

**PHA 5-Year and Annual Plan**

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

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

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Housing Authority of the City of Konawa</u> PHA Code: <u>OK 105</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/01/2011</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>38</u> Number of HCV units: _____				
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: <u>The Housing Authority's mission is to serve the housing needs of low, very low and extremely low income families within its jurisdiction.</u>				
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <u>The Housing Authority's goal is to serve eligible families with their housing needs by providing decent, safe and sanitary housing at an affordable rental rate. The Housing Authority is in the process of meeting the goals and objectives described in the previous 5-Year Plan.</u>				
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <u>The Admission &amp; Occupancy Policy and Dwelling Lease have been revised to include the required Violence Against Women Act provisions.</u> (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. <u>Housing Authority Office located at 101 S. East Street, Konawa, OK 74849</u>				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.				
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.				
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.				

9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The housing needs in Housing Authority's jurisdiction for low, very low and extremely low income families, particularly elderly families, families with disabilities as well as various races and ethnic groups is moderate to severe. The families in the aforementioned categories are often on fixed or limited incomes. The supply of quality housing in safe locations or neighborhoods are very limited, particularly in small, rural areas, such as our jurisdiction for elderly and disabled families who are on fixed or limited incomes. Private housing cannot compete with the assisted rents offered by public housing programs.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b> The Housing Authority's strategy for addressing the housing needs in its jurisdiction for the upcoming year is to continue to provide decent, safe and sanitary housing to low income families at an affordable rental rate. The Housing Authority continues to market the housing through newspaper advertisements and word of mouth [to social agencies, churches &amp; civic organizations] in the area. Families who have made applications [on the waiting list] are processed as quickly as possible and housed</p>
10.0	<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. The Housing Authority has made great progress in meeting the mission and goals described in the 5-Year Plan. The occupancy rate varies with the number of move ins and move out. However, the Housing Authority's Waiting List is well populated and families are being processed for assignment on a continuing basis.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification". The Housing Authority considers a "significant amendment" to any policy revising eligibility requirements, selection and/or admission requirements or the procedure for managing the waiting list that could affect a family's admission to affordable housing. "Substantial deviation/modification" would only be considered in cases authorized by the Public Housing Occupancy Guide.</p>
11.0	<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>



<b>Part I: Summary</b>		
<b>PHA Name: Housing Authority of the City of Konawa</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P10550107 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2007</b> <b>FFY of Grant Approval: 2007</b>

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	49,324.00	49,456.50	49,456.50	49,456.50
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	500.00	367.50	367.50	367.50
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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<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"/> <b>Performance and Evaluation Report for Period Ending: 12/31/10</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					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	49,824.00		49,824.00	49,824.00	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
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<b>Part I: Summary</b>		
<b>PHA Name: Housing Authority of the City of Konawa</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P10550108 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval: 2008</b>

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	500	500	500	500.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	30,000	52,303.02	52,303.02	52,303.02
11	1465.1 Dwelling Equipment—Nonexpendable	5,000	699.98	699.98	699.98
12	1470 Non-dwelling Structures	6,000	0		
13	1475 Non-dwelling Equipment	12,003	0		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
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U.S. Department of Housing and Urban Development  
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<b>Part I: Summary</b>						
<b>PHA Name:</b> <b>Housing Authority</b> of the City of <b>Konawa</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P10550108 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2008</b> <b>FFY of Grant Approval: 2008</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"/> <b>Performance and Evaluation Report for Period Ending: 12/31/10</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					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	53,503.00	53,503.00	53,503.00	53,503.00	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b>			<b>Date</b>		<b>Signature of Public Housing Director</b>	
					<b>Date</b>	

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<b>Part I: Summary</b>		
<b>PHA Name: Housing Authority of the City of Konawa</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56S10550109 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval: 2009</b>

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	500.00		500.00	500.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	67,224.00		67,224.00	67,224.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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<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"/> <b>Performance and Evaluation Report for Period Ending: 12/31/2010</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					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	67,724		67,724.00	67,724.00	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no: 1 )  
 Performance and Evaluation Report for Period Ending: 12/31/10       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	35,720.00	10,453.02		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	500.00	500.00		
8	1440 Site Acquisition				
9	1450 Site Improvement		7,000.00		
10	1460 Dwelling Structures	13,000.00	30,072.98	6,072.98	6,072.98
11	1465.1 Dwelling Equipment—Nonexpendable		1,194.00	1,194.00	1,194.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2010 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	49,220.00	49,220.00	7,266.98	7,266.98	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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<b>Part I: Summary</b>									
<b>PHA Name: Housing Authority of the City of Konawa</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;"><b>Grant Type and Number</b></td> <td><b>FFY of Grant: 2010</b></td> </tr> <tr> <td>Capital Fund Program Grant No: OK56P10550110</td> <td><b>FFY of Grant Approval: 2010</b></td> </tr> <tr> <td>Replacement Housing Factor Grant No:</td> <td></td> </tr> <tr> <td>Date of CFFP:</td> <td></td> </tr> </table>	<b>Grant Type and Number</b>	<b>FFY of Grant: 2010</b>	Capital Fund Program Grant No: OK56P10550110	<b>FFY of Grant Approval: 2010</b>	Replacement Housing Factor Grant No:		Date of CFFP:	
<b>Grant Type and Number</b>	<b>FFY of Grant: 2010</b>								
Capital Fund Program Grant No: OK56P10550110	<b>FFY of Grant Approval: 2010</b>								
Replacement Housing Factor Grant No:									
Date of CFFP:									

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		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	3,141			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,000			
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000			
10	1460 Dwelling Structures	40,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
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16	1495.1 Relocation Costs				
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<b>Part I: Summary</b>						
<b>PHA Name:</b> <b>Housing Authority</b> of the City of <b>Konawa</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P10550110 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2010</b> <b>FFY of Grant Approval: 2010</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 12/31/10</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					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	49,141				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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

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

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

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









<b>Part I: Summary</b>									
<b>PHA Name: Housing Authority of the City of Konawa</b>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;"><b>Grant Type and Number</b></td> <td><b>FFY of Grant: 2011</b></td> </tr> <tr> <td>Capital Fund Program Grant No: OK56P10550111</td> <td><b>FFY of Grant Approval: 2011</b></td> </tr> <tr> <td>Replacement Housing Factor Grant No:</td> <td></td> </tr> <tr> <td>Date of CFFP:</td> <td></td> </tr> </table>	<b>Grant Type and Number</b>	<b>FFY of Grant: 2011</b>	Capital Fund Program Grant No: OK56P10550111	<b>FFY of Grant Approval: 2011</b>	Replacement Housing Factor Grant No:		Date of CFFP:	
<b>Grant Type and Number</b>	<b>FFY of Grant: 2011</b>								
Capital Fund Program Grant No: OK56P10550111	<b>FFY of Grant Approval: 2011</b>								
Replacement Housing Factor Grant No:									
Date of CFFP:									

<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>Performance and Evaluation Report for Period Ending:</b>	<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</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>	5,991			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	750			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	40,000			
11	1465.1 Dwelling Equipment—Nonexpendable	2,400			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> <b>Housing Authority</b> of the City of <b>Konawa</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: OK56P1050111 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:2011</b> <b>FFY of Grant Approval: 2011</b>	
<b>Type of Grant</b>						
<input checked="" type="checkbox"/> <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>				
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					<b>Date</b>	

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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 4/30/20011

<b>Part I: Summary</b>						
PHA Name/Number City of Konawa OK105			Locality (City/County & State)		<input type="checkbox"/> Original 5-Year Plan	<input checked="" type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2011</u>	Work Statement for Year 2 FFY <u>2012</u>	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 4 FFY <u>2014</u>	Work Statement for Year 5 FFY <u>2015</u>
B.	Physical Improvements Subtotal	Annual Statement	32,000	28,000	1,875	2,250
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other		750	750	500	500
G.	Operations		16,391	20,391	46,766	46,391
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		49,141	49,141	49,141	49,141











# Housing Authority of the City of Konawa

*P.O. Box 186 – 101 S. East Street*

*Konawa, OK 74849-0186*

*Phone (580) 925-3955*

*Fax (580) 925-3475*

## **RESOLUTION NO. 105-03-2007**

RESOLUTION AMENDING THE ADMISSION AND OCCUPANCY POLICY BY INCORPORATING THE PROVISIONS OF THE VIOLENCE AGAINST WOMEN ACT [VAWA]

**WHEREAS**, the Violence Against Women and Justice Department Reauthorization Act of 2005 protects tenants and family members of tenants who are victims of domestic violence, dating violence or stalking from being evicted or terminated from housing assistance based on acts of such violence against them, and

**WHEREAS**, the law provides, in part, that criminal activity directly relating to domestic violence, dating violence or stalking, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse. The law also provides that an incident or incidents of actual or threatened domestic violence, dating violence or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence and will not be "good cause" for termination of the assistance, tenancy or occupancy rights of a victim of such violence, and,

**WHEREAS**, among other requirements, the VAWA adds certification and confidentiality provisions in accordance with HUD Notice PIH 2006-42 and HUD form Hud-50066 to be used by and adhered to by the Housing Authority in situations that are addressed in Notice HUD PIH 2006-42,

**NOW THEREFORE LET IT BE RESOLVED** by the Board of Commissioners of the Housing Authority of the City of Konawa that the Housing Authority will implement the provisions of said Notice and amend the Admission and Occupancy Policy to include the said provisions of said Notice.

**APPROVED AND ADOPTED THIS 14<sup>TH</sup> DAY OF MARCH, 2007**

\_\_\_\_\_  
RONNIE L. MOREHEAD  
SECRETARY

\_\_\_\_\_  
FRANK R. WILSON  
CHAIRMAN

# Housing Authority of the City of Konawa

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