



8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p><b>Attached</b></p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p><b>Attached</b></p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.  <b>N/A</b></p>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>428 Families @ or &lt; the Annual Median Income for the Lake City Housing Authority's jurisdiction in need of housing;</p> <p>381 Families @ or &lt; the Annual Median Income for the Lake City Housing Authority's jurisdiction in need of affordable housing;</p> <p>Current Housing Authority waiting lists indicate a total of 319 families:</p> <p>1BR 35 elderly/disable 5 familiy</p> <p>2BR 25 elderly/disable 148 family</p> <p>3BR 14 elderly/disable 113 family</p> <p>4BR 8 elderly/disable 13 family</p> <p>5BR 1 elderly/disable 1 family</p> <p>2 Hispanic 17 White 371 Black</p> <p>Currently the Housing Authority has 12 public housing units under construction (8-2BR, 4-3BR) This provides for 5% of the 2BR demand and 3% of the 3BR demand</p>

9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p>Currently the Housing Authority has 12 public housing units under construction (8-2BR, 4-3BR) This provides for 5% of the 2BR demand and 3% of the 3BR demand.</p> <p>The Housing Authority has an additional 60 – 70 units of contract authority for the HCV program, should additional funds become available this will leveraged to provide additional assisted housing.</p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>Currently the Housing Authority has 12 public housing units under construction which will provide additional housing for our jurisdiction. Also all improvement to the units for all previous years through 2009 and partially for 2010 have been completed. Energy improvements have resulted in reductions in energy consumptions for all sites and BR sizes.</p> <p>The Housing Authority has created methodologies by which HCV Quality Control Samples can be drawn and also put procedures in place to insure compliance with guidelines for adequate oversight of the HCV program.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”\</p> <p>There are no significant deviations/modifications</p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## **Instructions form HUD-50075**

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

### **1.0 PHA Information**

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

### **2.0 Inventory**

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

### **3.0 Submission Type**

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

### **4.0 PHA Consortia**

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

### **5.0 Five-Year Plan**

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

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

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

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

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

#### **PHA Plan Elements.** (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

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

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

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

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

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

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

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

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

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

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

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

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

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

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

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

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

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

**Housing Authority of the City of Lake City (SC018)**

**PHA Plan Elements**

**1. Eligibility, Selection Admissions Policies, including Deconcentration and Wait List Procedures.**

1. To be eligible for admission to developments or scattered-site units, the family's annual income must be within the low-income limit set by HUD. This means the family income cannot exceed 80 percent of the median income for the area. If the property has Low Income Housing Tax Credits on it, a lower income cap will apply.

**Selections**

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 (\* see below): (1) Single applicants that are elderly, disabled or displaced over other single applicants.

(2) Applicants that have a local preference as designated by the PHA in either of the following categories:

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.

Families whose head, spouse or sole member currently live in or work (\*see below) In or have been hired to work in the PHA's jurisdictional area.

Singles that are working (\* see below) or have graduated from an institute of higher learning within the last six (6) months or who are attending on a regular basis, has satisfactory performance, and expects to graduate within 6-12 months.

**\* The PHA defines “working” families for determining local preference eligibility as the following: applicant households whose head, spouse, or sole member is permanently employed and works a minimum of 1040 hours per year or 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.**

**An institute of higher learning includes but is not limited to colleges, universities, adult education, technical and/or vocational schools.**

(3) All others by the oldest date and time of application.

**B. Exceptions to the Order of Selection:**

The PHA reserves the right to offer special incentives and/or skip applicants in a non-discriminatory manner in order to meet HUD’s mandated targeting and deconcentration requirements for selection purposes or in the event that the Housing Authority is unable to maintain financial stability.

In the case of a disaster declared or otherwise formally recognized under federal disaster relief laws, a preference will be given to public housing residents or residents of federally assisted housing programs, displaced due to the disaster.

**DECONCENTRATION OF POVERTY AND INCOME MIXING**

The PHA will affirmatively further fair housing in its family (general occupancy developments) by endeavoring to maintain a relative mix/cross-section of income levels. The PHA will monitor on a continual basis the income mix of each of its “family” projects/communities. The PHA will utilize a dividing line of the average income.

Should it become necessary, the PHA may offer incentives to eligible families to locate in certain communities where a cross-section of income is not represented. The PHA will only utilize the waiting list “skipping” provisions of the regulations should it become critically necessary. Any waiting list skipping will be specifically documented in the resident’s file and on a waiting list control log.

## A. Waiting List Administration

1. The PHA must select participants in accordance with this policy, adhere to the Fair Housing and Equal Opportunity regulations, and meet HUD targeting and deconcentration requirements. The waiting list must contain the following for each applicant: Applicant name; City and/or County designation; family unit size (number of bedrooms for which family qualifies under PHA occupancy standards); date and time of application; qualification for any preference; and racial or ethnic designation of the head of household
2. The waiting lists will be updated periodically and names will be removed from the waiting list for failure to respond to requests for information, application updates (failure to notify the PHA of a change of address), or if correspondence is returned from the Post Office. If the applicant did not notify the PHA of a move as required, the PHA will not be responsible for the applicant's failure to receive the updated request. If the letter is returned by the Post Office with a forwarding address noted, the PHA will resend the letter. Applicants will be given five (5) working days to return the notice of continued interest.

The PHA will utilize reasonable accommodations practices for any applications received by handicapped individuals. The PHA will not remove names from the waiting list that would violate the rights of a disabled, mobility impaired, or hearing impaired person.

3. The PHA will maintain its waiting lists according to bedroom sizes and the order of admission from the waiting list will be based on family size or the unit size for which the family qualified under the PHA occupancy policy. Selections will be made as indicated in Section X of this plan. Should the PHA receive funding for a specified category of families, the PHA must select applicant families in the specified category.
4. A separate waiting list will be maintained for Public Housing and the Section 8 program. If the waiting list for the Section 8 or Public Housing program is open, applicants must be offered the opportunity to have their name placed on either list. The PHA will not remove the applicants' name from other waiting lists unless the applicant has made a request to remove their name (in writing), or in the event of failure to respond as indicated above).
5. The waiting list may be closed to new applications when it is determined that there is an adequate pool of applicants and is so large that the applicants are not likely to be housed in a reasonable length of time (more than one year).
6. Reopening of the waiting list will be by public notice in a local newspaper of general circulation and minority media indicating that families may apply for housing assistance. The notice will comply with the HUD-approved Equal Opportunity plan and with HUD Fair Housing requirements (will include notice for persons with disabilities in plain language and indicate the telecommunications device telephone number). The notice will state any limitations on who may apply for available slots in the program. The PHA may advertise for specific types of applicants such as those qualifying for a preference and may include in the advertisement that applications from others (not in these categories) will not be accepted.
7. The waiting list may be opened for the benefit of displaced persons, who are victims of disaster declared or otherwise formally recognized under federal disaster relief laws.

## 2. Financial Resources.

### Public Housing

Operating Subsidy Eligibility – \$1,305,000  
Capital Fund Program - \$410,000  
Dwelling Rental - \$ 460,000

### Housing Choice Vouchers

Housing Assistance Payments - \$1,116,000  
Administrative Fee - \$115,000

### Multi Family Housing

Housing Assistance Payments - \$575,000  
Dwelling Rental - \$60,000

### Other Income

Rental - \$170,000  
Fee Income - \$95,000

## 3. Rent Determination

Income inclusions, exclusions and deductions (as required and permitted by Federal Regulations) for rent calculation purposes are set forth in Attachment 1 of this plan.

**NOTE:** Families whose welfare assistance is reduced specifically because of fraud or failure to participate in an economic self-sufficiency program or comply with a work activities requirement will not have their rent reduced based on the welfare benefit reduction (excludes persons that benefit is reduced due to a lifetime limit or where a family has complied with program requirements but cannot obtain employment). The PHA will obtain verification of such benefit reduction from the welfare agency. See 24 CFR 5.615 for specific HUD instructions on necessary calculations of imputed welfare income and specified welfare

**benefit reductions.**

Total tenant payment (gross family contribution) for rent will be in accordance with Federal Regulations, as follows:

Flat rent as set by the PHA (NOTE: No utility reimbursement is given for families choosing flat rents);  
Ceiling rent as set by the PHA (with adjustments for utility allowances);

or

Income based rents for a total tenant payment (based on income) to be the highest of the following, rounded to the nearest dollar:

Thirty percent (30%) of the monthly adjusted income; or

Ten percent (10%) of monthly income; or

(3) Minimum rent, if applicable and set by the PHA (indicated on the attached Total Tenant Payment Schedule). See also provisions for Minimum Rent Exceptions \* indicated below.

**MINIMUM RENT EXCEPTION**

Statutory provisions, Section 507:3(a)(3)(B) of the QHWRA, provide the following exceptions to the minimum rent requirements:

A family may request an exception (which must include reasonable documentation) to the minimum rent based upon temporary financial hardship due to the following circumstances:

The family has lost eligibility for or is awaiting an eligibility determination for a Federal, State, or local assistance program;

The family would be evicted as a result of the imposition of the minimum rent requirement;

The income of the family has decreased because of changed circumstance, including loss of employment;

A death in the family has occurred; and

Other circumstances determined by the HA or HUD.

The HA shall immediately suspend or discontinue the family's requirement for payment of a minimum rent upon the family's request for hardship exemption and the suspension shall continue until a determination is made on whether the hardship exists and/or if the hardship is **temporary or long-term**.

If the HA determines that the hardship is **temporary**, the minimum rent remains imposed (including back payment for minimum rent from the time of suspension).

Should a family request and qualify for such exception after October 21, 1998 and the financial hardship occurred prior to adoption of this policy, the HA will reimburse the resident by providing a refund or otherwise offset future rent payments.

Should the HA determine that there is no hardship, a minimum rent is imposed retroactively to the time of the suspension. The HA must offer a reasonable repayment agreement for any back-payment due by the family. The family cannot be evicted for nonpayment during the 90-day period commencing on the date of the family's request for exemption of minimum rent in excess of the tenant rent otherwise payable.

**D. Income Calculations**

For families that have chosen income based rents, income will be based on the anticipated total income from all sources (unless indicated on the Income Exclusions Attachment to this Policy) including net income derived from assets (actual and/or imputed) received by the participant family for the 12-month period following the effective date of initial determination or re-examination/re-certification.

In the event that it is not feasible to anticipate income for a 12-month period, the PHA may use the annualized income anticipated for a shorter period of time, or in the event an anticipated amount cannot be determined (such as for temporary or seasonal employees) the income can be determined by using the previous 12-month period.

**4. Operation and Management**

The Maintenance Division of the Lake City Housing Authority is responsible for managing the maintenance function in the most cost effective manner possible while maximizing the useful life of Authority properties and providing the best service to Authority residents. The following policy statements are designed to establish the structure of an effective and efficient maintenance system

All maintenance work performed at Housing Authority properties can be categorized by the source of the work. Each piece of work originates from a particular source -- an emergency, the routine maintenance schedule, the preventive maintenance schedule, a unit inspection, a unit turnover, or a resident request.

It is the policy of the Lake City Housing Authority to reoccupy vacant units as soon as possible. This policy allows the Authority to maximize the income produced by its properties and operate attractive and safe properties.

Preventive maintenance

Preventive maintenance is part of the planned or scheduled maintenance program of the Lake City Housing Authority. The purpose of the scheduled maintenance program is to allow the Authority to anticipate maintenance requirements and make sure the Authority can address them in the most cost-effective manner. The preventive maintenance program focuses on the major systems that keep the properties operating. These systems include heating and air conditioning, electrical, life safety and plumbing.

#### Dwelling Unit Inspections

Regular inspections of the property grounds and building exteriors are required to maintain the curb appeal of the property. This curb appeal is required to maintain the attractiveness of the property for both current and prospective residents. The inspection procedure will specify the desired condition of the areas to be inspected. This defined condition will include any HUD or locally required standards. The existence of these standards shall not prevent the Housing Authority from setting a higher standard that will make the property more competitive in the local market.

#### Systems Inspections

The regular inspection of all major systems is fundamental to a sound maintenance program. The major systems inspection program overlaps with the preventive maintenance program in some areas. To the extent that inspections, in addition to those required for scheduled service intervals, are needed, they will be a part of the inspection schedule. Any work items identified during an inspection shall be converted to a work order within twenty-four hours and completed within thirty (30) days.

#### Building and Grounds Inspections

Regular inspections of the property grounds and building exteriors are required to maintain the curb appeal of the property. This curb appeal is required to maintain the attractiveness of the property for both current and prospective residents. The inspection procedure will specify the desired condition of the areas to be inspected. This defined condition will include any HUD or locally required standards. The existence of these standards shall not prevent the Housing Authority from setting a higher standard that will make the property more competitive in the local market.

The Lake City Housing Authority includes in this work category all tasks that can be anticipated and put on a regular timetable for completion. Most of these routine tasks are those that contribute to the curb appeal and marketability of the property.

#### Pest Control/Extermination

The Lake City Housing Authority will make all efforts to provide a healthy and pest-free environment for its residents. The Authority will determine which, if any, pests infest its properties and will then provide the best possible treatment for the eradication of those pests.

The Director of Maintenance will determine the most cost-effective way of delivering the treatments -- whether by contractor or licensed Authority personnel.

The extermination plan will begin with an analysis of the current condition at each property. The Director of Maintenance shall make sure that an adequate schedule for treatment is developed to address any existing infestation. Special attention shall be paid to cockroaches. The schedule will include frequency and locations of treatment. Different schedules may be required for each property.

Resident cooperation with the extermination plan is essential. All apartments in a building must be treated for the plan to be effective. Residents will be given information about the extermination program at the time of move-in. All residents will be informed at least one week and again twenty-four hours before treatment. The notification will be in writing and will include instructions that describe how to prepare the unit for treatment. If necessary, the instructions shall be bi-lingual to properly notify the resident population.

#### Landscaping and Grounds

The Lake City Housing Authority will prepare a routine maintenance schedule for the maintenance of the landscaping and grounds of its properties that will ensure their continuing attractiveness and marketability.

The appearance and condition of the paint within each unit is important to unit condition and resident satisfaction. Accordingly, the Lake City Housing Authority will develop a plan to ensure that interior paint in resident dwelling units is satisfactorily maintained.

The XYZ Housing Authority will contract for maintenance services when it is in the best interests of the Authority to do so. When the employees of the Authority have the time and skills to perform the work at hand, they will be the first choice to perform a given task. When the employees of the Authority have the skills to do the work required, but there is more work than there is time available to complete it, the Housing Authority will determine whether it is more cost effective to use a contractor to complete the work. If the Authority staff does not have the skills to complete the work, a contractor will be chosen. In the last instance, the Authority will decide whether it will be cost effective to train a staff member to complete the work.

Once the decision has been made to hire a contractor, the process set out in the XYZ Housing Authority Procurement Policy will be used. These procedures vary depending on the expected dollar amount of the contract. The Director of Maintenance will work with the Procurement Department to facilitate the contract award. The Director will be responsible for the contribution of the Maintenance Department to this process.

The most important aspect of the bid documents will be the specifications or statement of work. The clearer the specifications the easier it will be for the Authority to get the work product it requires.

## 5. Grievance Procedures

### Discrimination Complaints

If there is notification to the PHA that there is reason to believe that there has been any discrimination on the basis of race, color, creed, sex, disability status, familial status, or national origin, the PHA will provide the Fair Housing Complaint Form, HUD-903, and any assistance deemed necessary.

### Informal Hearings

Denials of eligibility will be indicated through written correspondence. Letters will be sent indicating the reason for the denial, notification of the right for an informal hearing, and shall require a verbal request (followed by the family signing a request for hearing form) within ten (10) days from the date of the notification. Failure to request the hearing by signing a request for hearing from within ten (10) days from the date of the letter from the PHA will result in forfeiture of this right.

Informal hearings, upon receipt of a written request, will be conducted for decisions affecting families such as amount of rent calculation or a decision of denial. The informal hearing will be conducted by a member of the PHA staff other than the individual that initially determined the ineligibility.

For terminations of the lease, the hearing must allow for due process for the PHA and the family to include presentation of any evidence and/or opportunity to question witnesses, right to retain and have legal representation, and right to a private hearing.

The person or panel conducting the hearing must issue a prompt written decision stating the reasons for the decision to the PHA staff and the applicant/participant/owner.

Informal hearings will not be conducted by the PHA for the following:

1. Discretionary administrative determinations by the PHA, general policy issues, or class grievances.
2. The PHA's determination of the bedroom size or the participant's occupancy of a unit that is overcrowded or under utilized.
3. A decision of denial or termination based on any drug-related or violent criminal activity or any activity that threatens the health, safety, or peaceful enjoyment of the premises by other residents.

## 7. Community Service

The Housing Authority of the City of Lake City (PHA), as a requirement of Section 512 of the Quality Housing and Work Responsibility Act (QHWRA) and HUD's Federal regulations dated March 29, 2000, requires that each adult Public Housing resident, unless exempt as described herein, volunteer and contribute eight (8) hours per month of community service within the community in which they reside. The effective date of community work service requirement commences January 1, 2001 (the beginning of PHA's fiscal year after October 1, 2000 as set forth in the Federal regulations).

Community Service. The performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is not employment and may not include political activities.

Economic Self-sufficiency Program. Any program designed to encourage, assist, train, or facilitate the economic independence of HUD-assisted families or to provide work for such families. These programs include programs for job training, employment counseling, work placement, basic skills training, education, English proficiency, workfare, financial or household management, apprenticeship, and any program necessary to ready a participant for work (including a substance abuse or mental health treatment program), or other work activities.

Exempt Individual. An adult who:

- (1) Is 62 years of age or older;
- (2) (i) Is a blind or disabled, as defined under 216(i)(1) or 1614 of the Social Security Act (42 U.S.C. 416(i)(1); 1382c), and who certifies that because of this disability she or he is unable to comply with the service provisions of this subpart, or (ii) Is a primary caretaker of such individual;
- (3) Is engaged in work activities;
- (4) Meets the requirements for being exempted from having to engage in a work activity under the State program funded under Part A of Title IV of the Social Security Act (42 U.S.C. 601 *et seq.*) or under any other welfare program of the State in which the PHA is located, including a State-administered welfare-to-work program; or
- (5) Is a member of a family receiving assistance, benefits or services under a State program funded under Part A of Title IV of the

Social Security Act (42 U.S.C. 601 *et seq.*) or under any other welfare program of the State in which the PHA is located, including a State-administered welfare-to-work program and has not been found by the State or other administering entity to be in noncompliance with such a program.

**Service Requirement.** The obligation of each adult resident, other than an exempt individual, to perform community service or participate in an economic-self sufficiency program required by provisions of this policy.

**Work Activities.** As listed in the definition at section 407(d) of the Social Security Act (42 U.S.C. 607(d)) as follows:

Work activities means:

1. Unsubsidized employment;
2. Subsidized private sector employment;
3. Subsidized public sector employment;
4. Work experience (including work associated with the refurbishing of publicly assisted housing) if sufficient private sector employment is not available;
5. On-the-job training;
6. Job search and job readiness assistance;
7. Community service programs;
8. Vocational educational training (not to exceed 12 months with respect to any individual);
9. Job skills training directly related to employment;
10. Education directly related to employment, in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency;
11. Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalence, in the case of a recipient who has not completed secondary school or received such a certificate; and
12. The provision of child care services to an individual who is participating in a community service program.

### III. ADMINISTRATION OF COMMUNITY SERVICE PROGRAM

#### A. Service Requirements

Each adult family member of Public Housing, unless exempt by the PHA, must:

1. Contribute eight (8) hours of community service per month; or
2. Participate in an economic self-sufficiency program for eight (8) hours per month; or
3. Perform eight (8) hours per month of combined activities indicated in 1 and 2 above.

#### B. Administration

The Housing Authority will either administer community service activities directly or may make activities available through cooperative agreements with other community service agencies, organizations or institutions, and/or resident organizations.

The community service requirement may be satisfied by participation in but not limited to, one or more of the following activities:

1. Participation in an economic self-sufficiency program;
2. Furthering education, *i.e.*, literacy programs, obtaining GED, continuing education classes or job-training, etc.;
3. Assistance with local Boys and Girls clubs, Head Start, Girl or Boy Scouts;
4. Participation in a community beautification program; or
5. Participation through a cooperative agreement by the PHA with a local community service agency, organization or institution, and/or resident organization.
6. Such other community service approved by the Executive Director.

Community service participants will be allowed to choose among the various activities. Should a selection not be made, the Housing Authority or its designee may, at its discretion, suggest an activity for each non-exempt adult member. Community service is an activity or activities that provide a benefit to the housing authority or the community. Work or activities for a for profit entity should not be considered as community service.

Each adult family member will be required to complete a Community Service Form (Attachment 1) and must provide documentation to support an exemption. A copy of such executed form will be provided to the resident which will serve as the required written description of the service requirement. When possible, the PHA will verify the supporting documentation for exempt status by third party verification. At each annual reexamination, the PHA will make a determination for each adult family member on exempt or non-exempt status in the same manner.

As indicated on the Community Service Form (Attachment 1) in order for the PHA to make an interim change in the community service status, changes in exempt or non-exempt status must be initiated by the resident should their status change during the 12-month period following a reexamination change by submission of a written request describing the change together with supporting documentation.

The PHA will maintain community service records for each adult resident (unless exempt) by one of the following methods:

- 1) Utilizing certifications and service records of a participating local community service agency, organization or institution ; or
- 2) Completion of a Community Service Log for each community service participant (see Attachment 2) by the PHA or a designated person for the resident organization.

Participants will be permitted to accumulate more than 8 hours in any given month that can be used as credits for future non-service months, *e.g.*,

GED classes that meet 3 times per week for 2 hours per class for 12 weeks = 72 hours or 9 months of community service credit. The PHA may grant incentives or utilize discretionary waivers for some portion of the required eight (8) hours per month for advanced completion of the community service requirements, e.g. completion of a substantial portion of the required 96 hours per year in a two-month or less period.

#### IV. NONCOMPLIANCE

The HA will use its discretion on a case-by-case basis in determining noncompliance with the community service requirements. Failure on the part of any family member to comply with the requirements of the regulations, this policy and the PHA's lease (after January 1, 2001) is grounds for non-renewal of the lease at the end of the twelve month lease term.

The PHA must provide a written notice of noncompliance to any family that contains the following:

- (1) A description of noncompliance and a statement that the lease will not be renewed at the end of the lease term unless:
  - (a) the head-of-household and noncompliant resident enters into a written agreement with the PHA, in the form and manner required by the PHA, to cure such noncompliance; or
  - (b) the family provides written assurance that is satisfactory to the PHA that the noncompliant resident no longer resides in the unit.
- (2) A statement that the resident may request a grievance hearing in accordance with the PHA's Grievance policy and/or exercise any available judicial remedy to seek timely redress for the PHA's nonrenewal of the lease because of such determination.

#### V. PROHIBITION AGAINST REPLACEMENT OF PHA EMPLOYEES

The PHA will not substitute community service or self-sufficiency activities performed by residents for work ordinarily performed by PHA employees, or replace a job at any location where residents perform activities to satisfy the service requirement.

#### 8. Safety and Crime Prevention

The Housing Authority provides weekend and afterhours security patrols through agreements with the Lake City Police Department and Florence County Sheriff's Department. These relationships provide a strong deterrent to criminal activity and insures a safe and peaceful environment for Housing Authority residents. This also provides the necessary networking and cooperation of these resources to address problems before and when they occur.

#### 9. Pets

The Housing Authority of the City of Lake City (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 (as attached).

2. The PHA will permit **(no more than one pet per household of any type )**

One (1) spayed or neutered\* dog, adult weight of no more than 20 lbs (adult weight), no more than 16" 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 \$ 75.00 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 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 damage 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 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. Dogs 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. Pet owners must adhere to all local animal and lease requirements and ordinances.
9. Pet owners will be responsible for removal of pet waste. The PHA will impose a separate charge of \$25.00 per occurrence for removal of pet waste should the resident fail to do so, after written notification. 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 a 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 account 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 grounds, shall be considered a threat to safety, and the Resident will be given written notice to remove the pet. Failure of the resident to immediately remove the pet after written notification will result in lease termination.**
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 terminate the lease.
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 a 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 an 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.
17. 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
18. 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 the pet and put a notice on the 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.

#### **10. Civil Rights Certification.**

In accordance with the following regulations, the PHA will not on account of race, color, creed, sex, disability status, familial status, or national or ethnic origin deny to any family the opportunity to apply or receive housing assistance. Selections will be made in accordance with the applicable requirements included herein.

1. Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d) and the implementing regulations 24 CFR Part 1 and Title VIII of the Civil Rights Act of 1968, as amended;
2. The Fair Housing Act (42 U.S.C. 3601-3619) and the implementing regulations at 24 CFR parts 100, 108, 109 and 110.
3. Executive Order 11063 on Equal Opportunity in Housing (1962), as amended, Executive Order 12259, 46 FR 1253 (1980), as amended, Executive Order 12892, 59 FR 2939 (1994) (implementing regulations at 24 CFR part 107).
4. Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794) and the implementing regulations at 24 CFR Part 8;
5. The Age Discrimination Act of 1975 (42 U.S.C. 6101-6107) and the implementing regulations at 24 CFR Part 146; and
6. Title II of the Americans with Disabilities Act (42 U.S.C. 12101-12213) to the extent applicable.

Selections will be made in accordance with the selection criteria consistent with HUD's affirmative fair housing objectives and are included herein.

The PHA will post on the applicant/resident information bulletin board the telephone number for the HUD Office of Fair Housing and Equal Opportunity (FHEO) toll-free hotline - (800-424-8590).

## Equal Opportunity Housing Plan

In addition to the Fair Housing and Equal Opportunity Housing efforts specifically indicated throughout this policy the PHA will affirmatively further fair housing goals and comply with equal opportunity requirements by the following actions:

1. By adoption of this policy, compliance by the Housing Authority with all fair housing and equal opportunity regulations and requirements, is certified.
2. Encouraging owners to make suitable units located outside areas of poverty or racial concentration available for leasing in the program to provide participants with the broadest geographical choice in selection.
3. Provide available information and assist any applicants and/or participants if they believe discrimination has occurred to include provision of a Housing Discrimination Complaint form (HUD-903).
4. Recruitment and equal opportunity employment practices will be utilized to attract and recruit qualified minority applicants for any vacancies.

### Reasonable Accommodation

The PHA will include procedures in the application, reexamination, interview, and eviction process to ensure that applicants and/or participants are aware of their opportunity to request reasonable accommodations. Should any applicant or participant indicate the need for reasonable accommodations, the PHA will make available to them a Request for Reasonable Accommodation form. It is the policy of the PHA to make every effort possible to provide reasonable accommodations for persons with disabilities when such requests are reasonable, economically, financially and administratively feasible

The HA will utilize reasonable accommodations practices for any applications received by handicapped individuals especially those involving sight or hearing impaired applicants.

The HA will not remove names from the waiting list that would violate the rights of a disabled, mobility impaired, or hearing impaired person. Reasonable accommodations for application or updates will be provided to disabled (mobility impaired or hearing impaired) applicants. Any and all decisions granting or denying requests for reasonable accommodations will be in writing.

Local agency certification of consolidated plan compliance is attached.

### **11. Fiscal Year Audit** (previously submitted)

### **12. Asset Management** N/A

### **13. Violence Against Women Act (VAWA)**

When possible the PHA will advise victims of options available to them under the act and coordinate with other agencies to provide assistance to victims through resources available to the PHA. The Housing Authority provides locations for workshops for the Pee Dee Coalition Against Criminal and Domestic Violence. Information in the form of brochures and also referrals to the Pee Dee Coalition are also provided by Housing Authority staff. The Housing Authority has worked in providing relocation assistance with other agencies for victims.

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

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

<b>Part I: Summary</b>					
PHA Name: LAKE CITY HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: SC16P018501-11 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval: 2011	

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			1000			
3	1408 Management Improvements			18000			
4	1410 Administration (may not exceed 10% of line 21)			41004			
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures			300000			
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment			50035			
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						

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

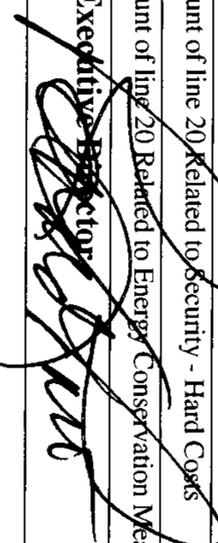
Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

**Part I: Summary**

PHA Name: LAKE CITY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P018501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010
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Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending:       Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
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)	410039			
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	15000			
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	
		8/5/14			
				Date	

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



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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 Expires 4/30/2011

**Part I: Summary**

PHA Name: LAKE CITY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: SC16P018501-10 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010
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Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending: 06/30/2011       Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>		Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements	18000				
4	1410 Administration (may not exceed 10% of line 21)	47472		47472		47472
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	159279	53902	53902		53902
10	1460 Dwelling Structures	250000	205347			
11	1465.1 Dwelling Equipment—Nonependable		150000	112709		112709
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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 Expires 4/30/2011

<b>Part I: Summary</b>		<b>FFY of Grant: 2010</b>
<b>PHA Name:</b> LAKE CITY HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: SC16P018501-10 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant Approval: 2010</b>

Type of Grant  
 Original Annual Statement  
 Performance and Evaluation Report for Period Ending: 06/30/2011  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	474721	474721	214083	214083
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	15000			
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures		150000	112709	112709
Signature of Executive Director 		Date 8/5/11		Signature of Public Housing Director	
				Date	

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



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: LAKE CITY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SCR01850109 Date of CFPP:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 07/31/2011	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report

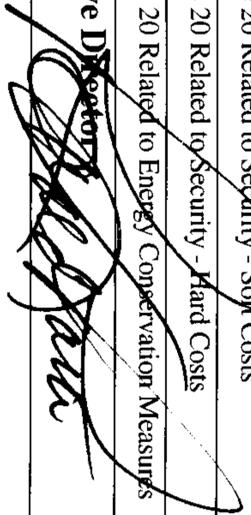
Line	Summary by Development Account	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>		Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>	39204		39204		39204

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

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

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

<b>Part I: Summary</b>	
PHA Name: LAKE CITY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R01850109 Date of CFFP:
	FFY of Grant: 2009 FFY of Grant Approval: 2009

<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending <del>06/30/2011</del>		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
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)	39204	39204
21	Amount of line 20 Related to LBP Activities		10500
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director 		Signature of Public Housing Director 	
		Date	

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



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

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

**Part I: Summary**

<b>PHA Name: LAKE CITY HOUSING AUTHORITY</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: SCR01850108 Date of CFPP:	<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval: 2008</b>
--	---	---

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011	Reserve for Disasters/Emergencies <input type="checkbox"/>	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>		Expended	
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>		39457		39457		39457

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

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

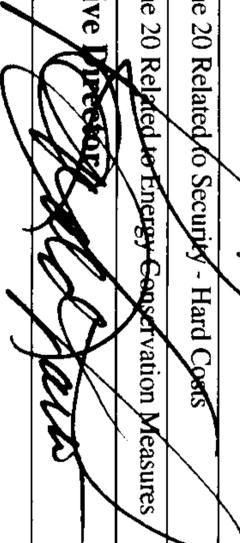
U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: LAKE CITY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R01850108 Date of CFP:	FFY of Grant: 2008 FFY of Grant Approval: 2008
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Type of Grant  
 Original Annual Statement  
 Reserve for Disasters/Emergencies  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Performance and Evaluation Report for Period Ending: 06/30/2011

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	39457		39457	39457
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 06/30/2011	Signature of Public Housing Director		Date

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



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: LAKE CITY HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: SCR01850107 Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval: 2007
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Type of Grant  Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 07/31/2011  Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>						
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonependable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>	38146			38146		38146

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

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

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2007</b>
<b>PHA Name:</b> LAKE CITY HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R01850107 Date of CFFP:	<b>FFY of Grant Approval: 2007</b>

Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending: 06/30/2011       Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	
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)	38146		31926
21	Amount of line 20 Related to LBP Activities			
22	Amount of line 20 Related to Section 504 Activities			
23	Amount of line 20 Related to Security - Soft Costs			
24	Amount of line 20 Related to Security - Hard Costs			
25	Amount of line 20 Related to Energy Conservation Measures			
<b>Signature of Executive Director</b>		<b>Date 06/30/2011</b>	<b>Signature of Public Housing Director</b>	
			<b>Date</b>	

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



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**

<b>PHA Name: LAKE CITY HOUSING AUTHORITY</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: SCR01850106 Date of CFP:	<b>FFY of Grant: 2006</b> <b>FFY of Grant Approval: 2006</b>
--	--	---

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011	Summary by Development Account	Total Estimated Cost		Obligated	Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>		Expended	
1		Total non-CFP Funds					
2		1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3		1408 Management Improvements					
4		1410 Administration (may not exceed 10% of line 21)					
5		1411 Audit					
6		1415 Liquidated Damages					
7		1430 Fees and Costs					
8		1440 Site Acquisition					
9		1450 Site Improvement					
10		1460 Dwelling Structures					
11		1465.1 Dwelling Equipment—Nonexpendable					
12		1470 Non-dwelling Structures					
13		1475 Non-dwelling Equipment					
14		1485 Demolition					
15		1492 Moving to Work Demonstration					
16		1495.1 Relocation Costs					
17		1499 Development Activities <sup>4</sup>	36438		36438		36438

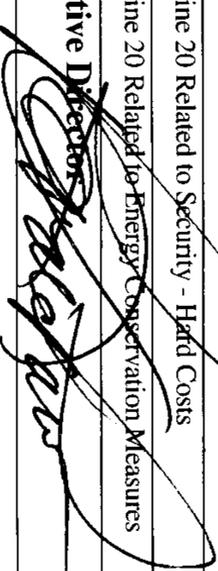
<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall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

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

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

<b>Part I: Summary</b>		<b>FFY of Grant: 2006</b>	
<b>PHA Name:</b> LAKE CITY HOUSING AUTHORITY	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: SC16R01850106 Date of CFFP:	<b>FFY of Grant Approval: 2006</b>	

Type of Grant  
 Original Annual Statement       Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending: 06/30/20110       Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
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)	36438		36438	36438
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 06/30/2011	Signature of Public Housing Director		Date

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



**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

**Part I: Summary**

PHA Name/Number LAKE CITY HOUSING AUTHORITY SC018		Locality (City/County & State) LAKE CITY /FLORENCE, SC			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 1	
Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015	
B. Physical Improvements Subtotal	Annual Statement	515000	5000000	444000	465000	
C. Management Improvements		23000	23000	25000	25000	
D. PHA-Wide Non-dwelling Structures and Equipment						
E. Administration		40000	40000	40000	40000	
F. Other						
G. Operations						
H. Demolition						
I. Development						
J. Capital Fund Financing - Debt Service						
K. Total CFP Funds						
L. Total Non-CFP Funds						
M. Grand Total		578000	563000	505000	530000	

**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

**Part I: Summary (Continuation)**

PHA Name/Number LAKE CITY HOUSING AUTHORITY SCO18		Locality (City/county & State) LAKE CITY/FLORENCE, SC			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 1	
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	
PHA WIDE	Annual Statement	ADMINISTRATION SECURITY PATROLS DATA PROCESSING	ADMINISTRATION SECURITY PATROLS DATA PROCESSING	ADMINISTRATION SECURITY PATROLS DATA PROCESSING	ADMINISTRATION SECURITY PATROLS DATA PROCESSING	
SCO18001			BATHROOM RENOVATION	ROOFING		
SCO18002			BATHROOM RENOVATION	ROOFING		
SCO18003		KITCHEN RENOVATION				
SCO18005				KITCHEN RENOVATION V/C TILE	BUILD ADDITIONAL UNITS	



**Part II: Supporting Pages – Physical Needs Work Statement(s)**

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2014			Work Statement for Year 5 FFY 2015		
	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	PHA WIDE ADMINISTRATION SECURITY PATROLS DATA PROCESSING	1	65000	PHA WIDE ADMINISTRATION SECURITY PATROLS CAMERAS DATA PROCESSING	1	85000
Annual Statement	SC018001 ROOFING	30	85000	SC018005 BUILD ADDITIONAL UNITS	12	300000
Annual Statement	SC018002 ROOFING	70	180000	SC018001/2 FENCING/ LANDSCAPING	100	40000
Annual Statement				SC018003 FENCING/ LANDSCAPING	118	40000
Annual Statement				SC018005 FENCING/ LANDSCAPING	52	40000
Annual Statement				SC018019 FENCING/ LANDSCAPING	17	20000
	Subtotal of Estimated Cost		\$ 505,000.00	Subtotal of Estimated Cost		\$525,000

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Phlebotomy	Mon-Lab	12:30PM - 3:30PM	11:10AM - 12:15PM
Professional Development	MW	4:30PM - 5:45PM	3:30PM - 4:45PM
Basic Information Processing	TTT	4:30PM - 5:45PM	5:45PM - 6:55PM
Art Appreciation	MW	9:30AM - 10:45AM	10:45AM - 11:55AM
Introductory Biology	TTT	9:30AM - 11:20AM	11:20AM - 12:30PM
Basic Anatomy & Physiology	TTT	8:00AM - 9:15AM	9:15AM - 10:30AM
Business Law II	MW	8:00AM - 9:15AM	9:15AM - 10:30AM
College Skills	TTT	9:30AM - 10:45AM	10:45AM - 11:55AM
College Skills	TTT	8:00AM - 9:15AM	9:15AM - 10:30AM
Economic Concepts	TTT	8:00AM - 9:15AM	9:15AM - 10:30AM
Microeconomics	TTT	2:00PM - 3:15PM	3:15PM - 4:30PM
Developmental English	TTT	8:00AM - 9:15AM	9:15AM - 10:30AM
Introduction to Composition	TTT	12:30PM - 1:45PM	1:45PM - 3:00PM
English Composition I	TTT	2:00PM - 3:15PM	3:15PM - 4:30PM
English Composition I	TTT	11:00AM - 12:15PM	12:15PM - 1:30PM
English Composition II	MW	2:00PM - 3:15PM	3:15PM - 4:30PM
Western Civilization I	TTT	12:30PM - 1:45PM	1:45PM - 3:00PM
American History I	MW	11:00AM - 12:15PM	12:15PM - 1:30PM
Technology & Society	MW	8:00AM - 9:15AM	9:15AM - 10:30PM
Developmental Math	TTT	12:30PM - 1:45PM	1:45PM - 3:00PM
Developmental Math	TTT	9:30AM - 10:45AM	10:45AM - 11:55AM
Beginning Algebra	TTT	11:00AM - 12:15PM	12:15PM - 1:30PM
Principles of Management	MW	12:30PM - 1:45PM	1:45PM - 3:00PM
Introduction to Philosophy	MW	9:30AM - 10:45AM	10:45AM - 11:55AM
General Psychology	MW	12:30PM - 1:45 PM	1:45 PM - 3:00 PM
General Psychology	TTT	3:30PM - 4:45PM	4:45PM - 6:00PM
Human Growth & Development	MW	11:00AM - 12:15PM	12:15PM - 1:30PM
Introduction to Sociology	MW	2:00PM - 3:15PM	3:15PM - 4:30PM
Public Speaking	TTT	12:30PM - 1:45PM	1:45PM - 3:00PM



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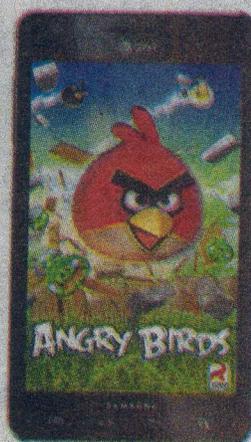
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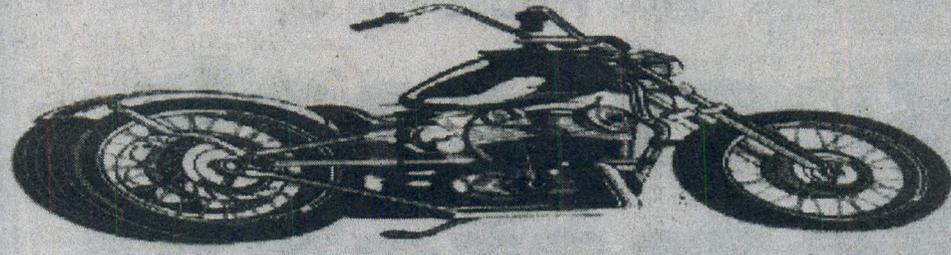
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# COBBS CORNER PRESENTS



## JULY 30, 2011

### POKER RUN FOR THE FAMILY OF DAVID FLOYD

1<sup>ST</sup> BIKE OUT AT 11:00AM

LAST BIKE OUT AT 1:00PM

LAST BIKE IN AT 5:00PM

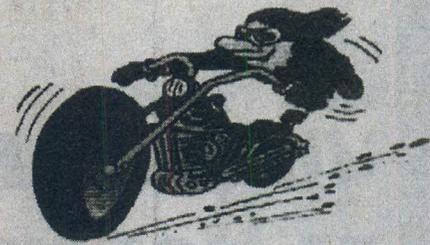
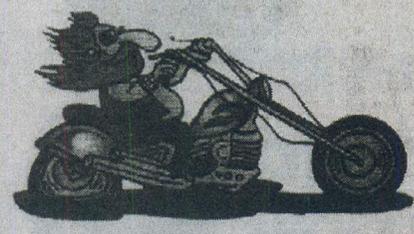
STARTS AND ENDS AT COBBS CORNER, SCRANTON S.C.

\$20.00 PER HAND ,UNLIMITED NUMBER OF HANDS  
PRIZES FOR BEST AND WORST HAND

DOOR PRIZES 50/50 DRAWING LIVE AUCTION LIVE MUSIC  
FOOD PROVIDED WITH PURCHASE OF CARD HAND OR SOLD FOR \$5.00 PER PLATE  
ALL CARS WELCOME AS WELL

ANY QUESTIONS CONTACT ROGER TILTON AT 843-598-4426 OR BRIAN FORTNER AT 843-373-0508

MR. FLOYD PASSED AWAY ON JUNE 18<sup>TH</sup>, 2011 AND HIS FAMILY NEEDS YOUR HELP WITH FINAL  
EXPENSES, PLEASE JOIN US FOR THIS FUN FILLED EVENT IN HIS NAME AND HELP A FAMILY IN NEED!



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July 20, 2011

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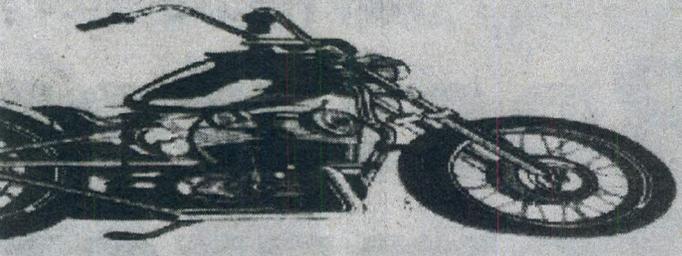
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# CORNER PRESENTS



**JULY 30, 2011**  
**FOR THE FAMILY OF DAVID FLOYD**

**1<sup>ST</sup> BIKE OUT AT 11:00AM**

**LAST BIKE OUT AT 1:00PM**

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**HANDS AT COBBS CORNER, SCRANTON S.C.**

**AND ,UNLIMITED NUMBER OF HANDS  
ES FOR BEST AND WORST HAND**

**0/50 DRAWING LIVE AUCTION LIVE MUSIC**

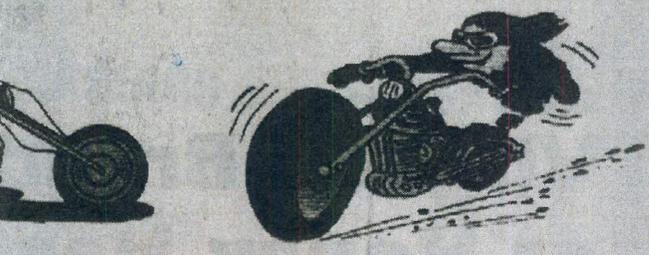
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**ALL CARS WELCOME AS WELL**

**ROGER TILTON AT 843-598-4426 OR BRIAN FORTNER AT 843-373-0508**

**Y ON JUNE 18<sup>TH</sup>, 2011 AND HIS FAMILY NEEDS YOUR HELP WITH FINAL**

**FOR THIS FUN FILLED EVENT IN HIS NAME AND HELP A FAMILY IN NEED!**



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**The Lake City Housing Authority will take public and resident comments on its proposed Capital Fund Program, annual and 5 year plans, for 2011. A meeting will be held on August 4, 2011 @ 5:30 p.m. in the Offices of the Lake City Housing Authority for the purposes of receiving comments. A copy of the plans are available for review at the Lake City Housing Authority, 398 N. Matthews Rd., Lake City, S.C. 29560.**

# Housing Authority of the City of Lake City

June 14, 2011

Residents, SC018-001, 002, 003, 005 & Olanta

The Housing Authority Capital Fund Program, proposed annual and 5 year plans, are available at the Housing Authority Offices, 398 North Matthews Rd., Lake City, SC 29560, for review and comment.

A public and resident meeting will be held on August 4, 2011 @ 5:30, at the Housing Authority Offices, 398 N. Matthews Rd. for the purpose of explaining the proposed plan and soliciting resident and public comments.

Thank you,  
Ronald L. Poston  
Executive Director

DISTRIBUTED TO ALL RESIDENTS

NOTICE WAS DISPLAYED AT HOUSING AUTHORITY  
OFFICES, 398 N. MATTHEWS RD.

Lake City Housing Authority  
Annual Plan and Capital Fund Meeting

August 4, 2011

Caffie Burgess 308 Roman Court (843) 394-140

Ronald L. Poston