

| 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 1.0 | PHA Information PHA Name: <u>Aiken Housing Authority</u> PHA Code: <u>SC007</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>10/2011</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2.0 | Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>246</u> Number of HCV units: <u>875</u> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3.0 | Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4.0 | PHA Consortia <i>N/A</i> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5.0 | 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. <i>NOT APPLICABLE</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5.1 | Mission. 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: <i>NOT APPLICABLE</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5.2 | Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <i>NOT APPLICABLE</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6.0 | PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <p style="text-align: center;">The following PHA Plan elements marked '<u>X</u>' have been revised since the last Annual Plan submission by the Aiken Housing Authority. <u>N/C</u> denotes NO CHANGE and <u>N/A</u> denotes NOT APPLICABLE</p> <table style="margin-left: auto; margin-right: auto;"> <tr><td><u> X </u></td><td>903.7(1)</td><td>Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures</td></tr> <tr><td><u> X </u></td><td>903.7(2)</td><td>Financial Resources</td></tr> <tr><td><u> X </u></td><td>903.7(3)</td><td>Rent Determination</td></tr> <tr><td><u> N/C </u></td><td>903.7(4)</td><td>Operation and Management</td></tr> <tr><td><u> N/C </u></td><td>903.7(5)</td><td>Grievance Procedures</td></tr> <tr><td><u> N/C </u></td><td>903.7(6)</td><td>Designated Housing for Elderly and Disabled Families</td></tr> <tr><td><u> X </u></td><td>903.7(7)</td><td>Community Service and Self-Sufficiency</td></tr> <tr><td><u> N/C </u></td><td>903.7(8)</td><td>Safety and Crime Prevention</td></tr> <tr><td><u> N/C </u></td><td>903.7(9)</td><td>Pets</td></tr> <tr><td><u> X </u></td><td>903.7(10)</td><td>Civil Rights Certification</td></tr> <tr><td><u> X </u></td><td>903.7(11)</td><td>Fiscal Year Audit</td></tr> <tr><td><u> N/A </u></td><td>903.7(12)</td><td>Asset Management</td></tr> <tr><td><u> N/C </u></td><td>903.7(13)</td><td>Violence Against Women Act (VAWA)</td></tr> </table> | | <u> X </u> | 903.7(1) | Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures | <u> X </u> | 903.7(2) | Financial Resources | <u> X </u> | 903.7(3) | Rent Determination | <u> N/C </u> | 903.7(4) | Operation and Management | <u> N/C </u> | 903.7(5) | Grievance Procedures | <u> N/C </u> | 903.7(6) | Designated Housing for Elderly and Disabled Families | <u> X </u> | 903.7(7) | Community Service and Self-Sufficiency | <u> N/C </u> | 903.7(8) | Safety and Crime Prevention | <u> N/C </u> | 903.7(9) | Pets | <u> X </u> | 903.7(10) | Civil Rights Certification | <u> X </u> | 903.7(11) | Fiscal Year Audit | <u> N/A </u> | 903.7(12) | Asset Management | <u> N/C </u> | 903.7(13) | Violence Against Women Act (VAWA) |
| <u> X </u> | 903.7(1) | Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> X </u> | 903.7(2) | Financial Resources | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> X </u> | 903.7(3) | Rent Determination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/C </u> | 903.7(4) | Operation and Management | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/C </u> | 903.7(5) | Grievance Procedures | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/C </u> | 903.7(6) | Designated Housing for Elderly and Disabled Families | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> X </u> | 903.7(7) | Community Service and Self-Sufficiency | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/C </u> | 903.7(8) | Safety and Crime Prevention | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/C </u> | 903.7(9) | Pets | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> X </u> | 903.7(10) | Civil Rights Certification | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> X </u> | 903.7(11) | Fiscal Year Audit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/A </u> | 903.7(12) | Asset Management | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <u> N/C </u> | 903.7(13) | Violence Against Women Act (VAWA) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

6.0 (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.

The following are the specific locations where the public may obtain copies of the 2011 Annual Plan:

- Administrative Office – 100 Rogers Terrace, Aiken, SC 29801

6.0 PHA Plan Elements

903.7(1) Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures *CHANGE*

A. Public Housing

Public Housing policies that govern resident or tenant eligibility, selection and admission (including preferences), unit assignment, procedures to maintaining waiting list for admission to public housing and site-based waiting lists (if applicable).

(1) Eligibility

The Aiken Housing Authority verifies eligibility for admission to public housing when family nears the top of the waiting list.

The PHA uses the following non-income screening factors to establish eligibility for admission to public housing:

- Criminal or Drug-related activity
- Rental history
- The following is an extract from the Housing Authority Admission and Continued Occupancy Policy.

8.3 Suitability

- A. Applicant families will be evaluated to determine whether, based on their recent behavior, such behavior could reasonably be expected to result in compliance with the public housing lease. The Aiken Housing Authority will look at past conduct as an indicator of future conduct. Emphasis will be placed on whether a family's admission could reasonably be expected to have a detrimental effect on the development environment, other tenants, Aiken Housing Authority employees, or other people residing in the immediate vicinity of the property. Otherwise eligible families will be denied admission if they fail to meet the suitability criteria.

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- B. The Aiken Housing Authority will consider objective and reasonable aspects of the family's background, including the following:
1. History of meeting financial obligations, especially rent and any utility payments;
 2. Ability to maintain (or with assistance would have the ability to maintain) their housing in a decent and safe condition based on living or housekeeping habits and whether such habits could adversely affect the health, safety, or welfare of other tenants;
 3. History of criminal activity by any household member involving crimes of physical violence against persons or property and any other criminal activity including drug-related criminal activity that would adversely affect the health, safety, or well being of other tenants or staff or cause damage to the property; History of disturbing neighbors or destruction of property;
 4. Having committed fraud in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from; and
 5. History of abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment by others.
- C. The Aiken Housing Authority will ask applicants to provide information demonstrating their ability to comply with the essential elements of the lease. The Aiken Housing Authority will verify the information provided. Such verification may include but may not be limited to the following:
1. The credit check of the head, spouse, co-head, and any other adult family members;
 2. A rental history check of all adult family members;
 3. A criminal background check on all adult household members, including live-in aides at no cost to the applicant. This check will be made through State or local law enforcement or court records in those cases where the household member has lived in the local jurisdiction for the last three years. Where the individual has lived outside the local area, the Aiken Housing Authority may contact law enforcement agencies where the individual had lived or request a check through the FBI's National Crime Information Center (NCIC). This criminal background check will proceed after each adult household member has signed a consent form designed by the Aiken Housing Authority.

The information received as a result of the criminal background check shall be used solely for screening, lease enforcement and eviction purposes. The information derived from the criminal background check shall be shared only with employees of the Aiken Housing Authority who have a job-related need to have access to the information. The information shall be maintained confidentially, not misused or improperly disseminated, and destroyed once the purpose(s) for which it was requested has been accomplished and the period for filing a challenge to the Aiken Housing Authority's action has expired without a challenge or final disposition of any litigation has occurred;

4. A home visit. The home visit provides the opportunity for the family to demonstrate their ability to maintain their home in a safe and sanitary manner. This inspection considers cleanliness and care of rooms, appliances, and appurtenances. The inspection may also consider any evidence of criminal activity; and
5. A check of the State's lifetime sex offender registration program for each adult household member, including live-in aides. No household with an individual registered under a State sex offender registration will be admitted to public housing. The Aiken Housing Authority will check with our State registry and if the applicant has resided in another State(s), with the State(s) list.

If any applicant is about to be denied housing based on either the criminal check or the sex offender registration program, the applicant will be informed of this fact and given an opportunity to dispute the accuracy of the information before the denial or eviction occurs.

The Housing Authority requests criminal records from the following enforcement agencies for screening purposes:

- Local law enforcement agencies
- State law enforcement agencies
- FBI criminal records

(2) Selection and Assignment

Selection for admission to public housing shall be made from the PHA's current waiting list in accordance with date and time of application and applicable preference(s) as follows.

(3) Preferences *CHANGE*

The PHA does not plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of the median area income.

It is the policy of the PHA that transfers will take precedence over new admissions in the following circumstances:

- Emergencies
- Medical justification
- Administrative reasons determined by the PHA

The PHA plans to employ the following admission preferences for admission to public housing:

| <u>Priority</u> | <u>Preference</u> |
|-----------------|---|
| <u>2</u> | - Displaced Person(s): Individuals or families displaced by government action or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal Disaster Relief Laws |
| <u>3</u> | - Victims of domestic violence |
| <u>1</u> | - Applicants whose head, spouse or sole member currently live or work in or have been hired to work in the Housing Authority's jurisdictional area.* |
| <u>4</u> | - Applicants with an adult family member enrolled in an employment training program, currently working, or attending school on a full-time basis. (This preference is also extended equally to all elderly families and all families whose head or spouse is receiving income based on their inability to work. |

Among applicants on the waiting list with equal preference status applicants are selected by date and time of application.

* This preference has previously been reviewed and approved by HUD.

In relationship of preferences to income targeting requirements, the pool of applicant families ensures that the PHA will meet income targeting requirements.

(4) Unit Assignment

Applicants are ordinarily given three (3) or more vacant unit choices before they are removed from the waiting list. This policy is consistent across all waiting list types. (See ACOP for details of unit offers.)

(5) Maintaining Waiting List

The Aiken Housing Authority maintains Sub-jurisdictional (City wide and County) waiting lists. Interested persons may apply for admission to public housing at the main administrative office located at 100 Rogers Terrace, Aiken, SC 29801.

The Aiken Housing Authority does not plan to operate any site-based waiting lists.

(6) Occupancy

Applicants and residents may use the following reference materials to obtain information about the rules of occupancy of public housing.

- The PHA-resident lease
- The PHA's Admissions and Continued Occupancy Policy
- PHA briefing seminars or written materials

Residents must notify the PHA of changes in family composition:

- Any time family composition changes

(7) Deconcentration and Income Mixing *CHANGE*

The PHA has performed its annual deconcentration and income mixing analysis to determine if the PHA has any general occupancy public housing developments covered by the deconcentration rule. The analysis results follow:

The PHA does have general occupancy public housing developments covered by the deconcentration rule.

The following covered developments have average incomes that fall above or below the Established Income Range.

| Deconcentration Policy for Covered Developments | | | |
|--|------------------------|---|---|
| Development Name: | Number of Units | Explanation (if any) [see step 4 at §903.2(c)(1)(iv)] | Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)] |
| Crosland Park | 2 | C. The Covered Development's or Development;s size, location, and/or configuration promote income deconcentration, such as scattered site or small developments | |

B. Section 8

Section 8 HCV policies that govern participant eligibility and selection for assistance (including preferences), and procedure for maintaining waiting list.

(1) Eligibility

The PHA conducts screening to the extent of:

- Criminal or Drug-related activity only to the extent required by law or regulation
- The following extract from our adopted Section 8 Administrative Plan outlines our suitability requirements:

F. Suitability for Tenancy

The Aiken Housing Authority determines eligibility for participation and will also conduct criminal background checks on all adult household members, including live-in aides. The Aiken Housing Authority will deny assistance to a family because of drug-related criminal activity or violent criminal activity by family members. This check will be made through State or local law enforcement or court records in those cases where the household member has lived in the local jurisdiction for the last three years. If the individual has lived outside the local area, the Aiken Housing Authority may contact law enforcement agencies where the individual had lived or request a check through the FBI's National Crime Information Center (NCIC). This criminal background check will proceed after each adult household member has signed a consent form designed by the Aiken Housing Authority. The information received as a result of the criminal background check shall be used solely for screening purposes. The information shall be maintained confidentially, not misused or improperly disseminated, and destroyed once the purpose(s) for which it was requested has been accomplished and the

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period for filing a challenge to the Aiken Housing Authority's action has expired without a challenge or final disposition of any litigation has occurred.

The Aiken Housing Authority will check with the State sex offender registration program and will ban for life any individual who is registered as a lifetime sex offender. The Aiken Housing Authority will check with our state registry and if the applicant has resided in another State(s), with that State(s)'s list.

If an applicant is about to be denied housing based on either the criminal check or the sex offender registration program, the applicant will be informed of this fact and given an opportunity to dispute the accuracy of the information before the denial or eviction occurs.

Additional screening is the responsibility of the owner. Upon the written request of a prospective owner, the Aiken Housing Authority will provide to the owner the name, address, and phone number of the applicant's current landlord and any previous landlords that are known to the housing authority.

In addition, if an owner submits a request to the Aiken Housing Authority for criminal records concerning an adult member of an applicant or resident household, signed consent forms, and the owner's standards for prohibiting admission, the Aiken Housing Authority must request the criminal conviction records from the appropriate law enforcement agency or agencies, as determined by the Housing Authority. If the Aiken Housing Authority receives criminal conviction records requested by an owner, the Aiken Housing Authority must determine whether criminal action by a household member, as shown by such criminal conviction records, may be a basis for applicant screening, lease enforcement or eviction, as applicable in accordance with HUD regulations and the owner's criteria. The Aiken Housing Authority must notify the owner whether the Housing Authority has received criminal conviction records concerning the household member, and of its determination whether such criminal conviction records may be a basis for applicant screening, lease enforcement or eviction. However, the PHA must not disclose the household member's criminal conviction record or the content of that record to the owner, but merely the fact of whether or not they comply with HUD regulations and the owner's criteria.

The same service shall be available to owners of federally assisted housing in their attempt to determine if an applicant is on the state sex offender list upon the request of the owner. Once again, the information itself will not be disclosed to the owner; the Aiken Housing Authority will merely apply the criteria the owner establishes.

The Housing Authority requests criminal records from the following enforcement agencies for screening purposes:

- Local law enforcement agencies
- State law enforcement agencies
- FBI criminal records

The PHA shares the following information with prospective landlords:

- Criminal or drug-related activity (See Section 8 Adm. Plan for information available to landlords)

(2) Waiting List Organization

The Aiken Housing Authority's waiting list for the section 8 tenant-based assistance is not merged with any other program waiting list.

Interested person may apply for admission to section 8 tenant-based assistance at:

- PHA main administrative office

(3) Search Time

The PHA does give extensions on standard 60-day period to search for a unit for the following circumstances (extract from Section 8 Administrative Plan):

6.4 Term of the Housing Choice Voucher

The initial term of the voucher will be 60 calendar days and will be stated on the Housing Choice Voucher.

The Housing Authority may grant one or more extensions of the term, but the initial term plus any extensions will not exceed 120 calendar days from the initial date of issuance without an extraordinary reason. To obtain an extension, the family must make a request in writing prior to the expiration date. A statement of the efforts the family has made to find a unit must accompany the request. A sample extension request form and a form for recording their search efforts will be included in the family's briefing packet. If the family documents their efforts and

additional time can reasonably be expected to result in success, the Housing Authority will grant the length of request sought by the family or 60 calendar days, whichever is less.

If the family includes a person with disabilities and the family requires an extension due to the disability, the Housing Authority will grant an extension allowing the family the full 120 calendar days search time. If the Housing Authority determines that additional search time would be a reasonable accommodation, it will grant the additional search time.

Upon submittal of a completed request for approval of tenancy form, the Aiken Housing Authority will suspend the term of the housing choice voucher. The term will be in suspension until the date the Housing Authority provides notice that the request has been approved or denied. This policy allows families the full term (60 calendar days, or more with extensions) to find a unit, not penalizing them for the period during which the Housing Authority is taking action on their request. A family may submit a second request for approval of tenancy before the Housing Authority finalizes action on the first request. In this case the suspension will last from the date of the first submittal through the Housing Authority's action on the second submittal. No more than two requests will be concurrently considered.

If a family's voucher expires, the family is no longer eligible for housing assistance. They may re-apply to the Housing Choice Voucher Program and start over again at the bottom of the waiting list. If the waiting list is closed, they must wait until the Aiken Housing Authority is once again accepting applicants for the Section 8 Program. They will be treated exactly like all other new applicants for the program.

(4) Preferences *CHANGE*

The PHA does not plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of the median area income.

The PHA plans to employ the following admission preferences for admission to section 8 tenant-based assistance:

Priority **Preference**

- 1 - Applicants whose apply for voucher assistance through Ridgeview Manor Apartments and all other HOME funded and tax credit apartments, if assistance is available.

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- 2 - Applicants whose head, spouse or sole member that are verifiable age 62 and older.
- 3 - Homeless
- 3 - Applicants that are displaced due to no fault of their own (fire, flood, disaster, condemnation, or other governmental action)
- 4 - Families whose head, spouse or sole member is working (*see below) or has graduated from an institute of higher learning within the last six (6) months or who is attending on a regular basis, has satisfactory performance, and expects to graduate within 6-12 months. An institute of higher learning includes but is not limited to colleges, universities and adult education.
- 2 - Families whose head, spouse or sole member currently live or work (*see below) in or have been hired to work in the Housing Authority's jurisdictional area.

5.2 Preferences

Consistent with the Aiken Housing Authority Agency Plan, offers for housing assistance will be taken from the waiting list as follows based on the priority order and having the oldest date and time of application:

Applicants that have a local preference as designated by the Housing Authority in either of the following categories?

1. Applicants who apply for voucher assistance through Ridgeview Manor Apartments and all other HOME funded and tax credit apartments, if assistance is available. **40 Points**
2. Families whose head, spouse or sole member currently live or work (*see below) in or have been hired to work in the Housing Authority's jurisdictional area. **35 Points**
3. Applicants whose head, spouse or sole member that are verifiable age 62 and older. **35 Points**
4. Applicants that are in a verifiable homeless situation or in a shelter for the homeless. **30 Points**
5. Applicants that are displaced due to no fault of their own (fire, flood, disaster, condemnation, or other governmental action). **30 Points**
6. Families whose head, spouse or sole member is working (*see below) or has graduated from an institute of higher learning within the last six (6) months or who is attending on a regular basis, has satisfactory performance, and expects to graduate within 6-12 months. An institute of higher learning includes but is not limited to colleges, universities and adult education. **25 Points**
7. All others by the oldest date and time of application.

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* Working families include applicant households whose head, spouse or sole member is age 62 or older or is receiving social security disability benefits, supplemental security income, disability benefits, or any other payment based on the individual inability to work.

Notwithstanding the above, families who are elderly, disabled or displaced will be offered housing before any other single persons.

The Aiken Housing Authority will not deny a local preference, nor otherwise exclude or penalize a family in admission to the program, solely because the family resides in public housing.

Among applicants on the waiting list with equal preference status applicants are selected by date and time of application.

** This preference has previously been reviewed and approved by HUD.

In relationship of preferences to income targeting requirements, the pool of applicant families ensures that the PHA will meet income targeting requirements.

(5) Special Purpose Section 8 Assistance Programs

The policies governing eligibility, selection and admissions to any special-purpose section 8 program administered by the PHA are contained in the following documents or other reference materials:

- The Section 8 Administrative Plan
- Briefing sessions and written materials

The PHA announces the availability of any special-purpose section 8 program to the public through:

- Published notices

6.0 903.7(2) Financial Resources

| Financial Resources: Planned Sources and Uses | | |
|---|-----------------------|-------------------------------------|
| Sources | Planned \$ | Planned Uses |
| 1. Federal Grants (FY 2011 grants) | | |
| a) Public Housing Operating Fund | 897,592.00 | |
| b) Public Housing Capital Fund | 411,226.00 | |
| c) HOPE VI Revitalization | | |
| d) HOPE VI Demolition | | |
| e) Annual Contributions for Section 8 Tenant-Based Assistance | 5,092,644.00 | |
| f) Resident Opportunity and Self- Sufficiency Grants | | |
| g) Community Development Block Grant | | |
| h) HOME | | |
| Other Federal Grants (list below) | | |
| Summer Food Service Program | 226,211.00 | Other |
| Workforce Investment Act | 384,591.00 | Other |
| 2. Prior Year Federal Grants (unobligated funds only) (list below) | | |
| SC16P00750110 | 215,455.00 | Public housing capital improvements |
| SC16R00750210 | 115,508.00 | Public housing capital improvements |
| SC16R00750209 | 84,672.00 | Public housing capital improvements |
| SC16R00750110 | 139,670.00 | Public housing capital improvements |
| SC16R00750109 | 170,948.00 | Public housing capital improvements |
| SC16P00750109 | 54,742.00 | Public housing capital improvements |
| 3. Public Housing Dwelling Rental Income | | |
| | 279,500.00 | Public housing operations |
| 4. Other income (list below) | | |
| Interest on Investments: | 11,600.00 | Public housing operations |
| Other income: Legal fees, maintenance charge to tenants, late fees, NSF check charges, etc. | 32,000.00 | Public housing operations |
| Non-Dwelling rent | 29,500 | Public housing operations |
| Excess utilities | 9,000.00 | Public housing operations |
| 5. Non-federal sources (list below) | | |
| Rent – Toole Hill | 90,000.00 | Other |
| Maintenance Work Order Income | 105,000.00 | Public housing supportive services |
| Total resources | \$8,349,859.00 | |

6.0 903.7 (3) Rent Determination Policies *CHANGE*

A. Public Housing

(1) Income Based Rent Policies

b. Use of discretionary policies

The PHA will employ discretionary rent-setting policies for income based rent in public housing.

b. Minimum Rent *CHANGE*

The PHA's minimum rent is \$50.00.

The PHA has adopted the following discretionary minimum rent hardship exemption policies.

Excerpt from Admissions and Continued Occupancy Policy (13.3):

A. A hardship exists in the following circumstances:

1. When the family has lost eligibility for or is waiting an eligibility determination for a Federal, State, or local assistance program, including a family that includes a member who is a non-citizen lawfully admitted for permanent residence under the Immigration and Nationality Act who would be entitled to public benefits but for title IV of the Personal Responsibility and Work Opportunity Act of 1996;
2. When the family would be evicted because it is unable to pay the minimum rent;
3. When the income of the family has decreased because of changed circumstances, including loss of employment; and
4. When a death has occurred in the family.

B. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum rent for the time of suspension.

C. Temporary hardship. If the Housing Authority reasonably determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will not be imposed for a period of 90 calendar days from the beginning of the suspension of the minimum rent. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The

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Housing Authority will offer a repayment agreement in accordance with Section 19 of this policy for any rent not paid during the period of suspension. During the suspension period the Housing Authority will not evict the family for nonpayment of the amount of tenant rent owed for the suspension period.

- D. Long-term hardship. If the Housing Authority determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists.
- E. Appeals. The family may use the grievance procedure to appeal the Housing Authority's determination regarding the hardship. No escrow deposit will be required in order to access the grievance procedure.

c. Rents set at less than 30% than adjusted income

The PHA does not plan to charge rents at a fixed amount or percentage less than 30% of adjusted income.

d. Discretionary deductions and/or exclusion policies

The PHA does not plan to employ any discretionary (optional) deductions and/or exclusions policies.

e. Ceiling Rents

The PHA does have ceiling rents for all developments. Our ceiling rents are the same as our flat rents.

f. Rent Re-determinations

Between annual income reexaminations, the tenant is required to report changes in income or family composition to the PHA such that the changes result in an adjustment to rent as follows:

- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (a \$200 per month increase will result in an interim reexamination)

g. Individual Savings accounts (ISAs)

The PHA does not plan to implement individual savings accounts for residents as an alternative to the required 12 month disallowance of earned income and phasing in of the rent increase in the next year.

(2) Flat Rents

The PHA used the following sources of information in setting the market-based flat rents to establish comparability.

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood

B. Section 8 Tenant-based Assistance(1) Payment Standards

The PHA's payment standard is:

- At or above 90% but below 100% of FMR

If the payment standard is lower than FMR, why has the PHA selected this standard?

- FRMs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket

The PHA reevaluates the payment standards for adequacy annually and considers the following factors in its assessment of the adequacy:

- Success rates of assisted families
- Rent burdens of assisted families
- Ability to maintain fiscal integrity of the program

(2) Minimum Rent *CHANGE*

The PHA's minimum rent is \$50.00.

The PHA has adopted the following discretionary minimum rent hardship exemption policies:

Excerpt from Section 8 Housing Choice Voucher Program Administrative Plan (11.5 – B):

1. A hardship exists in the following circumstances:
 - a. When the family has lost eligibility for or is awaiting an eligibility determination for a Federal, State or local assistance program including a family that includes a member who is a non-citizen lawfully admitted for permanent residence under the Immigration and Nationality Act who would be entitled to public benefits but for title IV of the Personal Responsibility and Work Opportunity Act of 1996;

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- b. When the family would be evicted because it is unable to pay the minimum rent;
 - c. When the income of the family has decreased because of changed circumstances, including loss of employment; and
 - d. When a death has occurred in the family.
- 2. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum rent to the Housing Authority for the time of suspension.
 - 3. Temporary hardship. If the Housing Authority determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will not be imposed for a period of 90 calendar days from the month following the date of the family's request. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The Housing Authority will offer a reasonable repayment agreement for any minimum rent back payment paid by the Housing Authority on the family's behalf during the period of suspension.
 - 4. Long-term hardship. If the Housing Authority determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists.
 - 5. Appeals. The family may use the informal hearing procedure to appeal the Housing Authority's determination regarding the hardship. No escrow deposit will be required in order to access the informal hearing procedures.

903.7(4) Operation and Management *NO CHANGE*

(1) PHA Management Structure

- a. A brief description of the management structure and organization of the PHA

The Chief Executive Officer directs the day-to day management and operation of the Housing Authority with the assistance of the following lead staff and their line staff.

Executive Assistant/Human Resource Manager

Director of Operations

- AMERICORPS Vista Volunteer (3)
- Administrative Assistant (2)

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Director of Finance

- WIA Staff Accountant
- Payroll Accountant
- Accountant
- Work Control Coordinator

Public Housing Property Manager

- Re-exam Specialist

Section 8 Administrator

- Re-exam Specialist (3)
- Occupancy Specialist
- Inspector

WIA Supervisor

- Administrative Assistant
- Senior Career Development Specialist
- Career Development Specialist (6)

Maintenance Supervisor

- Maintenance Mechanic (5)

b. HUD Programs Under PHA Management

| Program Name | Units or Families Served at Year Beginning | Expected Turnover |
|---|---|--------------------------|
| Public Housing | 246 | N/A |
| Section 8 Vouchers | 875 | N/A |
| Section 8 Certificates | N/A | N/A |
| Section 8 Mod Rehab | N/A | N/A |
| Special Purpose Section 8 Certificates/Vouchers (list individually) | N/A | N/A |
| Public Housing Drug Elimination Program (PHDEP) | N/A | N/A |
| Other Federal Programs(list individually) | N/A | N/A |

c. Management and Maintenance Policies

The PHA has adopted the following policies that contain the Agency’s rules, standards, and policies that govern management, operation, and maintenance of the Public Housing and Section 8 assistance programs.

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Public Housing Management:

- Admissions and Continued Occupancy Policy (ACOP)

Section 8 Management:

- Administrative Plan

903.7(5) Grievance Procedures ***NO CHANGE***

A. Public Housing

The PHA has not established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing.

Residents or applicants who desire to initiate the PHA grievance Process should contact the following:

- PHA main administrative office

B. Section 8 Tenant-Based Assistance

The PHA has not established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982.

Section 8 applicants or assisted families who desire to initiate the informal review and informal hearing process should contact the following:

- PHA main administrative office

903.7(6) Designated Housing for Elderly and Disabled Families ***NO CHANGE***

The PHA has designated or applied for approval to designate or does plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year.

6.0 903.7(7) Community Service and Self-Sufficiency *CHANGE*

A. PHA Coordination with the Welfare (TANF) Agency.

1. The PHA has not entered into a cooperative agreement with the TANF Agency, to share information and /or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937.)
2. Other coordination efforts between the PHA and TANF agency include:
 - Information sharing regarding mutual clients (for rent determinations and otherwise)

B. Services and programs offered to residents and participants by the Aiken Housing Authority are as follows:

(1) General

a. Self-Sufficiency Policies

The PHA will employ the following discretionary policies to enhance the economic and social self-sufficiency of assisted families in the following areas:

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA

b. Economic and Social self-sufficiency programs

The PHA does coordinate, promote or provide any services or programs for residents and participants.

| Services and Programs | | | | |
|--|----------------|--|--|--|
| Program Name & Description (including location, if appropriate) | Estimated Size | Allocation Method (waiting list/random selection/specific criteria/other) | Access (development office / PHA main office / other provider name) | Eligibility (public housing or section 8 participants or both) |
| Clemson University Cooperative Extension Service – Classes on Health, Nutrition & Housekeeping | 44 | Family Self Sufficiency Participants | AHA Administrative Office & Clemson Extension Office | PH |
| | | | | |

(2) Family Self Sufficiency programs

a. Participation Description

| Family Self Sufficiency (FSS) Participation | | |
|--|--|---|
| Program | Required Number of Participants (start of FY 2005 Estimate) | Actual Number of Participants (As of: 10/1/10) |
| Public Housing | N/A | 44 |
| Section 8 | 10 | 7 |

C. Welfare Benefit Reductions

The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by:

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies

D. Community Service Requirement

Pursuant to section 12(c) of the U. S. Housing Act of 1937, the PHA will comply with requirements of community service by identifying the number of tenants required to perform community service, the number of tenants granted exemptions, the number of tenants in non-compliance, and the number of tenants terminated/evicted due to non-compliance.

Description of the Community Service Policy**Background**

The Quality Housing and Work Responsibility Act of 1988 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes and other activities which help an individual toward self-sufficiency and economic independence. This is a requirement of the dwelling lease signed with all residents of Aiken Housing Authority (AHA).

Definitions

Community Service – volunteer service that includes, but is not limited to:

- Service at a local school, church, hospital, recreation center, senior center, service organization, or child care center.
- Service with youth or senior organizations, including Police Athletic League (PAL) events and functions.
- Service at AHA to help improve physical conditions including the resident planning and clean-up programs and non-paid time spent on caretaker duties.
- Service at AHA to help with children’s programs or youth sporting events.
- Service at AHA to help with senior programs.
- Helping neighborhood groups with special projects including Block Watch, Apartment Watch or Resident Patrol.
- Working through the Central Resident Council or individual development Resident Council or Senior Club to help other residents with problems.
- Caring for the children of other residents so they may volunteer.
- Other volunteer service with non-profits, providing community service programs.

NOTE: Political activity is excluded. This would include but is not limited to: voter registration, campaign worker; and poll worker assignments.

Self-Sufficiency Activities – Activities that include, but are limited to:

- Family Investment Center programs
- Job training programs
- GED classes
- Substance abuse or mental health counseling
- English proficiency or literacy (reading) classes
- Budgeting and credit counseling
- Homeownership educational programs or seminars (offered by AHA and other community organizations)
- Any kind of class that helps a person move toward economic independence

Exempt Adult – any adult member of the family who:

- Is 62 years of age or older
- Has a disability that prevents him/her from being gainfully employed
- Is the caretaker of a disabled person
- Is working at least 20 hours per week
- Is participating in a welfare to work program
- Is receiving assistance from TANF and is in compliance with job

training and work activities requirements of the program

- Each adult member of household must sign a Community Service Exemption Certification at each annual recertification or if they become an “exempt adult” at any time between recertification’s that the status should change.

Requirements of the Program

1. The eight (8) hours per month may be either volunteer service or self-sufficiency program activity or a combination of the two.
2. At least eight (8) hours of activity must be performed per month. An individual may not skip a month and then double up the following month, unless special circumstances warrant consideration. The Director of Property Management or their designee will make the determination of whether to allow or disallow a deviation from the schedule.
3. Activities must be performed within the community and not outside the jurisdictional area of AHA which included _____ County, _____.

4. Family Obligations

At lease execution or reexamination after October 1, 1999, all adult members (18 or older) of a public housing resident family must:

- Provide documentation that they are exempt from Community Service requirement if they qualify for an exemption, and;
- Sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the Community Service requirements will result in non-renewal of their lease.
- At each annual reexamination, non-exempt family members must present a completed documentation form (to be provided by AHA’s recertification area) of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed.
- If a family member is found to be noncompliant at re-examination, he/she and the Head of Household will sign an agreement with AHA to make up the deficient hours over the next twelve (12) month period.

5. Change in exempt status:

- If during the twelve (12) month period, a non-exempt person becomes exempt, it is his/her responsibility to report this to the management office and provide documentation of such.
- If, during the twelve (12) month period, an exempt person becomes non-exempt, it is his/her responsibility to report this to the

management office. AHA will provide the person with the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

AHA Obligations

1. To the greatest extent possible and practicable, AHA will:
 - Provide names and contacts at agencies that can provide opportunities for residents, including disabled, to fulfill their Community Service obligations. (According to the Quality Housing and Work Responsibility Act, a disabled person who is otherwise able to perform community service is not necessarily exempt from the Community Service requirement).
 - Provide in-house opportunities for volunteer service or self-sufficiency programs.
2. AHA management offices will provide the family with: Community Service Exemption Certification Form, Community Service Compliance Certification Form, Record and Certification of Community Service and Self-Sufficiency Activities Form and Caretaker Verification for Community Service Exemption Form, and a copy of this form at recertification.
3. AHA's Director of Property Management or their designee will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Residents may use the Grievance Procedure if they disagree with AHA's determination (see the dwelling lease).
4. Non-compliance of family member. The responsibility for enforcement will be with the Housing Manager/Management Aide.
 - At least thirty (30) days prior to annual reexamination and/or lease expiration, AHA will begin reviewing the exempt or non-exempt status and compliance of family members.
 - If AHA finds a family member to be non-compliant, the Property Management staff will enter into an agreement with the non-compliant member and the head of household to make up the deficient hours over the next twelve (12) month period.
 - If, at the next annual reexamination, the family member still is not compliant, the lease will not be renewed and the entire family will be issued a 30-day notice to vacate by the Housing Manager/Management Aide, unless the non-compliant member agrees to move out of the unit and a new lease is signed with the family amending its composition accordingly.
 - The family may use the Grievance Procedure to appeal the lease termination, after attending a private conference with the Housing Manager/Aide or other representative of AHA.

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Community Service Implementation Report: **CHANGE**

- Number of tenants required to perform community service: 24
- Number of tenants performing community service: 24
- Number of tenants granted exemptions: 264
- Number of tenants in non-compliance: 2
- Number of tenants terminated/evicted due to non-compliance: -0-

903.7(8) Safety and Crime Prevention **NO CHANGE**

The PHA's plan for safety and crime preventions to ensure the safety of the public housing residents is addressed below.

A. Need for measures to ensure the safety of public housing residents:

1. Describe the need for measures to ensure the safety of public housing residents. (select all that apply) **N/A**
2. What Information or data did the PHA use to determine the need for PHA actions to improve safety of residents (select all that apply).
 - Analysis of crime statistics over time for crimes committed "in and around" public housing authority
 - Police reports
 - Resident reports
3. Which developments are most affected? (list below)
 - Through partnership efforts the Aiken Housing Authority maintains a safe environment

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)
 - Volunteer Resident Patrol/Block Watchers Program
2. Which developments are most affected? (list below)
 - Through partnership efforts the Aiken Housing Authority maintains a safe environment

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)
 - Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
 - Police provide crime data to housing authority staff for analysis and action

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- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services

2. Which developments are most affected? (list below)

- Through partnership efforts the Aiken Housing Authority maintains a safe environment

903.7(9) Pets *NO CHANGE*

The Housing Authority of the City of Aiken (PHA), as a requirement of Section 526 of the Quality Housing and Work Responsibility Act (QHWRA) and HUD's Federal regulations dated July 10, 2000 (effective August 9, 2000), formulated this Pet Policy based upon local laws and local practices to administer HUD's requirement to allow residents of Public Housing to own pets. This policy is adopted in addition to the existing Pet Policy for the Elderly Public Housing complexes

1. In addition to the PHA's Lease, any family that desires to own a pet must enter into a Pet Agreement with the Housing Authority.
2. The PHA will permit one or more (no more than one per household of any type e.g. could have one dog and one bird, but not two dogs) of the following types of pet:

One (1) spayed or neutered* dog, adult weight of no more than 20 lbs (adult weight), no more than 18" in height; cannot be of a vicious or hostile breed: or
One (1) spayed or neutered* cat which must be declawed: or
One (1) bird which must be maintained in a cage at all times; or
One fish tank with maximum capacity of 20 gallons; or
One hamster or guinea pig which must be maintained in a cage at all times.

*If puppy or kitten, spaying or neutering must occur within six (6) months of age.

3. The Resident is responsible for any maintenance charges upon proper notification by the PHA of the damage and charges that should occur. The resident will be billed for the cost of repairs (as is the practice for any type of repair to damages caused by the resident or a member of the household).

A pet deposit in the amount of \$150.00 is required. At the termination of the Lease and the Pet Addendum, the PHA may use such amount as is reasonably necessary to repair damages or cleaning made necessary by said pet. At the termination of the Lease and Pet Addendum, any balance shall be added to the

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security deposit required under the lease, and thereafter, disbursed by Law. Resident is required to pay the PHA, upon demand by the PHA, for any damages or costs caused by the pet in excess of the security deposit.

Resident's liability for damages caused by his/her pet is not limited to the amount of the pet security deposit and the resident will be required to reimburse the PHA for the real cost of any and all damages caused by his/her pet where they exceed the amount of the pet security deposit. Soiling damages to walls, carpet, flooring or the ceiling of the unit below (if applicable) caused by breakage or spillage from an aquarium shall be the responsibility of the resident.

4. In the event of a pet causing a nuisance/disturbance or failure of the household to comply with the terms and conditions of the Pet agreement, the PHA will give written notice that the pet is to be removed from the premises. Failure to comply with the terms of the Pet Agreement or failure to remove the pet will be grounds for lease termination.
5. The PHA will not permit visiting pets and only pet and only pets authorized by an executed Pet Agreement are permitted.
6. In the event of default by the resident of any of the terms of this agreement/addendum, resident must agree, upon proper written notice of default from the PHA, to cure the default, remove the pet, or vacate the premises. The resident must agree that the PHA may revoke permission to keep said pet on the premises by giving the Resident proper written notice.
7. The Head-of-Household must provide annually to the Housing Authority proof of the pet's good health to include documentation supporting licensing, vaccination, spaying, neutering, and/or declawing for cats.
8. Dog and cats must be maintained within the pet owner's unit. When outside, the pet must be kept on a leash and under the control of the resident or resident's household at all times. Pets are not permitted to remain in common areas, community building, or the PHA's office. Pets must be hand carried through common areas such as stairways, etc.
9. Pet owners will be responsible for removal of pet waste. The PHA will impose a separate maintenance charge (see Maintenance Charge schedule) per occurrence for removal of pet waste should the resident fail to do so. Cat litter must not be disposed of by flushing down toilets and charges for unclogging toilets will be imposed should cat litter be found in a clogged line. Pet waste must be disposed of in sealed plastic trash bags.
10. Pet owners shall assume sole responsibility for liability arising from any injury sustained by any person that is attributable to an owner's pet. The resident must agree by execution of this Agreement to hold the Housing Authority harmless from and against any and all claims, actions, suits, judgments, and demands brought by any other party on accounts of or in connection with any activity of or damage caused by the Resident's pet.
11. Any pet which physically threatens an/or harms a resident, guest, or member of the PHA's staff or other authorized person, at any time, upon the project

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grounds, shall be considered a threat to safety, and the Resident will be given written notice to remove the pet. Consistent with local and state ordinance, the PHA shall take appropriate steps to have a pet removed from the premises in the event a pet causes physical harm or bodily injury to any resident, guest, or member of the PHA's staff or other authorized person, or in the event the pet owner fails to remove the pet after written notice.

12. Infestation of a unit or adjacent units or common areas shall be the responsibility of the pet owner and such pet owner agrees to incur the costs of eradication of any infestation upon notice by the PHA. In the event the pet owner does not resolve the infestation within five (5) days after adequate notice by the PHA, the PHA will initiate eradication and bill the resident for such cost.
13. No pet shall be left unattended in any unit for longer than ten (10) hours. The PHA will notify the SPCA of any pets that appear to be poorly cared for, left unattended in excess of the time herein stated, or in the event of mistreatment/cruelty. The Resident agrees that the PHA may exercise its right to enter the premises for removal of a pet, without prior notice, in the event of any emergency condition involving pet.
14. It is the responsibility of the pet owner to make arrangements for pets when away from the unit for more than a ten (10) hour period. In the event of any emergency or sudden illness of a sole member household, the resident must agree that the PHA shall have discretion with respect to the provision of care to the pet consistent with federal guidelines and at the expense of the pet owner, if applicable. In the event of any emergency, a contact person must be named.
15. In the event of the death of a sole member resident, the pet owner must agree that the PHA shall have discretion to dispose of the pet consistent with State guidelines unless written instructions regarding such disposal are provided to the PHA by the resident, or in the event named caretakers are unwilling to take responsibility for the pet.
16. The resident must agree to secure any pets when the PHA's staff is conducting inspections, maintenance work, etc. If notice has been given of inspections/maintenance, resident agrees to secure pet and put a notice outside door of the unit of the location of the pet should the resident leave the unit during the period of notice of inspection/maintenance.

903.7(10) Civil Rights Certification *CHANGE*

The PHA has examined its programs and proposed programs to identify any impediments to fair housing choices, has addressed those impediments in a reasonable fashion, and is working with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing. The PHA assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.

The PHA has taken the following specific actions to Affirmative Further Fair Housing in its public housing and Section 8 assistance programs.

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The PHA will not, on the grounds of race, color, creed, sex, religion, age, disability, national origin or familial status:

- Deny a person or family admission to housing or assistance;
- Provide housing which is different than that provided others, except for elderly and/or disabled where accessibility features may be required;
- Subject a person to segregation or disparate treatment;
- Restrict a person's access to any benefit enjoyed by others in connection with housing programs;
- Treat a person differently in determining eligibility or other requirements for admission or assistance;
- Deny any person access to the same level of services provided to others;
- Deny a person the opportunity to participate in a planning or advisory group that is an integral part of the housing programs.

The PHA will not intimidate, threaten or take any retaliatory action against any applicant, resident, or participant because of a person's participation in civil rights activities or assertions of civil rights.

HUD Fair Housing Posters are posted at the PHA main administrative office and at each development office.

The PHA will ensure accessibility to offices to afford persons with disabilities the opportunity to apply for admission or assistance to the public housing programs.

The PHA will make sure that all employees of the PHA are familiar with non-discrimination requirements, especially those employees who are involved in the admissions process.

The PHA prominently displays a fair housing poster at each office where applications are taken and at each management office.

The PHA's policies and practices are designed to provide assurance that all persons with disabilities will be provided reasonable accommodations so that they can fully access and utilize the housing programs and related services.

The PHA will identify and eliminate situations and /or practices that create barriers to equal housing opportunity for all.

The PHA reviews its policies and procedures, at least annually, to assure compliance with all civil rights requirements.

6.0 903.7(11) Fiscal Year Audit *CHANGE*

The PHA is required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)).

The most recent fiscal audit was submitted to HUD.

There were some findings as a result of that audit but all findings have been resolved.

903.7(12) Asset Management *NOT APPLICABLE*

903.7(13) Violence Against Women Act (VAWA) *NO CHANGE*

Title VI of the VAWA adds a new housing provision that establishes several categories of protected individuals. Under the law victims of domestic violence, dating violence, sexual assault, and stalking are granted protections and cannot be denied or terminated from housing or housing assistance because of activity that is directly related to domestic violence. 2005 VAWA Pub. L. 109-162; Stat. 2960 signed into law on January 5, 2006 and codified at 42 U.S.C. §1437d(l) and 1435f(d), (0) & 1 and (u).

1.0 Purpose

The purpose of this Policy is to reduce domestic violence, dating violence, and stalking and to prevent homelessness by:

- (a) Protecting the safety of victims;
- (b) Creating long-term housing solutions for victims’
- (c) Building collaborations among victim service providers; and
- (d) Assisting AHA to respond appropriately to the violence while maintaining a safe environment for AHA, employees, tenants, applicants, Section 8 participants, program participants and others.

This policy will assist the Aiken Housing Authority (AHA) in providing rights under the Violence Against Women Act to its applicants, public housing residents, Section 8 participants and other program participants.

This Policy is incorporated into AHA’s “Admission and Continued Occupancy Policy” and “Section 8 Administrative Plan” and applies to all AHA housing programs.

2.0 Definitions

The definitions in this Section apply only to this Policy.

2.1 Confidentiality: Means that AHA will not enter information provided to AHA by a victim alleging domestic violence into a shared database

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or provide this information to any related entity except as stated in 3.4.

Dating Violence: Violence committed by a person (a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (b) where the existence of such relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; (iii) the frequency of interaction between the persons involved in the relationship. 42 U.S.C. §1437d (u)(3)(A), § 13925.

Domestic Violence: Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, committed by a person with whom the victim shares a child in common, committed by a person who is cohabitating with or has cohabitated with the victim as a spouse, committed by a person similarly situated to a spouse of the victim under the domestic or family violence laws of South Carolina, or committed by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of South Carolina. 42 U.S.C. §1437d(u)(3)(B), § 13925.

Immediate Family Member: A spouse, parent, brother or sister, or child of a victim or an individual to whom the victim stands *in loco parentis*; or any other person living in the household of the victim and related to the victim by blood or marriage. 42 U.S.C. §1437d(u)(3)(D), § 13925.

Perpetrator: A person who commits an act of domestic violence, dating violence or stalking against a victim.

Stalking: (a) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate the victim; (b) to place under surveillance with the intent to kill, injure, harass or intimidate the victim; (c) in the course of, or as a result of such following, pursuit, surveillance, or repeatedly committed acts, to place the victim in reasonable fear of the death of, or serious bodily injury to the victim; or (d) to cause substantial emotional harm to the victim, a member of the immediate family of the victim or the spouse or intimate partner of the victim. 42 U.S.C. §1437d(u)(3)(C), § 13925.

Bona Fide Claim: A *bonafide* claim of domestic violence, dating violence or stalking must include incidents that meet the terms and conditions in the above definitions.

Victim: Is a person who is the victim of domestic violence, dating violence, or stalking under this Policy and who has timely and completely completed the certification under 3.2 and 3.3 or as requested by AHA.

3.0 Certification and Confidentiality

3.1 Failure to Provide Certification Under 3.2 and 3.3

The person claiming protection under VAWA shall provide complete and accurate certifications to AHA, owner or manager within 14 business days after the party requests in writing that the person

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completes the certifications. If the person does not provide a complete and accurate certification within the 14 business days, AHA, owner or manager may take action to deny or terminate participation or tenancy. 42 U.S.C. §14371 (5) &(6); 42 U.S.C. §1437F(c)(9); 42 U.S.C. §1437f(d)(1)(B)(ii)&(iii); 42 U.S.C. §1437f(o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20) or for other good cause.

3.2 HUD Approved Certification

For each incident that a person is claiming as abuse, the person shall certify to AHA, owner or manager, their victim status by completing a HUD approved certification form. The person shall certify the date, time and description of the incidents, that the incidents are *bonafide* incidents of actual or threatened abuses and meet the requirements of VAWA and this Policy. The person shall provide information to identify the perpetrator including but not limited to the name and, if known, all alias names, date of birth, address, contact information such as postal, e-mail or internet address, telephone or facsimile number or other identification.

3.3 Confirmation of Certification

A person who is claiming victim status shall provide to AHA, an owner or manager: (a) documentation signed by the victim and 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 domestic violence, dating violence or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. §1746) the professional's belief that the incident(s) in question are *bonafide* incidents of abuse; or (b) a federal, state, tribal, territorial, local police or court record.

3.4 Confidentiality

AHA, the owner and managers shall keep all information provided to AHA under this Section confidential. AHA, owner and manager shall not enter the information into a shared database or provide to any related entity except to the extent that:

- (a) the victim request or consents to the disclosure in writing;
- (b) the disclosure is required for:
 - i. eviction from public housing under 42 U.S.C. §14371(5)&(6)(See Section 4 on this Policy).
 - ii. termination of Section 8 assistance under 42 U.S.C. §1437f(c)(9); 42 U.S.C. §1437f(d)(1)(B)(ii)&(iii); 42 U.S.C. §1437f(o)(7)(C)&(D); 42 U.S.C. §1437f(o)(20)(See Section 4 on this Policy); or
- (c) the disclosure is required by applicable law.

4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy

4.1 AHA shall not deny participation or admission to a program on the basis of a person's abuse status, if the person otherwise qualifies for admission of assistance.

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- 4.2** An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be a serious or repeated violation of the lease by the victim and shall not be good cause for denying to a victim admission to a program, terminating Section 8 assistance or occupancy rights, or evicting a tenant.
- 4.3** Criminal activity directly related 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 of that domestic violence, dating violence or stalking.
- 4.4** Notwithstanding Sections 4.1, 4.2 and 4.3, AHA, an owner or manager may bifurcate a lease to evict, remove or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without evicting, removing, terminating assistance to or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. 42 U.S.C. §1437d(1)(6) (B).
- 4.5** Nothing in Sections 4.1, 4.2 and 4.3 shall limit the authority of AHA, an owner or manager, when notified, to honor court orders addressing rights of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members when the family breaks up.
- 4.6** Nothing in Sections 4.1, 4.2 and 4.3 limits AHA, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However, AHA, owner or manager may not hold a victim to a more demanding standard.
- 4.7** Nothing in Sections 4.1, 4.2 and 4.3 limits AHA, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the AHA, owner or manager can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.
- 4.8** Nothing in Sections 4.1, 4.2 and 4.3 limits AHA, an owner or manager's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including but not limited to acts of physical violence or stalking against family members or others.
- 4.9** A Section 8 recipient who moves out of an assisted dwelling unit to protect their health or safety and who: (a) is a victim under this Policy; (b) reasonably believes he or she was imminently threatened by harm from further violence if he or she remains in the unit; and (c) has complied with all other obligations of the Section 8 program may

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receive a voucher and move to another Section 8 jurisdiction.

5.0 Actions Against a Perpetrator

The AHA may evict, terminate assistance, deny admission to a program or trespass a perpetrator from its property under this Policy. The victim shall take action to control or prevent the domestic violence, dating violence, or stalking. The action may include but is not limited to: (a) obtaining and enforcing a restraining or not contact order or order for protection against the perpetrator; (b) obtaining and enforcing a trespass against the perpetrator; (c) enforcing AHA or law enforcement's trespass of the perpetrator; (d) preventing the delivery of the perpetrator's mail to the victim's unit; (e) providing identifying information listed in 3.2; and (f) other reasonable measures.

6.0 AHA Rights to Terminate Housing and Housing Assistance Under this Policy

6.1 Nothing in this Policy will restrict the AHA, owner or manager's right to terminate tenancy for lease violations by a resident who claims VAWA as a defense if it is determined by the AHA, owner or manager that such a claim is false.

6.2 Nothing in this Policy will restrict the AHA right to terminate tenancy if the victim tenant (a) allows a perpetrator to violate a court order relating to the act or acts of violence; (b) if the victim tenant allows a perpetrator who had been barred from AHA property to come onto AHA property including but not limited to the victim's unit or any other area under their control; or (c) if the victim tenant fails to cooperate with an established safety strategy as designed by a local victim support service provider (see 7.2).

6.3 Nothing in this Policy will restrict the AHA right to terminate housing and housing assistance if the victim tenant who claims as a defense to an eviction or termination action relating to domestic violence has engaged in fraud and abuse against a federal housing program; especially where such fraud and abuse can be shown to have existed before the claim of domestic violence was made. Such fraud and abuse includes but is not limited to unreported income and ongoing boarders and lodgers violations, or damage to property.

7.0 Statements of Responsibility of Tenant Victim, the AHA to the Victim, and to the Larger Community.

7.1 A tenant victim has no less duty and responsibility under the lease to meet and comply with the terms of the lease than any other tenant not making such a claim. Ultimately all tenants must be able to take personal responsibility for themselves and exercise control over their households in order to continue their housing and housing assistance. The AHA will continue to issue lease violation notices to all residents who violate the lease including those who claim a defense of domestic violence.

7.2 AHA recognizes the pathologic dynamic and cycle of domestic

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violence and a victim of domestic violence will be referred to local victim support service providers to help victims break the cycle of domestic violence through counseling, referral and development of a safety strategy.

7.3 A tenant victim must take personal responsibility for exercising control over their household by accepting assistance and complying with the safety strategy or plan to best of victims ability and reason under the circumstances. Failure to do this may be seen as other good cause.

7.4 All damages including lock changes will be the responsibility of the tenant victim. This is in keeping with other agency policies governing tenant caused damages.

8.0 Notice to Applicants, Participants, Tenants and Section 8 Managers and Owners

AHA shall provide notice to applicants, participants, tenants, managers and owners of their rights and obligations under Section 3.4 Confidentiality and Section 4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy. 8.1 If the AHA, owner or manager knows that an applicant to or participant in a AHA housing program is the victim of dating violence, domestic violence or stalking, the AHA, owner or manager shall inform that person of this Policy and the person's rights under it.

9.0 Reporting Requirements

AHA shall include in its 5-year plan a statement of goals, objectives, policies or programs that will service the needs of victims. AHA shall also include a description of activities, services or programs provided or offered either directly or in partnership with other service providers to victims, to help victims obtain or maintain housing or to prevent the abuse or to enhance the safety of victims.

10.0 Conflict and Scope

This Policy does not enlarge AHA's duty under any law, regulation or ordinance. If this Policy conflicts with the applicable law, regulation or ordinance, the law, regulation or ordinance shall control. If this Policy conflicts with another AHA policy such as its Statement of Policies or Section 8 Administrative Plan, this Policy will control.

11.0 The Executive Director may amend this policy when it is reasonably necessary to effectuate the Policy's intent, purpose or interpretation. The proposed amendment along with the rationale for the amendment shall be submitted to the Executive Director for consideration. Where reasonably necessary, the Executive Director may approve the amendment. The amendment shall be effective and incorporated on the date that the Executive Director signs the amendment.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.
*Include statements related to these programs as applicable. **NO CHANGE***

a. HOPE VI or Mixed Finance Modernization or Development

The PHA has not received a HOPE VI revitalization grant.

The PHA does not plan to apply for a HOPE VI Revitalization grant in the Plan year.

The PHA will be engaging in mixed-finance development activities for public housing in the Plan year.

1. Partner with Community Development & Improvement Corporation (CDIC), The City of Aiken, Aiken County and other agencies and organizations to preserve, develop, and/or manage affordable housing and other cooperative and entrepreneurial efforts.
2. Partner with the Aiken Housing Authority development arm and affiliate organization (Community Development & Improvement Corporation), the City of Aiken, Aiken County and other not for profit and for profit housing entities to create at least five homeownership and or rental units.
3. Seek out opportunities to produce additional affordable housing with federal resources (such as Replacement Vouchers) and/or other methods, while maintaining at least a ninety five percent (95%) lease-up and/or budget authority expenditure rate for the sixty (60) tenant preservation units received from the disposition of the Glendale Terrace privately owned development in Aiken County.
4. Seek out opportunities to provide additional affordable housing rental assistance through state resources (such as Tenant Based Rental Assistance), and maintain the TBRA funds received from the South Carolina State Housing Finance and Development Authority which provides thirty (30) families residing in HOME Assisted Units with rental assistance.
5. Develop five (5) additional public housing units utilizing replacement housing factor funds, received from the disposition of Garvin, Valley and Busch Homes.
6. Review the options presented by the proposed PETRA program with extreme interest, particularly with the Hahn Village Development as an opportunity.

The PHA will not be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement.

7.0 b. Demolition and/or Disposition

The PHA does not plan to conduct any demolition or disposition activities in the plan Fiscal Year.

c. Conversion of Public Housing

Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

The PHA does not have any developments or portions of developments identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act.

d. Homeownership

1. Public Housing

The PHA does not administer any homeownership programs for public housing.

2. Section 8 Tenant Based Assistance

The PHA does plan to administer a homeownership program for section 8.

e. Project-based Vouchers

Our agency is currently operating or intends to operate a Section 8 Project Based Voucher Program.

The Aiken Housing Authority has converted 175 vouchers to Project-based Assistance. The one hundred and seventy five units' comprises of Busch Homes (18), Villages at Horsecreek (69), Ridgeview Manor (88). The Housing Authority continues to look for units to put under Project-based Vouchers that are in the best interest of the clients.

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| 8.0 | Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. |
| 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>Required reports are included as following attachments:</p> <ul style="list-style-type: none"> ▪ 2011 Capital Fund Program Annual Estimate - attachment sc007a01 ▪ 2010 Performance and Evaluation Report - attachment sc007c01 ▪ 2010 RHF Performance and Evaluation Report -501 – attachment sc007d01 ▪ 2010 RHF Performance and Evaluation Report – 502 – attachment sc007e01 ▪ 2009 Performance and Evaluation Report - attachment sc007f01 ▪ 2009 ARRA Performance and Evaluation Report – attachment sc007g01 ▪ 2009 RHF Performance and Evaluation Report – 501 – attachment sc007h01 ▪ 2009 RHF Performance and Evaluation Report – 502 – attachment sc007i01 ▪ 2008 Performance and Evaluation Report – attachment sc007j01 ▪ 2008 RHF Performance and Evaluation Report – 501 – attachment sc007k01 ▪ 2008 RHF Performance and Evaluation Report – 502 – attachment sc007l01 ▪ 2007 RHF Performance and Evaluation Report – 501 – attachment sc007m01 ▪ 2007 RHF Performance and Evaluation Report – 502 – attachment sc007n01 |
| 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>Required report is included as following attachment:</p> <ul style="list-style-type: none"> ▪ FY 2011 Capital Fund Program 5 Year Action Plan - attachment sc007b01 |
| 8.3 | <p>Capital Fund Financing Program (CFFP). <i>N/A</i></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 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, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being “no impact” and 5 being “severe impact”.

| Housing Needs of Families on the Waiting List | | | |
|---|---------------|---------------------|-----------------|
| Waiting list type: (select one) | | | |
| <input type="checkbox"/> Section 8 tenant-based assistance | | | |
| <input checked="" type="checkbox"/> Public Housing | | | |
| <input type="checkbox"/> Combined Section 8 and Public Housing | | | |
| <input type="checkbox"/> 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 | 842 | | |
| Extremely low income <=30% AMI | 808 | 96% | |
| Very low income (>30% but <=50% AMI) | 28 | 3% | |
| Low income (>50% but <80% AMI) | 6 | 1% | |
| Families with children | 698 | 83% | |
| Elderly families | 6 | 1% | |
| Families with Disabilities | 29 | 3% | |
| White | 74 | 8% | |
| Black/African American | 685 | 81% | |
| American Indian/Alaska Native | 1 | 0.1% | |
| Asian | 1 | 0.1% | |
| Native Hawaiian/Other Pacific Islander | 0 | 0% | |
| Hispanic | 81 | 10% | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | 61 | 7% | |
| 2 BR | 370 | 44% | |
| 3 BR | 348 | 41% | |
| 4 BR | 63 | 8% | |
| 5 BR | N/A | N/A | |
| 5+ BR | N/A | N/A | |
| Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | |
| If yes: | | | |
| How long has it been closed (# of months)? 26 months | | | |
| Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | |
| Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

| Housing Needs of Families on the Waiting List | | | |
|--|---------------|---------------------|-----------------|
| Waiting list type: (select one) | | | |
| <input checked="" type="checkbox"/> Section 8 tenant-based assistance | | | |
| <input type="checkbox"/> Public Housing | | | |
| <input type="checkbox"/> Combined Section 8 and Public Housing | | | |
| <input type="checkbox"/> 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 | 1864 | | |
| Extremely low income <=30% AMI | 1479 | 79% | |
| Very low income (>30% but <=50% AMI) | 337 | 18% | |
| Low income (>50% but <80% AMI) | 46 | 3% | |
| Families with children | 1379 | 74% | |
| Elderly families | 34 | 2% | |
| Families with Disabilities | 54 | 3% | |
| White | 142 | 8% | |
| Black/African American | 1708 | 92% | |
| American Indian/Alaska Native | 9 | 0.5% | |
| Asian | 1 | 0.05% | |
| Native Hawaiian/Other Pacific Islander | 0 | 0% | |
| Hispanic | 4 | 0.2% | |
| Characteristics by Bedroom Size (Public Housing Only) | | | |
| 1BR | N/A | N/A | |
| 2 BR | N/A | N/A | |
| 3 BR | N/A | N/A | |
| 4 BR | N/A | N/A | |
| 5 BR | N/A | N/A | |
| 5+ BR | N/A | N/A | |
| Is the waiting list closed (select one)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | |
| If yes: | | | |
| How long has it been closed (# of months)? 12 months | | | |
| Does the PHA expect to reopen the list in the PHA Plan year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

9.1 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. NO CHANGE**

Strategies

Need: Shortage of affordable housing for all eligible populations

PHA shall 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
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies

PHA shall increase the number of affordable housing units by:

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed-finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance

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

PHA shall 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

PHA shall 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

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Need: Specific Family Types: The Elderly

PHA shall target available assistance to the elderly:

- Seek designation of public housing for the elderly
- Families who are elderly and disabled, will be offered housing before other single persons.
- Buildings Designed for the Elderly and Disabled (Mixed Population Development): Preference will be given to elderly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near-elderly families. If there are no near-elderly families on the waiting list, units will be offered to families who qualify for the appropriate bedroom size using these priorities. All such families will be selected from the waiting list using the preferences as outlined above.

Need: Specific Family Types: Families with Disabilities

PHA shall target available assistance to Families with Disabilities:

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Buildings Designed for the Elderly and Disabled (Mixed Population Development): Preference will be given to elderly and disabled families. If there are no elderly or disabled families on the list, preference will then be given to near-elderly families. If there are no near-elderly families on the waiting list, units will be offered to families who qualify for the appropriate bedroom size using these priorities. All such families will be selected from the waiting list using the preferences as outlined above.
- Accessible Units: Accessible units will be first offered to families who may benefit from the accessible features. Applicants for these units will be selected utilizing the same preference system as outlined above. If there are not applicants who would benefit from the accessible features, the units will be offered to other applicants in the order that their names come to the top of the waiting list. Such applicants, however, must sign a release form stating they will accept a transfer (at their own expense) if, at a future time, a family requiring an accessible feature applies. Any family required to transfer will be given a 30-day notice.

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

PHA shall increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

- Services for Non-English speaking applicants and residents: All applicants that appear to be experiencing difficulties communicating in English will be asked if they need to communicate in a language other than English (including sign language or Braille). Their needs will be accommodated as much as possible. If another family member or a friend can translate, this option will be utilized to the

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| <p>9.1</p> | <p>maximum degree possible. The Aiken Housing Authority will endeavor to have bilingual staff or access to people who speak languages other than English.</p> <ul style="list-style-type: none"> ▪ Family Outreach: The Housing Authority will publicize whenever appropriate the availability and nature of the Public Housing Program for extremely low-income, very low and low-income families in a newspaper of general circulation, minority media and by other suitable means. To reach persons who cannot or do not read the newspapers; the Housing Authority will distribute fact sheets to the broadcasting media and initiate personal contacts with members of the news media and community service personnel. The Housing Authority will also try to utilize public service announcements. The Housing Authority will communicate the status of housing availability to other service providers in the community and inform them of housing eligibility factors and guidelines so they can make proper referrals for the Public Housing Program. <p>PHA shall conduct activities to affirmatively further fair housing</p> <ul style="list-style-type: none"> ▪ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units ▪ Market the section 8 program to owners outside of areas of poverty/minority concentrations <p>Reason for Selecting Strategies</p> <ul style="list-style-type: none"> ▪ Funding and staffing constraints ▪ Limited availability of sites for assisted housing ▪ Influence of the housing market on AHA programs |
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10.0 Additional Information. Describe the following, as well as any additional information HUD has requested.

(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).**

The mission of the Aiken Housing Authority is to provide adequate, affordable and well-maintained housing that promotes a positive family living environment. Additionally, we will provide access to programs and guidance that encourages our families to, 1) decrease dependence upon the provision of housing assistance, 2) utilize pathways to homeownership, and 3) become self-reliant. Through our agency's strong public, private and not-for-profit partnerships, we are building strong communities with an exceptional quality of life.

PHA GOAL #1: THE AIKEN HOUSING AUTHORITY WILL ACTIVELY GARNER RESOURCES FOR HOUSING PRESERVATION AND DEVELOPMENT.

- Partner with Community Development & Improvement Corporation (CDIC), and other agencies and organizations to preserve, develop, and/or manage affordable housing and other cooperative and entrepreneurial efforts.
- Partner with the Aiken Housing Authority development arm and affiliate organization (Community Development & Improvement Corporation), the City of Aiken, Aiken County and other not for profit and for profit entities to create at least five homeownership and or rental units.
- Seek out opportunities to produce additional affordable housing with federal resources (such as Replacement Vouchers) and/or other methods, while maintaining at least a ninety five percent (95%) lease-up and/or budget authority expenditure rate for the sixty (60) tenant preservation units received from the disposition of the Glendale Terrace privately owned development in Aiken County.
- Seek out opportunities to provide additional affordable housing rental assistance through state resources (such as Tenant Based Rental Assistance), and maintain the TBRA funds received from the South Carolina State Housing Finance and Development Authority which provides thirty (30) families residing in HOME Assisted Units with rental assistance.
- Develop five (5) additional public housing units utilizing replacement housing factor funds, received from the disposition of Garvin, Valley and Busch Homes.
- Continue to set-aside twenty-percent of the agency's Section 8 Housing Choice Vouchers as Section 8 Project Based units. This set aside will be conducted in a fashion that's most suitable for the tenant.

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Progress Statement: In partnership with the Community Development & Improvement Corporation, the Aiken Housing Authority was awarded a Brownfields Job Training Grant in the amount of \$200,000 from the Environmental Protection Agency (EPA) in order to provide funds for curriculum development, community outreach, recruitment, screening, training and follow up services to individuals residing in Brownfield impacted areas in Aiken and surrounding. The program provides training to individuals who are also enrolled in the authority's WIA Job Training Program (funded by Lower Savannah Workforce Investment Area).

The Aiken Housing Authority, through the Housing and Urban Development's (HUD) Replacement Housing Factor Funds (RHFF) Program, increased its public housing stock from (244) Public Housing Units to (246) Public Housing Units. Two single family dwellings, two (2) and three (3) bedrooms, were completed and one hundred percent 100% occupied in October 2010.

The Aiken Housing Authority partnered with the Community Development & Improvement Corporation to provide maintenance and grounds keeping services for over four-hundred (400) CDIC owned properties.

PHA GOAL #2: THE AIKEN HOUSING AUTHORITY WILL CONTINUE TO MAKE CAPITAL IMPROVEMENTS TO ITS CURRENT HOUSING STOCK

- Continue renovating public housing properties and making capital improvements designed to increase the livability standards of our residents, while preserving the asset.
- Maintain high quality and timely design, bidding, and construction.
- Continue to actively involve residents, staff and the community in planning capital improvements.

Progress Statement: The Aiken Housing Authority continues to enhance its housing stock. New, durable quality mailboxes were installed in its Low Rent Public Housing Development, Hahn Village. The new mailboxes are centrally located, secure and provide easier resident access.

The Aiken Housing Authority removed old, damaged playground equipment from its Low Rent Public Housing Development, New Hope. The removal of the equipment provides a safer environment for the children in the development and maintains the physical integrity of the neighborhood.

The Aiken Housing Authority improved its curb appeal for Low Rent Public Housing Development, Hahn Village. Small wood chips were placed throughout the property (100 units), removing any trip hazards.

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PHA GOAL #3: THE AIKEN HOUSING AUTHORITY WILL CONTINUE TO PROVIDE RESOURCES TO ENSURE EMPLOYEE AND ORGANIZATIONAL DEVELOPMENT

- Promote education, growth and advancement of employees through career planning, training opportunities, industry certifications and other resources.
- Continue internal rethinking strategies to promote organization development, continuous improvement, and appropriate rethinking strategies to promote organization development, continuous improvement, and appropriate responses to budget challenges and program changes.
- Continue active leadership in national and state housing organizations especially to advocate for full funding and program reform.

Progress Statement: The Aiken Housing Authority continues to provide venues and/or opportunities that foster employee development and organizational growth. In partnership with professional consulting firm, Hargrove Leadership Associates, AHA held a mandatory “Team Retreat” on leadership. The workshop was interactive, with a focal point of leadership development.

The Aiken Housing Authority held its first strategic planning session, during its Annual Employee Retreat. The Retreat created an atmosphere for creative ideas and idea exchanges amongst the AHA team that would ultimately promote by employee and organizational growth.

PHA GOAL #4: THE AIKEN HOUSING AUTHORITY WILL CONTINUE LINKING ITS RESIDENTS WITH THE TOOLS NECESSARY TO BECOMING SELF-RELIANT INDIVIDUALS AND FAMILIES THROUGH DIRECTLY PROVIDING AND OR LINKING THEM TO COMMUNITY, WORKFORCE AND HOUSING PROGRAMS

- Promote links to community service that meets the changing needs of Aiken Housing Authority residents, focusing on programs and services that enrich resident’s lives, promote independence, increase community involvement and support successful tenancies in public housing.
- Provide residents with opportunities for Section 3 Resident and Business opportunities to the greatest extent feasible. AHA will hire qualified residents and participants in AHA housing programs and other low income residents, with a focus on promoting training opportunities. AHA will also contract with Section 3 businesses and require other businesses seeking AHA contracts to hire qualified Section 3 residents or to subcontract to Section 3 businesses.
- Continue seeking Workforce Investment Act (WIA) funding through the United States Department of Labor to provide families with the resources to address barriers to education and employment opportunities.
- Continue partnering with the Corporation for National and Community Service to provide residents with volunteer opportunities through the AmeriCorps VISTA Program.

10.0

Progress Statement: The Aiken Housing Authority, in partnership with the Lower Savannah Council of Governments Workforce Investment Act Programs, continues to link residents with the tools necessary to become self-reliant individuals and families. There are currently fifty-two (52) Housing Choice Voucher Section 8 Program participants and twenty-one (21) Low Rent Public Housing Program participants actively enrolled in various components of the WIA Career and Training Services. Participants continue to receive employment opportunities and/or skills that promote self-sufficiency.

The Aiken Housing Authority was awarded the Adults and Dislocated Worker Grants by the Lower Savannah Council of Governments Workforce Investment Act (WIA). AHA coordinates with LSWIA Regional One-Stop Career Center Partners, LSWIA Business Services Division, the Greater Aiken Chamber of Commerce, Midland Valley Chamber of Commerce, North Augusta Chamber of Commerce, and other entities to provide employment and training services for both job seekers and employers throughout Aiken County.

The Aiken Housing Authority was awarded six (6) Volunteers through the Corporation for National and Community Service's Volunteers in Service to America (VISTA) Program. The Volunteers work in various departments in the agency, gaining valuable, transferable work skills. The Volunteers through the completion of special tasks and projects, continues to increase AHA's capacity.

PHA GOAL #5: THE AIKEN HOUSING AUTHORITY WILL CONTINUE TO IMPROVE THE RESIDENT EXPERIENCE THROUGH CUSTOMARY, MODERN DAY AND ADVANCED TECHNOLOGY BY TAILORING ITS OUTREACH EFFORTS TO MEET THE NEEDS OF ITS FAMILIES AND COMMUNITIES

- Provide written information to families and customers through avenues, including an Annual Agency Calendar, and a monthly newsletter.
- Ensure the delivery of valuable information to improve the resident and/or family experience, through the dissemination of information in the form of an Annual Calendar.
- Utilize various social media outlets such as facebook, twitter, etc. to improve the customer experience.
- Provide agency information to our customers and our residents through the creation of Ecommerce e-campaigns.
- Develop an interactive website that will allow for the transmission of information (i.e. downloading applications, posting available properties for rental, change of family information, etc.) making it convenient for residents and/or customers to obtain information.

Progress Statement: The Aiken Housing Authority in partnership with Lower Savannah Council of Governments, Aiken Technical College, North Elementary, Aiken Barnwell Head Start, and other partners launched the "Center of Excellence." The Center of

10.0

Excellence is a 300 square feet technology and education resource center with amenities as follows:

- 12 Work Stations – Dell OptiPlex 380 Desktop Computers
- White Board
- Projector
- Dedicated Printer
- Dedicated Fax Line/Fax Machine
- Flat Screen TV
- Presentation Podium

All computers are equipped with Microsoft Office 2010, including Outlook, Word, Excel, and PowerPoint. The computer lab has a designated IP Address with a secure network.

The Aiken Housing Authority maintains strong relationships with its Resident Associations, developing an Annual Resident Calendar. The calendar serves as a friendly reminder of important dates, including Aiken Housing Authority office hours, rental payment due dates, and office closings/holiday hours. The calendar also includes emergency contact numbers, information on how to access community resources, helpful tips for saving money and reducing energy costs, and lots more.

The Aiken Housing Authority maintains strong relationships with its Resident Associations, developing a Quarterly Resident Newsletter. The newsletter encourages resident involvement, highlighting resident and/or community activities, allowing residents to collectively celebrate important dates such as birthdays and anniversaries. The newsletter also highlights agency activities, soliciting resident feedback and/or involvement in agency programs and activities..

In an effort to expose Low Rent Public Housing residents to innovative programs outside of the local community, the Aiken Housing Authority sponsors the participation of two (2) residents at the Carolinas Council of Housing and Redevelopment Officials Resident Retreat. The retreat includes training seminars aimed at increasing the capacity of individuals and families to become self-sufficient, to revitalize communities, and to build the stability and capacity of children, youth and families so that they become able to create their own opportunities.

10.0 (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.**)

Substantial Deviations from the 5-Year Plan

- Any change in the planned or actual use of federal funds for activities that would prohibit or redirect the Housing Authority’s strategic goals of increasing the availability of decent, safe and affordable housing for the citizens of the City of Aiken.
- Any single or cumulative annual change in the planned or actual use of federal funds as identified in the five-year plan that exceeds 20% of the Aiken Housing Authority’s annual program budgets for Section 8 or public housing activities.
- A need to respond immediately to Acts of God beyond the control of the Housing Authority, such as a hurricane or other unforeseen significant event.
- A mandate from local government officials, specifically the governing board of the Housing Authority, to modify, revise, or delete the long-range goals and objectives of the program.

Significant Amendments or Modification to the Annual Plan

- Changes to rent or admissions policies or organization of the waiting list;
- Any change with regard to homeownership program; and
- A change in the planned or use of Capital Funds that results in a financial deviation that exceeds 20% of the Annual Budget.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; HUD does not consider such changes significant amendments.

(c) PHA’s must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. *N/A*

| | |
|-------------|---|
| 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 style="padding-left: 40px;">Provided as attachment sc007o01</p> <p>(g) Challenged Elements – NO ELEMENTS CHALLENGED</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 style="padding-left: 40px;">Provided as attachments sc007a01, sc007c01, sc007d01, sc007e01, sc007f01, sc007g01, sc007h01, sc007i01, sc007j01, sc007k01, sc007l01, sc007m01 and sc007n01.</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p> <p style="padding-left: 40px;">Provided as attachment sc007b01</p> |
|-------------|---|

Attachment: sc007a01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16P007501-11 Replacement Housing Factor Grant No: Date of CFFP: 01/2006 | | | FFY of Grant: 2011 FFY of Grant Approval: | |
| 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 ¹ | | |
| | | Original | Revised ² | Obligated | Expended | |
| 1 | Total non-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 82,245.00 | | 0.00 | 0.00 | |
| 3 | 1408 Management Improvements | 8,657.96 | | 0.00 | 0.00 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 41,122.00 | | 0.00 | 0.00 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 5,000.00 | | 0.00 | 0.00 | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 0.00 | | 0.00 | 0.00 | |
| 10 | 1460 Dwelling Structures | 88,340.00 | | 0.00 | 0.00 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | 10,500.00 | | | | |
| 13 | 1475 Non-dwelling Equipment | 31,500.00 | | 0.00 | 0.00 | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | |

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16P007501-11 Replacement Housing Factor Grant No: Date of CFFP: 01/2006 | | | FFY of Grant:2011 FFY of Grant Approval: | |
| 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 ¹ | | |
| | | Original | Revised ² | Obligated | Expended | |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 143,861.04 | | 0.00 | 0.00 | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 411,226.00 | | 0.00 | 0.00 | |
| 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 | | | | | |
| Signature of Executive Director | | Date | | Signature of Public Housing Director | | |
|  | | 6.21.2011 | | | | |

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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750111 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: | | | Federal FFY of Grant: 2011 | | |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | Development Account No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| HA Wide | Operations | 1406 | | | | | | |
| | Public Housing Operations | | LS | 82,245.00 | | 0.00 | 0.00 | |
| | Subtotal Acct 1406 | | | 82,245.00 | | 0.00 | 0.00 | |
| HA Wide | Management Improvement | 1408 | | | | | | |
| | Computer Hardware upgrade, consulting fees,office equipment, training | | LS | 8,657.96 | | 0.00 | 0.00 | |
| | Subtotal Acct 1408 | | | 8,657.96 | | 0.00 | 0.00 | |
| HA Wide | Administration | 1410 | | | | | | |
| | FP Administration: Salaries & Benefits | | LS | 41,122.00 | | 0.00 | 0.00 | |
| | Subtotal Acct 1410 | | | 41,122.00 | | 0.00 | 0.00 | |
| HA Wide | Fees and Costs | 1430 | | | | | | |
| | A & E Fees; Reimbursable Costs | | LS | 5,000.00 | | 0.00 | 0.00 | |
| | Subtotal Acct 1430 | | | 5,000.00 | | 0.00 | 0.00 | |
| | Dwelling Structures | 1460 | | | | | | |
| SC007-5B | Plumbing Fixtures-Kitchen & Bath- Bradby | 18 | | 18,900.00 | | 0.00 | 0.00 | |
| SC007-5B | Furnaces - Bradby | | 2 | 6,000.00 | | 0.00 | 0.00 | |
| SC007-6 | Windows - Hahn | 36 | | 35,000.00 | | 0.00 | 0.00 | |
| SC007-6 | Gutters-Hahn | | 35 | 10,000.00 | | 0.00 | 0.00 | |
| SC007-6 | Hot Water Heaters-Hahn | | 4 | 1,440.00 | | 0.00 | 0.00 | |

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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750111 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: | | | Federal FFY of Grant: 2011 | | |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | Development Account No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| SC007-8 | Cabinets-New Hope I | | 3 | 10,000.00 | | 0.00 | 0.00 | |
| SC007-9 | Cabinets-New Hope II | | 2 | 7,000.00 | | 0.00 | 0.00 | |
| | Subtotal Acct 1460 | | | 88,340.00 | | 0.00 | 0.00 | |
| | Non-Dwelling Structure | 1470 | | | | | | |
| | Carpet/Flooring-Admin Building | | | 4,000.00 | | 0.00 | 0.00 | |
| | Awning-Admin Office | | | 6,500.00 | | 0.00 | 0.00 | |
| | Subtotal Acct 1470 | | | 10,500.00 | | 0.00 | 0.00 | |
| | Non-Dwelling Equipment | 1475 | | | | | | |
| HA Wide | Office Furniture | | | 7,000.00 | | 0.00 | 0.00 | |
| SC007-8 | Security Camera System-New Hope I | | | 6,000.00 | | 0.00 | 0.00 | |
| SC007-9 | Security Camera System-New Hope II | | | 6,000.00 | | 0.00 | 0.00 | |
| HA Wide | Telephone System Upgrade | | | 12,500.00 | | 0.00 | 0.00 | |
| | Subtotal Acct 1475 | | | 31,500.00 | | 0.00 | 0.00 | |
| | Collateralization or Debt Service | 9000 | | | | | | |
| HA -Wide | Capital Fund Borrowing Program Debt Service | | | 143,861.04 | | 0.00 | 0.00 | |
| | Subtotal Acct 9000 | | | 143,861.04 | | 0.00 | 0.00 | |
| | Grand Total | | | 411,226.00 | | 0.00 | 0.00 | |

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: Housing Authority of the City of Aiken | | | | Federal FFY of Grant: 2011 | |
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates ¹ |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| HA Wide | 09/15/13 | | 09/15/15 | | |
| SC007-2 | 09/15/13 | | 09/15/15 | | |
| SC007-5B | 09/15/13 | | 09/15/15 | | |
| SC007-6 | 09/15/13 | | 09/15/15 | | |
| SC007-8 | 09/15/13 | | 09/15/15 | | |
| SC007-9 | 09/15/13 | | 09/15/15 | | |
| | | | | | |
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| | | | | | |
| | | | | | |

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
 Expires 4/30/2011

Attachment: sc007b01

| Part I: Summary | | | | | | |
|--|---|---|--|--|--|--|
| PHA Name/Number Housing Authority of the City of Aiken SC 007 | | Locality (City/County & State) Aiken, Aiken County, South Carolina | | | <input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 1 | |
| A. | Development Number and Name | Work Statement for Year 1 FFY_2011_____ | Work Statement for Year 2 FFY_2012_____ | Work Statement for Year 3 FFY_2013_____ | Work Statement for Year 4 FFY_2014_____ | Work Statement for Year 5 FFY_2015_____ |
| | | | 10/1/12 - 9/30/13 | 10/1/13 - 9/30/14 | 10/1/14 - 9/30/15 | 10/1/15 - 10/1/16 |
| B. | Physical Improvements Subtotal | Annual Statement | 127,940.00 | 127,500.00 | 100,000.00 | 51,753.00 |
| C. | Management Improvements | | 8,057.96 | 11,497.96 | 8,997.96 | 82,244.96 |
| D. | PHA-Wide Non-dwelling Structures and Equipment | | 3,000.00 | 0.00 | 30,000.00 | 0.00 |
| E. | Administration | | 41,122.00 | 41,122.00 | 41,122.00 | 41,122.00 |
| F. | Other | | 5,000.00 | 5,000.00 | 5,000.00 | 10,000.00 |
| G. | Operations | | 82,245.00 | 82,245.00 | 82,245.00 | 82,245.00 |
| H. | Demolition | | | | | |
| I. | Development | | | | | |
| J. | Capital Fund Financing – Debt Service | | 143,861.04 | 143,861.04 | 143,861.04 | 143,861.04 |
| K. | Total CFP Funds | | 411,226.00 | 411,226.00 | 411,226.00 | 411,226.00 |
| L. | Total Non-CFP Funds | | | | | |
| M. | Grand Total | | 411,226.00 | 411,226.00 | 411,226.00 | 411,226.00 |

| Part II: Supporting Pages – Physical Needs Work Statement(s) | | | | | | |
|---|---|----------|-------------------|---|----------|-------------------|
| Work Statement for Year 1 FFY ____2011__ | Work Statement for Year ____2____ FFY 2012 | | | Work Statement for Year: ____3____ FFY 2013 | | |
| | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost |
| See Annual Statement | Site Improvements (1450) | | | Site Improvements (1450) | | |
| | SC007-6 Hahn | | | SC007-6 Hahn | | |
| | Tenant Mailboxes | | | Tenant Mailboxes | | |
| | Total Acct 1450 | | | Total Acct 1450 | | |
| | | | | | | |
| | Dwelling Structures (1460) | | | Dwelling Structures (1460) | | |
| | SC007-5B Bradby | | | SC007-5B Bradby | | |
| | Plumbing Fixtures | | | Plumbing Fixtures | | |
| | SC007-6 Hahn | | | SC007-6 Hahn | | |
| | Apartment Renovation | | | Apartment Renovation | | |
| | Gutters | | | Gutters | | |
| | Windows | 11 units | 10,000.00 | Windows | 21 units | 20,000.00 |
| | Plumbing Fixtures | 22 units | 20,000.00 | Plumbing Fixtures | 39 units | 35,000.00 |
| | Kitchen Counter Tops | 50 units | 20,000.00 | Kitchen Counter Tops | 50 units | 20,000.00 |
| | Water Heaters | 16 units | 7,440.00 | Water Heaters | | |
| | Subtotal SC007-6 | | 57,440.00 | Subtotal SC007-6 | | 75,000.00 |
| | SC007-8 New Hope I | | | SC007-8 New Hope I | | |
| | Kitchen Cabinets | 8 units | 46,500.00 | Kitchen Cabinets | 7 units | 22,000.00 |
| | SC007-9 New Hope II | | | SC007-9 New Hope II | | |
| | Kitchen Cabinets | 9 units | 24,000.00 | Kitchen Cabinets | 9 units | 30,500.00 |
| | Total Acct 1460 | | 127,940.00 | Total Acct 1460 | | 127,500.00 |
| | | | | | | |
| | Physical Improvement Subtotal | | 127,940.00 | Physical Improvement Subtotal | | 127,500.00 |

Capital Fund Program—Five-Year Action Plan

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

| | | | | | | |
|--|---|--|----------------------|---|--|----------------------|
| | <i>Non-Dwelling Structure (1470)</i> | | | <i>Non-Dwelling Structure (1470)</i> | | |
| | HA Wide | | | HA Wide | | |
| | Office Cubicles-Admin | | | Office Cubicles-Admin | | |
| | Carpet/Flooring-Admin | | | Carpet/Flooring-Admin | | |
| | Awning-Admin Office | | | Awning-Admin Office | | |
| | Lobby Renovation Admin Office | | | Lobby Renovation Admin Office | | |
| | <i>Subtotal HA Wide</i> | | | <i>Subtotal HA Wide</i> | | |
| | <i>Total Acct 1470</i> | | | <i>Total Acct 1470</i> | | |
| | | | | | | |
| | <i>Non-Dwelling Equipment (1475)</i> | | | <i>Non-Dwelling Equipment (1475)</i> | | |
| | SC007-5B Bradby | | | SC007-5B Bradby | | |
| | Security Camera System | | 3,000.00 | Security Camera System | | |
| | SC007-8 New Hope I | | | SC007-8 New Hope I | | |
| | Security Camera System | | | Security Camera System | | |
| | SC007-9 New Hope II | | | SC007-9 New Hope II | | |
| | Security Camera System | | | Security Camera System | | |
| | HA Wide | | | HA Wide | | |
| | Company Automobile | | | Company Automobile | | |
| | Office Furniture | | | Office Furniture | | |
| | Telephone System Upgrade | | | Telephone System Upgrade | | |
| | <i>Subtotal HA Wide</i> | | | <i>Subtotal HA Wide</i> | | |
| | <i>Total Acct 1475</i> | | 3,000.00 | <i>Total Acct 1475</i> | | |
| | | | | | | |
| | PHA-Wide Non-Dwelling Structures & Equipment | | 3,000.00 | PHA-Wide Non-Dwelling Structures & Equipment | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Subtotal of Estimated Cost | | \$ 130,940.00 | Subtotal of Estimated Cost | | \$ 127,500.00 |

| Part II: Supporting Pages – Physical Needs Work Statement(s) | | | | | | |
|---|---|----------|-------------------|---|----------|------------------|
| Work Statement for Year 1 FFY <u>2011</u> | Work Statement for Year <u>4</u> FFY <u>2014</u> | | | Work Statement for Year: <u>5</u> FFY <u>2015</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 | | | | | | |
| Annual | Site Improvements (1450) | | | Site Improvements (1450) | | |
| Statement | SC007-6 Hahn | | | SC007-6 Hahn | | |
| | Tenant Mailboxes | | | Tenant Mailboxes | | |
| | Total Acct 1450 | | | Total Acct 1450 | | |
| | | | | | | |
| | Dwelling Structures (1460) | | | Dwelling Structures (1460) | | |
| | SC007-5B Bradby | | | SC007-5B Bradby | | |
| | Plumbing Fixtures | | | Plumbing Fixtures | | |
| | SC007-6 Hahn | | | SC007-6 Hahn | | |
| | Apartment Renovation | | | Apartment Renovation | 4 units | 51,753.00 |
| | Gutters | | | Gutters | | |
| | Windows | 32 units | 30,000.00 | Windows | | |
| | Plumbing Fixtures | 39 units | 35,000.00 | Plumbing Fixtures | | |
| | Kitchen Counter Tops | | | Kitchen Counter Tops | | |
| | Water Heaters | | | Water Heaters | | |
| | Subtotal SC007-6 | | 65,000.00 | Subtotal SC007-6 | | 51,753.00 |
| | SC007-8 New Hope I | | | SC007-8 New Hope I | | |
| | Kitchen Cabinets | | | Kitchen Cabinets | | |
| | SC007-9 New Hope II | | | SC007-9 New Hope II | | |
| | Kitchen Cabinets | 13 units | 35,000.00 | Kitchen Cabinets | | |
| | Total Acct 1460 | | 100,000.00 | Total Acct 1460 | | 51,753.00 |
| | | | | | | |
| | Physical Improvement Subtotal | | 100,000.00 | Physical Improvement Subtotal | | 51,753.00 |
| | | | | | | |
| | | | | | | |

Capital Fund Program—Five-Year Action Plan

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

| | | | | | | |
|--|---|-----------|-------------------|---|-----------|-------------|
| | <i>Non-Dwelling Structure (1470)</i> | | | <i>Non-Dwelling Structure (1470)</i> | | |
| | HA Wide | | | HA Wide | | |
| | Office Cubicles-Admin | | | Office Cubicles-Admin | | |
| | Carpet/Flooring-Admin | | | Carpet/Flooring-Admin | | |
| | Awning-Admin Office | | | Awning-Admin Office | | |
| | Lobby Renovation Admin Office | | | Lobby Renovation Admin Office | | |
| | Subtotal HA Wide | | | Subtotal HA Wide | | |
| | Total Acct 1470 | | | Total Acct 1470 | | |
| | | | | | | |
| | <i>Non-Dwelling Equipment (1475)</i> | | | <i>Non-Dwelling Equipment (1475)</i> | | |
| | SC007-5B Bradby | | | SC007-5B Bradby | | |
| | Security Camera System | | | Security Camera System | | |
| | SC007-8 New Hope I | | | SC007-8 New Hope I | | |
| | Security Camera System | | | Security Camera System | | |
| | SC007-9 New Hope II | | | SC007-9 New Hope II | | |
| | Security Camera System | | | Security Camera System | | |
| | HA Wide | | | HA Wide | | |
| | Company Automobile | | 30,000.00 | Company Automobile | | |
| | Office Furniture | | | Office Furniture | | |
| | Telephone System Upgrade | | | Telephone System Upgrade | | |
| | Subtotal HA Wide | | | Subtotal HA Wide | | |
| | Total Acct 1475 | | 30,000.00 | Total Acct 1475 | | |
| | | | | | | |
| | PHA-Wide Non-Dwelling Structures & Equipment | | 30,000.00 | PHA-Wide Non-Dwelling Structures & Equipment | | |
| | | | | | | |
| | Subtotal of Estimated Cost | \$ | 130,000.00 | Subtotal of Estimated Cost | \$ | 0.00 |

| Part III: Supporting Pages – Management Needs Work Statement(s) | | | | |
|--|--|---------------------|--|---------------------|
| Work Statement for Year 1 FFY 2011 | Work Statement for Year <u>2</u> FFY 2012 | | Work Statement for Year: <u>3</u> 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 | Operations (1406) | | | |
| Annual | Public Housing Operations | 82,245.00 | Public Housing Operations | 82,245.00 |
| Statement | Subtotal Acct 1406 | 82,245.00 | Subtotal Acct 1406 | 82,245.00 |
| | | | | |
| | Management Improvement (1408) | | Management Improvement (1408) | |
| | Computer hardware upgrades, consulting fees; office equipment; Resident Managers' training | 8,057.96 | Computer software & hardware upgrades, consulting fees; office equipment; training | 11,497.96 |
| | Subtotal Acct 1408 | 8,057.96 | Subtotal Acct 1408 | 11,497.96 |
| | | | | |
| | Administration (1410) | | Administration (1410) | |
| | CFP Administration; Salaries & Benefits | 41,122.00 | CFP Administration; Salaries & Benefits | 41,122.00 |
| | Subtotal Acct 1410 | 41,122.00 | Subtotal Acct 1410 | 41,122.00 |
| | | | | |
| | Fees and Costs (1430) | | Fees and Costs (1430) | |
| | A & E Fees; Reimbursable Costs | 5,000.00 | A & E Fees; Reimbursable Costs | 5,000.00 |
| | Subtotal Acct 1430 | 5,000.00 | Subtotal Acct 1430 | 5,000.00 |
| | | | | |
| | Collateralization or Debt Service (9000) | | Collateralization or Debt Service (9000) | |
| | Capital Fund Borrowing Program Debt Service | 143,861.04 | Capital Fund Borrowing Program Debt Service | 143,861.04 |
| | Subtotal Acct 9000 | 143,861.04 | Subtotal Acct 9000 | 143,861.04 |
| | | | | |
| | Subtotal of Estimated Cost | \$280,286.00 | Subtotal of Estimated Cost | \$283,726.00 |

| Part III: Supporting Pages – Management Needs Work Statement(s) | | | | |
|--|--|----------------------|--|----------------------|
| Work Statement for Year 1 FFY 2011 | Work Statement for Year <u>4</u> FFY 2014 | | Work Statement for Year: <u>5</u> 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 | Public Housing Operations | 82,245.00 | Public Housing Operations | 82,245.00 |
| Annual | Subtotal Acct 1406 | 82,245.00 | Subtotal Acct 1406 | 82,245.00 |
| Statement | | | | |
| | Management Improvement (1408) | | Management Improvement (1408) | |
| | Computer software & hardware upgrades, consulting fees; office equipment; training | 8,997.96 | Computer software & hardware upgrades, consulting fees; office equipment; training | 82,244.96 |
| | Subtotal Acct 1408 | 8,997.96 | Subtotal Acct 1408 | 82,244.96 |
| | | | | |
| | Administration (1410) | | Administration (1410) | |
| | CFP Administration; Salaries & Benefits | 41,122.00 | CFP Administration; Salaries & Benefits | 41,122.00 |
| | Subtotal Acct 1410 | 41,122.00 | Subtotal Acct 1410 | 41,122.00 |
| | | | | |
| | Fees and Costs (1430) | | Fees and Costs (1430) | |
| | A & E Fees; Reimbursable Costs | 5,000.00 | A & E Fees; Reimbursable Costs | 10,000.00 |
| | Subtotal Acct 1430 | 5,000.00 | Subtotal Acct 1430 | 10,000.00 |
| | | | | |
| | Collateralization or Debt Service (9000) | | Collateralization or Debt Service (9000) | |
| | Capital Fund Borrowing Program Debt Service | 143,861.04 | Capital Fund Borrowing Program Debt Service | 143,861.04 |
| | Subtotal Acct 9000 | 143,861.04 | Subtotal Acct 9000 | 143,861.04 |
| | | | | |
| | Subtotal of Estimated Cost | \$ 281,226.00 | Subtotal of Estimated Cost | \$ 359,473.00 |

Attachment: sc007c01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16P00750110 Replacement Housing Factor Grant No: Date of CFFP: 01/2006 | | | FFY of Grant: 2010 FFY of Grant Approval: | |
| 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: 03/31/2011 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 82,245.00 | 82,245.00 | 34,265.00 | 34,265.00 | |
| 3 | 1408 Management Improvements | 7,562.96 | 7,562.96 | 0.00 | 0.00 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 41,122.00 | 41,122.00 | 17,130.00 | 17,130.00 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 5,000.00 | 3,920.00 | 0.00 | 0.00 | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 0.00 | 87,000.00 | 0.00 | 0.00 | |
| 10 | 1460 Dwelling Structures | 118,920.00 | 33,000.00 | 0.00 | 0.00 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | 12,000.00 | 12,000.00 | 0.00 | 0.00 | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | |

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: Housing Authority of the City of Aiken | Grant Type and Number Capital Fund Program Grant No: SC16P00750110 Replacement Housing Factor Grant No: Date of CFFP: 01/2006 | FFY of Grant:2010 FFY of Grant Approval: |
|--|--|---|

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 03/31/2011
 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 | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 143,861.04 | 143,861.04 | 143,861.04 | 0.00 |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 410,711.00 | 410,711.00 | 195,256.04 | 51,395.00 |
| 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 | | | | |

| | | | |
|-------------------------------------|-------------------|--|------|
| Signature of Executive Director | Date 6-21-2011 | 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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750110 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: | | | Federal FFY of 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 | Funds Expended ² | |
| HA Wide | Operations | 1406 | | | | | | |
| | Public Housing Operations | | LS | 82,245.00 | 82,245.00 | 34,265.00 | 34,265.00 | |
| | Subtotal Acct 1406 | | | 82,245.00 | 82,245.00 | 34,265.00 | 34,265.00 | |
| HA Wide | Management Improvement | 1408 | | | | | | |
| | Computer Hardware upgrade, consulting fees,office equipment, training | | LS | 7,562.96 | 7,562.96 | 0.00 | 0.00 | |
| | Subtotal Acct 1408 | | | 7,562.96 | 7,562.96 | 0.00 | 0.00 | |
| HA Wide | Administration | 1410 | | | | | | |
| | FP Administration: Salaries & Benefits | | LS | 41,122.00 | 41,122.00 | 17,130.00 | 17,130.00 | |
| | Subtotal Acct 1410 | | | 41,122.00 | 41,122.00 | 17,130.00 | 17,130.00 | |
| HA Wide | Fees and Costs | 1430 | | | | | | |
| | A & E Fees; Reimbursable Costs | | LS | 5,000.00 | 3,920.00 | 0.00 | 0.00 | |
| | Subtotal Acct 1430 | | | 5,000.00 | 3,920.00 | 0.00 | 0.00 | |
| | Site Improvements | 1450 | | | | | | |
| SC007-6 | Gas Line Improvements-Hahn | | 100 | 0.00 | 87,000.00 | 0.00 | 0.00 | |
| | Subtotal Acct 1450 | | | 0.00 | 87,000.00 | 0.00 | 0.00 | |

| Part II: Supporting Pages | | | | | | | | |
|---|---|----------------------------|---|----------------------|----------------------|-----------------------------------|--------------------------------|----------------|
| PHA Name: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750110 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: | | | Federal FFY of 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 | Funds Expended ² | |
| | Dwelling Structures | 1460 | | | | | | |
| SC007-6 | Hot Water Heaters-Hahn | | 42 | 9,920.00 | 0.00 | 0.00 | 0.00 | |
| SC007-8 | Cabinets-New Hope I | | 18 | 87,000.00 | 0.00 | 0.00 | 0.00 | |
| SC007-9 | Cabinets-New Hope II | | 2 | 6,000.00 | 0.00 | 0.00 | 0.00 | |
| SC007-5B | Furnaces - Bradby | | 3 | 16,000.00 | 10,000.00 | 0.00 | 0.00 | |
| SC007-6 | Gutters-Hahn | | 65 | 0.00 | 23,000.00 | 0.00 | 0.00 | |
| | Subtotal Acct 1460 | | | 118,920.00 | 33,000.00 | 0.00 | 0.00 | |
| | Non-Dwelling Equipment | 1475 | | | | | | |
| SC007-8 | Security Camera System-New Hope I | | 29 | 5,044.00 | 0.00 | | | |
| SC007-9 | Security Camera System-New Hope II | | 40 | 6,956.00 | 0.00 | | | |
| SC007-6 | Security Camera System-Hahn | | 100 | 0.00 | 12,000.00 | 0.00 | 0.00 | |
| | Subtotal Acct 1475 | | | 12,000.00 | 12,000.00 | 0.00 | 0.00 | |
| | Collateralization or Debt Service | 9000 | | | | | | |
| HA -Wide | Capital Fund Borrowing Program Debt Service | | | 143,861.04 | 143,861.04 | 143,861.04 | 0.00 | |
| | Subtotal Acct 9000 | | | 143,861.04 | 143,861.04 | 143,861.04 | 0.00 | |
| | Grand Total | | | 410,711.00 | 410,711.00 | 195,256.04 | 51,395.00 | |

| Part III: Implementation Schedule for Capital Fund Financing Program | | | | | |
|---|---|-------------------------------|---|--------------------------------|---|
| PHA Name: Housing Authority of the City of Aiken | | | | | Federal FFY of Grant: 2010 |
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates ¹ |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| HA Wide | 09/15/12 | | 09/15/14 | | |
| SC007-2 | 09/15/12 | | 09/15/14 | | |
| SC007-5B | 09/15/12 | | 09/15/14 | | |
| SC007-6 | 09/15/12 | | 09/15/14 | | |
| SC007-8 | 09/15/12 | | 09/15/14 | | |
| SC007-9 | 09/15/12 | | 09/15/14 | | |
| | | | | | |
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| | | | | | |
| | | | | | |

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.

Attachment: sc007d01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750110 Date of CFFP: | | | FFY of Grant: 2010 FFY of Grant Approval: | |
| 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: 03/31/2011 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | | | | | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | | | | | |
| 10 | 1460 Dwelling Structures | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | 139,670.00 | | 0 | 0 | |

¹ To be completed for the Performance and Evaluation Report.

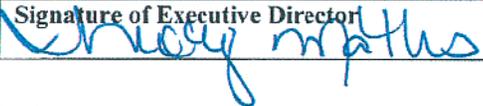
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750110 Date of CFFP: | | | FFY of Grant:2010 FFY of Grant Approval: | | |
| 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: 03/31/2011 <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 | | | | | | |
| 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) | 139,670.00 | | 0 | 0 | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | | | |
| Signature of Executive Director  | | Date 6.21.2011 | | 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.

Attachment: sc007e01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750210 Date of CFFP: | | | FFY of Grant: 2010 FFY of Grant Approval: | |
| 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: 03/31/2011 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | | | | | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | | | | | |
| 10 | 1460 Dwelling Structures | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | 115,508.00 | | 0 | 0 | |

¹ To be completed for the Performance and Evaluation Report.

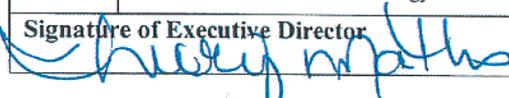
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750210 Date of CFFP: | | FFY of Grant:2010 FFY of Grant Approval: | |
| 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: 03/31/2011 <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 | | | | |
| 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) | 115,508.00 | | 0 | 0 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |
| Signature of Executive Director | | Date | | Signature of Public Housing Director | |
|  | | 6.21.2011 | | | |

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

Attachment: sc007f01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16P00750109 Replacement Housing Factor Grant No: Date of CFFP: 1/2006 | | | FFY of Grant: 2009 FFY of Grant Approval: | |
| 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: 3/31/2011 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 82,245.00 | 82,245.00 | 82,245.00 | 82,245.00 | |
| 3 | 1408 Management Improvements | 20,561.00 | 20,561.00 | 0 | 0 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 41,122.00 | 41,122.00 | 41,122.00 | 41,122.00 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 10,000.00 | 50,000.00 | 47,637.80 | 47,637.80 | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 0 | 26,000.00 | 26,000.00 | 26,000.00 | |
| 10 | 1460 Dwelling Structures | 62,563.96 | 4,436.96 | 3,630.12 | 3,630.12 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 23,625.00 | 0 | 0 | 0 | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | 27,248.00 | 43,000.00 | 11,988.42 | 0 | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | |

¹ To be completed for the Performance and Evaluation Report.

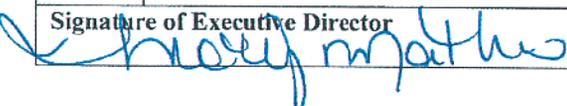
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16P00750109 Replacement Housing Factor Grant No: Date of CFFP: 1/2006 | | FFY of Grant:2009 FFY of Grant Approval: | |
| 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: 3/31/2011 <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 | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 143,861.04 | 143,861.04 | 143,861.04 | 59,942.10 |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 411,226.00 | 411,226.00 | 356,484.38 | 260,577.02 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |
| Signature of Executive Director  | | Date 6.21.2011 | | 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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750109 CFFP (Yes/ No): Yes 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 | |
| HA Wide | Operations | 1406 | LS | | | | | |
| | Public Housing Operations | | | 82,245.00 | 82,245.00 | 82,245.00 | 82,245.00 | |
| | Subtotal Acct 1406 | | | 82,245.00 | 82,245.00 | 82,245.00 | 82,245.00 | |
| HA Wide | Management Improvement | 1408 | LS | | | | | |
| HA Wide | Computer Software & hardware upgrade, consulting fees,office equipment, training | | | 20,561.00 | 20,561.00 | 0 | 0 | |
| | Subtotal Acct 1408 | | | 20,561.00 | 20,561.00 | 0 | 0 | |
| | Administration | 1410 | | | | | | |
| HA Wide | CFP Administration: Salaries & Benefits | | LS | 41,122.00 | 41,122.00 | 41,122.00 | 41,122.00 | |
| | Subtotal Acct 1410 | | | 41,122.00 | 41,122.00 | 41,122.00 | 41,122.00 | |
| | Fees and Costs | 1430 | | | | | | |
| HA Wide | A & E Fees; Reimbursable Costs | | LS | 10,000.00 | 50,000.00 | 47,637.80 | 47,637.80 | |
| | Subtotal Acct 1430 | | | 10,000.00 | 50,000.00 | 47,637.80 | 47,637.80 | |
| | Site Improvements | 1450 | | | | | | |
| HA Wide | Grounds Improvements, Tree Removal | | | 0 | 3,000.00 | 3,000.00 | 3,000.00 | |
| SC007-2 | Mailboxes | | | 0 | 5,000.00 | 5,000.00 | 5,000.00 | |
| SC007-8 & SC007-9 | Erosion Control | | | 0 | 4,667.63 | 4,667.63 | 4,667.63 | |
| SC007-5B | Gas Line Improvements | | | 0 | 13,332.37 | 13,332.37 | 13,332.37 | |
| | Subtotal Site Improvements | | | 0 | 26,000.00 | 26,000.00 | 26,000.00 | |
| | | | | 0 | | | | |

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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750109 CFFP (Yes/ No): Yes 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 | |
| | Dwelling Structures | 1460 | | | | | | |
| SC007-2 | Rehabilitation Contract | | 44 | 62,563.96 | 0 | 0 | 0 | |
| SC007-5B | Window Screens | | 100 | 0 | 4,436.96 | 3,630.12 | 3,630.12 | |
| | Subtotal Acct 1460 | | | 62,563.96 | 4,436.96 | 3,630.12 | 3,630.12 | |
| | Dwelling Equipment | 1465.1 | | | | | | |
| SC007-5B | Refrigerators, Ranges, Water Heaters | | 12 | 5,250.00 | 0 | 0 | 0 | |
| SC007-6 | Refrigerators, Ranges, Water Heaters | | 30 | 13,125.00 | 0 | 0 | 0 | |
| SC007-8 & SC007-9 | Refrigerators, Ranges, Water Heaters | | 12 | 5,250.00 | 0 | 0 | 0 | |
| | Subtotal Acct 1465.1 | | 0 | 23,625.00 | 0 | 0 | 0 | |
| | Non-Dwelling Equipment | 1475 | | | | | | |
| HA Wide | Wireless Security System | | | 0 | 1,500.00 | 0 | 0 | |
| HA Wide | Equipment & Furniture for Community Room to provide training for residents | | | 0 | 1,500.00 | 0 | 0 | |
| HA Wide | Company Vehicle | | | 27,248.00 | 25,000.00 | 0 | 0 | |
| HA Wide | Admin Office Furniture & Equipment Upgrades | | | 0 | 15,000.00 | 11,988.42 | 0 | |
| | Subtotal Acct 1475 | | | 27,248.00 | 43,000.00 | 11,988.42 | 0 | |
| HA Wide | Collateralization or Debt Service | 9000 | | | | | | |
| | Capital Fund Borrowing Program Debt Service | | | 143,861.04 | 143,861.04 | 143,861.04 | 59,942.10 | |
| | Subtotal Acct 9000 | | | 143,861.04 | 143,861.04 | 143,861.04 | 59,942.10 | |
| | Grand Total | | | 411,226.00 | 411,226.00 | 356,484.38 | 260,577.02 | |

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: Housing Authority of the City of Aiken | | | | Federal FFY of Grant: 2009 | |
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates ¹ |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| HA Wide | 09/15/11 | | 09/15/13 | | |
| SC007-2 | 09/15/11 | | 09/15/13 | | |
| SC007-5B | 09/15/11 | | 09/15/13 | | |
| SC007-6 | 09/15/11 | | 09/15/13 | | |
| SC007-8 | 09/15/11 | | 09/15/13 | | |
| SC007-9 | 09/15/11 | | 09/15/13 | | |
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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.

Attachment: sc007g01

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: Housing Authority of The City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16S00750109 Replacement Housing Factor Grant No: Date of CFFP: | | | FFY of Grant: 2009 FFY of Grant Approval: 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: 03/31/2011 <input checked="" 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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | |
| 3 | 1408 Management Improvements | 42,217.64 | 42,217.64 | 42,217.64 | 42,217.64 | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 86,561.00 | 71,534.65 | 71,534.65 | 71,534.65 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 35,000.00 | 24,802.50 | 24,802.50 | 24,802.50 | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 71,961.75 | 155,130.56 | 155,130.56 | 155,130.56 | |
| 10 | 1460 Dwelling Structures | 553,616.41 | 494,259.32 | 494,259.32 | 494,259.32 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | 76,262.20 | 77,674.33 | 77,674.33 | 77,674.33 | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | |

¹ To be completed for the Performance and Evaluation Report.

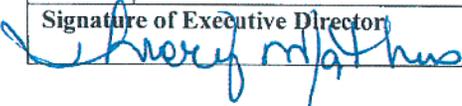
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Housing Authority of The City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16S00750109 Replacement Housing Factor Grant No: Date of CFFP: | | | FFY of Grant:2009 FFY of Grant Approval: 865,619 | | |
| 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: 03/31/2011 <input checked="" 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 | | | | | | |
| 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) | 865,619.00 | 865,619.00 | 865,619.00 | 865,619.00 | | |
| 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 | | | | | | |
| Signature of Executive Director  | | Date 6.21.2011 | | 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: Housing Authority of The City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16S00750109 CFFP (Yes/ No): No 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 | |
| HA Wide | Management Improvements | 1408 | | | | | | |
| | Computer software upgrades; Staff Training | | | 42,217.64 | 42,217.64 | 42,217.64 | 42,217.64 | |
| | Subtotal Account 1408 | | | 42,217.64 | 42,217.64 | 42,217.64 | 42,217.64 | |
| HA Wide | Administration | 1410 | | | | | | |
| | CFP Administration; Salaries and Benefits | | | 86,561.00 | 71,534.65 | 71,534.65 | 71,534.65 | |
| | Subtotal Account 1410 | | | 86,561.00 | 71,534.65 | 71,534.65 | 71,534.65 | |
| HA Wide | Fees and Costs | 1430 | | | | | | |
| | A & E Fees; Physical Needs Assessment | | | 35,000.00 | 24,802.50 | 24,802.50 | 24,802.50 | |
| | Subtotal Account 1430 | | | 35,000.00 | 24,802.50 | 24,802.50 | 24,802.50 | |
| | Site Improvements | 1450 | | | | | | |
| SC007-8 & SC007-9 | Erosion Control - New Hope Community | | | 10,000.00 | 93,303.01 | 93,303.01 | 93,303.01 | |
| SC007-5B | Gas Line Repair - Bradby Homes | | | 8,696.75 | 8,696.75 | 8,696.75 | 8,696.75 | |
| SC007-6 | Fence at Hahn Village to close Maurice entrance | | | 13,265.00 | 13,267.00 | 13,267.00 | 13,267.00 | |
| HA Wide | Administrative Office Parking Plan | | | 40,000.00 | 39,863.80 | 39,863.80 | 39,863.80 | |
| | Subtotal Account 1450 | | | 71,961.75 | 155,130.56 | 155,130.56 | 155,130.56 | |

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: Housing Authority of The City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16S00750109 CFFP (Yes/ No): No 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 | |
| | Dwelling Structures | 1460 | | | | | | |
| SC007-2 | Complete Stoney Homes Rehabilitation | | | 550,000.00 | 474,259.32 | 474,259.32 | 474,259.32 | |
| SC0078 & SC007-9 | New Hope Community - Cabinets and Interior Deferred Maintenance | | | 1,816.41 | 0.00 | 0.001 | 0.00 | |
| SC007-5B | Bradby Homes - Cabinets and Interior Deferred Maintenance | | | 1,800.00 | 20,000.00 | 20,000.00 | 20,000.00 | |
| | Subtotal Account 1460 | | | 553,616.41 | 494,259.32 | 494,259.32 | 494,259.32 | |
| | Non-Dwelling Equipment | 1475 | | | | | | |
| SC007-6 | Wireless Security Camera System - Hahn Village | | | 64,802.20 | 58,716.08 | 58,716.08 | 58,716.08 | |
| HA Wide | Upgrade Telephone System | | | 0.00 | 0.00 | 0.00 | 0.00 | |
| HA Wide | Company Car | | | 0.00 | 0.00 | 0.00 | 0.00 | |
| HA Wide | Maint Vehicle, | | | 0.00 | 0.00 | 0.00 | 0.00 | |
| HA Wide | Tables, Chairs, Sound System, TV/DVD, Refrigerator, Stove for Community Room to provide training for residents in housekeeping and use of appliances in connection with modernization of homes. | | | 11,460.00 | 18,958.25 | 18,958.25 | 18,958.25 | |
| | Subtotal Non-Dwelling Equipment | | | 76,262.20 | 77,674.33 | 77,674.33 | 77,674.33 | |
| | | | | | | | | |
| | Grand Total | | | 865,619.00 | 865,619.00 | 865,619.00 | 865,619.00 | |

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: Housing Authority of The City of Aiken | | | | | Federal FFY of Grant: 2009 |
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates ¹ |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| HA Wide | 02/28/10 | 02/28/10 | 02/28/12 | 10/31/10 | |
| SC007-8 & SC007-9 | 02/28/10 | 02/28/10 | 02/28/12 | 10/31/10 | |
| SC007-5B | 02/28/10 | 02/28/10 | 02/28/12 | 10/31/10 | |
| SC007-6 | 02/28/10 | 02/28/10 | 02/28/12 | 10/31/10 | |
| SC007-2 | 02/28/10 | 02/28/10 | 02/28/12 | 10/31/10 | |
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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.

Attachment: sc007h01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750109 Date of CFFP: | | | FFY of Grant: 2009 FFY of Grant Approval: |
| 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: 03/31/2011 <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-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | 170,948.00 | | 0 | 0 |

¹ To be completed for the Performance and Evaluation Report.

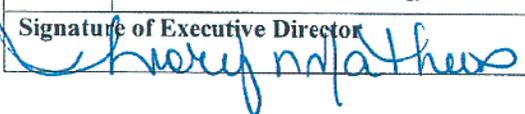
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750109 Date of CFFP: | | | FFY of Grant:2009 FFY of Grant Approval: | |
| 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: 03/31/2011 <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 | | | | | |
| 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) | 170,948.00 | | 0 | 0 | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | | |
| Signature of Executive Director  | | Date 6.21.2011 | | 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.

Attachment: sc007i01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750209 Date of CFFP: | | | FFY of Grant: 2009 FFY of Grant Approval: |
| 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: 03/31/2011 <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-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | 84,672.00 | | 0 | 0 |

¹ To be completed for the Performance and Evaluation Report.

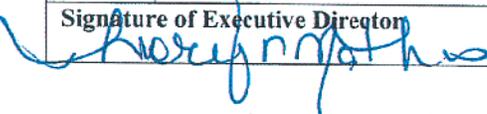
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750209 Date of CFFP: | | | FFY of Grant:2009 FFY of Grant Approval: | |
| 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: 03/31/2011 | | <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 | | | | | |
| 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) | 84,672.00 | | 0 | 0 | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | | |
| Signature of Executive Director  | | Date 6.21.2011 | | 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.

Attachment: sc007j01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: SC16P00750108 Replacement Housing Factor Grant No: Date of CFFP: 01/2006 | | | FFY of Grant: 2008 FFY of Grant Approval: | |
| 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: 03/31/11 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 95,920.00 | 95,920.00 | 95,920.00 | 95,920.00 | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | 38,368.00 | 38,368.00 | 38,368.00 | 38,368.00 | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | 19,400.00 | 19,400.00 | 19,400.00 | 19,400.00 | |
| 10 | 1460 Dwelling Structures | 7,893.96 | 7,893.96 | 7,893.96 | 7,893.96 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 23,625.00 | 23,625.00 | 23,625.00 | 12,298.82 | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | 44,612.00 | 44,612.00 | 44,612.00 | 44,612.00 | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | |

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: Housing Authority of the City of Aiken | Grant Type and Number Capital Fund Program Grant No: SC16P00750108 Replacement Housing Factor Grant No: Date of CFFP: 01/2006 | FFY of Grant:2008 FFY of Grant Approval: |
|--|--|---|

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 03/31/11
 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 | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | 143,861.04 | 143,861.04 | 143,861.04 | 143,861.04 |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 20 | Amount of Annual Grant:: (sum of lines 2 - 19) | 383,680.00 | 383,680.00 | 383,680.00 | 372,353.82 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| | | | |
|--|-------------------|--------------------------------------|------|
| Signature of Executive Director  | Date 6.21.2011 | 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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750108 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: | | | Federal FFY of Grant: 2008 | | |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | Development Account No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| HA Wide | Operations | 1406 | LS | | | | | |
| | Public Housing Operations | | | 95,920.00 | 95,920.00 | 95,920.00 | 95,920.00 | |
| | Subtotal Acct 1406 | | | 95,920.00 | 95,920.00 | 95,920.00 | 95,920.00 | |
| HA Wide | Administration | 1410 | LS | | | | | |
| | CFP Administration: Salaries and Benefits | | | 38,368.000 | 38,368.000 | 38,368.000 | 38,368.000 | |
| | Subtotal Acct 1410 | | | 38,368.00 | 38,368.00 | 38,368.000 | 38,368.000 | |
| HA Wide | Fees and Costs | 1430 | LS | | | | | |
| | A & E Fees; Reimbursable Costs | | | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | |
| | Subtotal Acct 1430 | | | 10,000.00 | 10,000.00 | 10,000.00 | 10,000.00 | |
| SC007-4 | Site Improvement | 1450 | LS | | | | | |
| | Sidewalk Repairs | | | 19,400.00 | 19,400.00 | 19,400.00 | 19,400.00 | |
| | Subtotal Acct 1450 | | | 19,400.00 | 19,400.00 | 19,400.00 | 19,400.00 | |
| SC007-2 | Dwelling Structures | 1460 | | | | | | |
| | Rehabilitation Contract | | 44 units | 7,893.96 | 7,893.96 | 7,893.96 | 7,893.96 | |
| | Subtotal Acct 1460 | | | 7,893.96 | 7,893.96 | 7,893.96 | 7,893.96 | |

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: Housing Authority of the City of Aiken | | | Grant Type and Number Capital Fund Program Grant No: SC16P00750108 CFFP (Yes/ No): Yes Replacement Housing Factor Grant No: | | | Federal FFY of Grant: 2008 | | |
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | Development Account No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| | Dwelling Equipment | 1465.1 | | | | | | |
| SC007-5B | Refrigerators, ranges, water heaters | | 12 | 5,250.00 | 5,250.00 | 5,250.00 | 5,250.00 | |
| SC007-6 | Refrigerators, ranges, water heaters | | 30 | 13,125.00 | 13,125.00 | 13,125.00 | 7,048.82 | |
| SC007-8 | Refrigerators, ranges, water heaters | | 6 | 2,625.00 | 2,625.00 | 2,625.00 | 0.00 | |
| SC007-9 | Refrigerators, ranges, water heaters | | 6 | 2,625.00 | 2,625.00 | 2,625.00 | 0.00 | |
| | Subtotal Acct 1465.1 | | | 23,625.00 | 23,625.00 | 23,625.00 | 12,298.82 | |
| | Non-Dwelling Equipment | 1475 | | | | | | |
| HA Wide | Lawn Maintenance Equipment, Maintenance Vehicle | | | 44,612.00 | 44,612.00 | 44,612.00 | 44,612.00 | |
| | Subtotal Acct 1475 | | | 44,612.00 | 44,612.00 | 44,612.00 | 44,612.00 | |
| | | | | | | | | |
| | | | | | | | | |
| HA Wide | Collateralization or Debt Service | 9000 | LS | | | | | |
| | Capital Fund Borrowing Program Debt Service | | | 143,861.04 | 143,861.04 | 143,861.04 | 143,861.04 | |
| | Subtotal Acct 9000 | | | 143,861.04 | 143,861.04 | 143,861.04 | 143,861.04 | |
| | | | | | | | | |
| | Grand Total | | | 383,680.00 | 383,680.00 | 383,680.00 | 372,353.82 | |

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: Housing Authority of the City of Aiken | | | | Federal FFY of Grant: 2008 | |
| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates ¹ |
| | Original Obligation End Date | Actual Obligation End Date | Original Expenditure End Date | Actual Expenditure End Date | |
| HA Wide | 06/12/10 | 06/12/10 | 06/12/12 | | |
| SC007-2 | 06/12/10 | 06/12/10 | 06/12/12 | | |
| SC007-5B | 06/12/10 | 06/12/10 | 06/12/12 | | |
| SC007-6 | 06/12/10 | 06/12/10 | 06/12/12 | | |
| SC007-8 | 06/12/10 | 06/12/10 | 06/12/12 | | |
| SC007-9 | 06/12/10 | 06/12/10 | 06/12/12 | | |
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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.

Attachment: sc007k01

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750108 Date of CFFP: | | | FFY of Grant: 2008 FFY of Grant Approval: |
| 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: 3/31/2011 <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-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | 177,335.00 | | 177,335.00 | 0 |

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: Housing Authority of the City of Aiken | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750108 Date of CFFP: | FFY of Grant:2008 FFY of Grant Approval: |
|--|--|---|

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 03/31/2011
 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 | | | | |
| 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) | 177,335.00 | | 177,335.00 | 0 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| | | | |
|--|-------------------|---|---------------|
| Signature of Executive Director  | Date 6.21.2011 | 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.

Attachment: sc007101

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: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750208 Date of CFFP: | | | FFY of Grant: 2008 FFY of Grant Approval: | |
| 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: 03/31/2011 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | | | | | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | | | | | |
| 10 | 1460 Dwelling Structures | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | 122,835.00 | | 122,835.00 | 0 | |

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

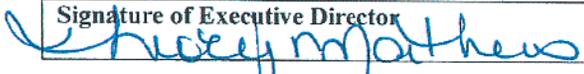
| | | |
|---|---|---|
| PHA Name: Housing Authority of the City of Aiken | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750208 Date of CFFP: | FFY of Grant:2008 FFY of Grant Approval: |
|---|---|---|

Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)

Performance and Evaluation Report for Period Ending: 03/31/2011
 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 | | | | |
| 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) | 122,835.00 | | 122,835.00 | 0 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |

| | | | |
|--|--------------------|--------------------------------------|------|
| Signature of Executive Director  | Date 10.21.2011 | 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.

Attachment: sc007m01

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: Housing Authority of the City Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750107 Date of CFFP: | | | FFY of Grant: 2007 FFY of Grant Approval: | |
| 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: 03/31/2011 <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-CFP Funds | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | | |
| 3 | 1408 Management Improvements | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | | |
| 5 | 1411 Audit | | | | | |
| 6 | 1415 Liquidated Damages | | | | | |
| 7 | 1430 Fees and Costs | | | | | |
| 8 | 1440 Site Acquisition | | | | | |
| 9 | 1450 Site Improvement | | | | | |
| 10 | 1460 Dwelling Structures | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | |
| 14 | 1485 Demolition | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | |
| 17 | 1499 Development Activities ⁴ | 167,079.00 | | 167,079.00 | 155,673.25 | |

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: Housing Authority of the City of Aiken | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750107 Date of CFFP: | FFY of Grant: 2007 FFY of Grant Approval: |
|---|---|--|

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 03/31/2011 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 | | | | |
| 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) | 167,079.00 | | 167,079.00 | 155,673.25 |
| 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>Andrew N Mathews</i> | Date 6.21.2011 | 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.

Attachment: sc007n01

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

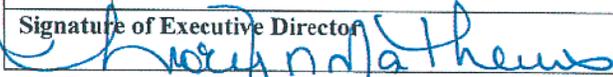
U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

| Part I: Summary | | | | | |
|--|--|---|----------------------|--------------------------------|--|
| PHA Name: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750207 Date of CFFP: | | | FFY of Grant: 2007 FFY of Grant Approval: |
| 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: 03/31/2011 <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-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | | | | |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | | | | |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | | | | |
| 10 | 1460 Dwelling Structures | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | 115,352.00 | | 115,352.00 | 0 |

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
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| Part I: Summary | | | | | |
|---|--|--|----------------------|--|----------|
| PHA Name: Housing Authority of the City of Aiken | | Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R00750207 Date of CFFP: | | FFY of Grant:2007 FFY of Grant Approval: | |
| 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: 03/31/2011 <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 | | | | |
| 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) | 115,352.00 | | 115,352.00 | 0 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | | |
| Signature of Executive Director  | | Date 10.21.2011 | | Signature of Public Housing Director | |

¹ To be completed for the Performance and Evaluation Report.
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Attachment: sc007o01
Aiken Housing Authority
Resident Advisory Board Consultation Process and Comments – FYB 2011

1. Resident notification of appointment to the Advisory Board

At beginning of PHA Plan process, sent out letter to all residents/participants of opportunity to serve on Resident Advisory Board
April 14, 2011

2. Resident Advisory Board Selection

Selection made from resident/participant response **May 31, June 6, June 7 & June 14, 2011**

3. Meeting Organization

Schedule date to meet with Resident Advisory Board for input to PHA Plan
May 31, June 6, June 7 & June 14, 2011

Notify Resident Advisory Board of scheduled meeting **April 14, 2011**

Hold Resident Advisory Board meeting **May 31, June 6, June 7 & June 14, 2011**

4. Notification of Public Hearing

Schedule date for Public Hearing and place ad **April 14, 2011**

Notify Resident Advisory Board **April 14, 2011**

Hold Public Hearing meeting **June 21, 2011**

5. Documentation of resident recommendations and PHA's response to recommendations

There were no comments and/or recommendations.