501-09</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2009-S</b> FFY of Grant Approval: <b>2009-S</b>	
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: <b>6/30/2010</b> <input checked="" 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					
18b	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)	<b>\$80,030.00</b>	<b>\$80,030.00</b>	<b>\$80,030.00</b>	<b>\$80,030.00</b>	
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>Debra J. Falkenberg</i>		Date <b>10/14/10</b>		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 Evaluations Report or a revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grant for Operations.  
<sup>4</sup> RHF funds shall be included here.



8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56P056501-08</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2008</b> FFY of Grant Approval: <b>2008</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:    ) <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	
1	Total Non- CFP Funds – Initial Budget					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$1,000.00	-0-	-0-		
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	\$1,000.00	-0-	-0-		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees & Costs	\$6,000.00	\$9,434.00	\$9,434.00	\$9,434.00	
8	1440 Site Acquisition					
9	1450 Site Improvement		\$37,456.61	\$37,456.61	\$37,456.61	
10	1460 Dwelling Structures	\$52,355.00	\$16,333.44	\$16,333.44	\$16,333.44	
11	1465.1 Dwelling Equipment – Nonexpendable					
12	1470 Non-Dwelling Structures					
13	1475 Non-Dwelling Equipment	\$2,870.00	-0-	-0-	-0-	
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Cost					
17	1499 Development Activities <sup>4</sup>					

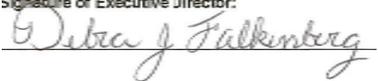
<sup>1</sup>To be completed for the Performance and Evaluation Report

<sup>2</sup>To be completed for the Performance and Evaluations Report or a revised Annual Statement

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

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

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>					
PHA Name: <b>Newkirk Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Grant Number: <b>OK56P056501-08</b> Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: <b>2008</b> FFY of Grant Approval: <b>2008</b>			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:    ) <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				
18b	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)	<b>\$63,225.00</b>	<b>\$63,225.00</b>	<b>\$63,225.00</b>	<b>\$63,225.00</b>
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> <small>Signature of Executive Director:</small> 		<b>Date</b> 10/14/10	<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 Evaluations Report or a revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grant for Operations.  
<sup>4</sup> RHF funds shall be included here.

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<i>Part II: Supporting Pages</i>								
<i>PHA Name: <b>Newkirk Housing Authority</b></i>		<i>Grant Type and Number Capital Fund Program Grant No: <b>OK56P056501-08</b> CFFP (Yes/ No): Replacement Housing Factor Grant No:</i>			<i>Federal FFY of Grant: <b>2008</b></i>			
<i>Development Number Name/PHA-Wide Activities</i>	<i>General Description of Major Work Categories</i>	<i>Development Account No.</i>	<i>Quantity</i>	<i>Total Estimated Cost</i>		<i>Total Actual Cost</i>		<i>Status of Work</i>
				<i>Original</i>	<i>Revised<sup>1</sup></i>	<i>Funds Obligated<sup>2</sup></i>	<i>Funds Expended<sup>2</sup></i>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>\$1,000.00</i>	<i>-0-</i>	<i>-0-</i>	<i>-0-</i>	
<i>PHA Wide</i>	<i>Bidding &amp; Advertising</i>	<i>1410</i>		<i>\$1,000.00</i>	<i>-0-</i>	<i>-0-</i>	<i>-0-</i>	
<i>PHA Wide</i>	<i>A&amp;E fees &amp; Costs</i>	<i>1430</i>		<i>\$6,000.00</i>	<i>\$9,434.95</i>	<i>\$9,434.95</i>	<i>\$9,434.95</i>	<i>100%</i>
<i>PHA Wide</i>	<i>Replace fencing</i>	<i>1450</i>	<i>703 LF</i>	<i>-0-</i>	<i>\$37,456.61</i>	<i>\$37,456.61</i>	<i>\$37,456.61</i>	<i>100%</i>
<i>OK056-000001</i>	<i>New Roofs on 6 duplex buildings</i>	<i>1460</i>	<i>6 bldgs.</i>	<i>\$52,355.00</i>	<i>\$11,574.13</i>	<i>\$11,574.13</i>	<i>\$11,574.13</i>	<i>100%</i>
<i>OK056-000001</i>	<i>Replace carpeting &amp; tile</i>	<i>1460</i>	<i>3 units</i>	<i>-0-</i>	<i>\$4,759.31</i>	<i>\$4,759.31</i>	<i>\$4,759.31</i>	<i>100%</i>
<i>PHA Wide</i>	<i>Office equipment</i>	<i>1475</i>		<i>\$1,225.00</i>	<i>-0-</i>	<i>-0-</i>	<i>-0-</i>	
<i>PHA Wide</i>	<i>Replace PHA Signage</i>	<i>1475</i>		<i>\$1,645.00</i>	<i>-0-</i>	<i>-0-</i>	<i>-0-</i>	

<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.

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>						
PHA Name: <b>Newkirk Housing Authority</b>		Grant Type and Number Capital Fund Grant Number: <b>OK56P056501-07</b> Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: <b>2007</b> FFY of Grant Approval: <b>2007</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:    ) <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	
1	Total Non- CFP Funds – Initial Budget					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$2,659.00	-0-	-0-	-0-	
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	\$1,000.00	\$439.00	\$439.00	\$439.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees & Costs	\$5,196.00	\$7,400.00	\$7,400.00	\$7,400.00	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$50,000.00	\$33,092.00	\$33,092.00	\$33,092.00	
11	1465.1 Dwelling Equipment – Nonexpendable					
12	1470 Non-Dwelling Structures		\$17,924.00	\$17,924.00	\$17,924.00	
13	1475 Non-Dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Cost					
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 Evaluations Report or a revised Annual Statement

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

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

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<b>Part I: Summary</b>					
PHA Name: <b>Newkirk Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Grant Number: <b>OK56P056501-07</b> Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: <b>2007</b>	FFY of Grant Approval: <b>2007</b>		
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:    ) <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				
18b	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)	<b>\$58,855.00</b>	<b>\$58,855.00</b>	<b>\$58,855.00</b>	<b>\$58,855.00</b>
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> <small>Signature of Executive Director:</small> 		<b>Date</b> 10/14/10	<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 Evaluations Report or a revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grant for Operations.  
<sup>4</sup> RHF funds shall be included here.

8.1 B Performance and Evaluation Reports for 2007, 2008, 2009, 2009-S, & 2010 CFPs

<i>Part II: Supporting Pages</i>								
<i>PHA Name: <b>Newkirk Housing Authority</b></i>		<i>Grant Type and Number Capital Fund Program Grant No: <b>OK56P056501-07</b> CFFP (Yes/ No): Replacement Housing Factor Grant No:</i>			<i>Federal FFY of Grant: <b>2007</b></i>			
<i>Development Number Name/PHA-Wide Activities</i>	<i>General Description of Major Work Categories</i>	<i>Development Account No.</i>	<i>Quantity</i>	<i>Total Estimated Cost</i>		<i>Total Actual Cost</i>		<i>Status of Work</i>
				<i>Original</i>	<i>Revised<sup>1</sup></i>	<i>Funds Obligated<sup>2</sup></i>	<i>Funds Expended<sup>2</sup></i>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		<i>\$2,659.00</i>	<i>-0-</i>	<i>-0-</i>	<i>-0-</i>	
<i>PHA Wide</i>	<i>Bidding &amp; Advertising</i>	<i>1410</i>		<i>\$1,000.00</i>	<i>\$439.00</i>	<i>\$439.00</i>	<i>\$439.00</i>	<i>100%</i>
<i>PHA Wide</i>	<i>A&amp;E fees &amp; Costs</i>	<i>1430</i>		<i>\$5,196.00</i>	<i>\$7,400.00</i>	<i>\$7,400.00</i>	<i>\$7,400.00</i>	<i>100%</i>
<i>OK056-000001</i>	<i>Replace roofs/ guttering</i>	<i>1460</i>	<i>12 bldgs.</i>	<i>\$50,000.00</i>	<i>\$33,092.00</i>	<i>\$33,092.00</i>	<i>\$33,092.00</i>	<i>100%</i>
<i>PHA Wide</i>	<i>Replace Office/ Gazebo Roofs</i>	<i>1470</i>	<i>1 ea.</i>	<i>-0-</i>	<i>\$17,924.00</i>	<i>\$17,924.00</i>	<i>\$17,924.00</i>	<i>100%</i>
				<i>\$58,855.00</i>	<i>\$58,855.00</i>	<i>\$58,855.00</i>	<i>\$58,855.00</i>	

<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.

8.2 Capital Fund Program 5 Year Action Plan

<b>PART I: SUMMARY</b>						
PHA Name/Number: <b><i>Newkirk – OK056</i></b>			Locality (City/County & State): <b><i>Newkirk, Kay, Oklahoma</i></b>		<input type="checkbox"/> <b>Original 5-Year Plan</b>	<input checked="" type="checkbox"/> <b>Revision No: 1</b>
A.	Development Number and Name	Work Statement for Year 1 FFY <b>2011</b>	Work Statement for Year 2 FFY <b>2012</b>	Work Statement for Year 3 FFY <b>2013</b>	Work Statement for Year 4 FFY <b>2014</b>	Work Statement for Year 5 FFY <b>2015</b>
<b>B.</b>	Physical Improvements Subtotal	Annual Statement	<b><i>\$54,056.00</i></b>	<b><i>\$55,156.00</i></b>	<b><i>\$27,100.00</i></b>	<b><i>\$54,785.00</i></b>
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment		<b><i>\$1,000.00</i></b>		<b><i>\$27,656.00</i></b>	
<i>E.</i>	<i>ADMINISTRATION</i>		<b><i>\$1,000.00</i></b>	<b><i>\$1,000.00</i></b>	<b><i>\$1,000.00</i></b>	<b><i>\$1,000.00</i></b>
F.	Other		<b><i>\$6,000.00</i></b>	<b><i>\$6,000.00</i></b>	<b><i>\$6,000.00</i></b>	<b><i>\$6,000.00</i></b>
G.	Operations		<b><i>\$229.00</i></b>	<b><i>\$129.00</i></b>	<b><i>\$529.00</i></b>	<b><i>\$500.00</i></b>
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		<b><i>\$62,285.00</i></b>	<b><i>\$62,285.00</i></b>	<b><i>\$62,285.00</i></b>	<b><i>\$62,285.00</i></b>
L.	Total Non-CFP Funds					
M.	Grand Total		<b><i>\$62,285.00</i></b>	<b><i>\$62,285.00</i></b>	<b><i>\$62,285.00</i></b>	<b><i>\$62,285.00</i></b>





8.2 Capital Fund Program 5 Year Action Plan

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012		Work Statement for Year: 3 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
SEE ANNUAL STATEMENT	<i>PHA Wide – Operations</i>	<i>\$229.00</i>	<i>PHA Wide – Operations</i>	<i>\$129.00</i>
	<i>PHA Wide – Bidding &amp; Advertising</i>	<i>\$1,000.00</i>	<i>PHA Wide – Bidding &amp; Advertising</i>	<i>\$1,000.00</i>
	<i>PHA Wide – A&amp;E Fees &amp; Costs</i>	<i>\$6,000.00</i>	<i>PHA Wide – A&amp;E Fees &amp; Costs</i>	<i>\$6,000.00</i>
		Subtotal of Estimated Cost	<i>\$7,229.00</i>	Subtotal of Estimated Cost

8.2 Capital Fund Program 5 Year Action Plan

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014		Work Statement for Year: 5 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
SEE ANNUAL STATEMENT	<i>PHA Wide – Operations</i>	<i>\$529.00</i>	<i>PHA Wide – Operations</i>	<i>\$500.00</i>
	<i>PHA Wide – Bidding &amp; Advertising</i>	<i>\$1,000.00</i>	<i>PHA Wide – Bidding &amp; Advertising</i>	<i>\$1,000.00</i>
	<i>PHA Wide – A&amp;E Fees &amp; Costs</i>	<i>\$6,000.00</i>	<i>PHA Wide – A&amp;E Fees &amp; Costs</i>	<i>\$6,000.00</i>
		Subtotal of Estimated Cost	<i>\$7,529.00</i>	Subtotal of Estimated Cost

## **10 -B. 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

- *Changes to rent, admissions policies, or organization of the waiting list; and*
- *Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. There are no changes to the Capital Fund Program that would constitute a significant amendment or substantial deviation*

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

- ✓ *Changes to rent, admissions policies, or organization of the waiting list; and*
- ✓ *Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. There are no changes to the Capital Fund Program that would constitute a significant amendment or substantial deviation*

### **Other Information Required by HUD**

Use this section to provide any additional information requested by HUD.

## **11.0(f) Resident Advisory Board (RAB) Comments**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board Recommendations**

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

Attached at Attachment (File name)

Provided below:

3. 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.

The PHA changed portions of the PHA Plan in response to comments  
List changes below:

Other: (list below)

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and or 2011 Annual PHA Plan for the PHA fiscal year beginning 1/2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.

11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

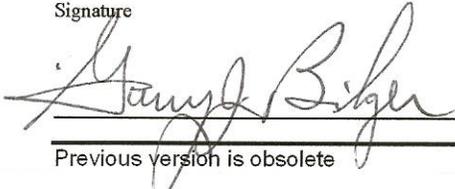
**Newkirk Housing Authority**  
PHA Name

**OK-056**  
PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2010 - 2014

Annual PHA Plan for Fiscal Years 2011 - 2015

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official <b>Garry J. Bilger</b>	Title <b>Chairperson</b>
Signature 	Date <b>10/14/2010</b>