



Housing Authority City of Kennewick



April 8, 2011

U.S. Department of HUD, Washington DC
Seattle Regional Office - Office of Public Housing

SUBJECT: *FY 2011 Agency Annual Plan Capital Fund Program (CFP) FY 2011 Original Annual Statement & Performance & Evaluation Reports for FY 2010-2007 Submissions
*Housing Authority City of Kennewick (WA012)

Dear HUD:

Please find the enclosed original and/or copies of the Housing Authority City of Kennewick's (KHA) FY 2011 Agency Annual Plan, Capital Fund Program (CFP) FY 2011 Original Annual Statement and Performance & Evaluation Reports for FY 2010-2007, along with the required HUD Plan Certifications and Supporting Narrative Documentation.

If you should have any questions or concerns regarding KHA's Agency Annual Plan, Capital Fund Program (CFP) or HUD Certifications and Supporting Narrative Documentation submissions, please contact me at (509) 586-8576, Ext. 103 or karlenen@kennewickha.org

Sincerely,

Karlene K. Navarre
Executive Director

Enclosures: *HUD-50075 - PHA 5-Year/Annual Plan (FY 2011)
*HUD-50075.1 - CFP FY 2011 Annual Statement (Scanned Signature)
*HUD-50075.1 - CFP FY 2010 to FY 2007 Performance & Evaluation Report (P&E's) - (Scanned Signature)
*HUD-50077-SL- PHA Certifications of Compliance with PHA Plans Related Regulations (Scanned Signature)
*HUD-50077-CR- Civil Rights Certification (Scanned Signature)
*HUD-50070 - Certification for a Drug-Free Workplace (Scanned Signature)
*HUD-50071 - Certification of Payments to Influence Federal Transactions (Scanned Signature)
*HUD-LLL & LLL/A - Disclosure of Lobbying Activities (Scanned Signature)
Disclosure of Lobbying Activities Continued Sheet
*PHA/KHA - Resident Advisory Board (RAB) Comments Narrative To FY 2011 Agency Annual Plan
*PHA/KHA - Challenged Elements Narrative To FY 2011 Agency Annual Plan
*PHA/KHA - Violence Against Women Act & Department of Justice Reauthorization Act of 2005 - (VAWA) Narrative To FY 2011 Agency Annual Plan

1.0	PHA Information PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA) PHA Code: WA012 PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 07/2011				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 190 Number of HCV units: 1,113				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: **KHA's Mission: Develop and maintain safe, affordable, quality housing that promotes healthy neighborhoods and inspires communities. Create partnership opportunities that support and encourage program participants to become self-sufficient. Manage all assets with fiscal responsibility & integrity. **KHA's "Vision" Statement: KHA will be known and respected as a regional leader in leveraging resources to create affordable housing programs and opportunities that contribute positively to the community.				
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. **None At This "Annual" Plan Submission				

<p>6.0</p>	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p>**KHA “New/Upcoming” FY 2011 Annual Goal and Objections:</p> <p><u>Increase Affordable Housing Stock:</u></p> <p>**KHA will continue to identify and address all viable options and resources within its agency capacity to partner with community agencies to expand its housing stock in providing either transitional or long-term affordable housing for special needs population identified as under-served within its community. Barriers that would impede for KHA to not meet its goals and objectives to expand its housing stock would be major items such as but not limited to insufficient funding and viable community partnership constraints.</p> <p>**KHA anticipates in expanding its housing stock to construct 13-16 Section 8 “Project-Based” units for the special needs population of low-income homeless households. In 2009, KHA had ceased the project due to the current economy and recession resulting with insufficient funding to support the project. KHA will continue with the Goal by identifying and securing appropriate funding and community partnerships for this project.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>**Agency Plans are available at the main Administration Office of the PHA (Housing Authority)</p>
<p>7.0</p>	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>**KHA anticipates to Section 8 Project-Base 13-16 units for the special needs population of low-income homeless households. General location of the anticipated units will be in the City of Kennewick (off Volland Street & Kennewick Avenue, low to moderate income census track), Benton County. KHA continues to seek viable funding sources at this time for the anticipated project. By project-basing vouchers it will meet project funding purposes, will sustain viability for the low-income housing project, and will not impact Housing Authority’s (KHA) Section 8 Voucher capacity.</p>
	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p> <p>**See Attached Forms to KHA’s FY 2011 Agency Plans</p>
<p>8.1</p>	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>**See Attached HUD-50075.1 Forms to KHA’s FY 2011 Agency Plans & Performance & Evaluation Reports (P&E) – P&E FY 2010, 2009, 2008 & 2007</p>
<p>8.2</p>	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>**See Attached HUD-5007.2 Form Attached to KHA’s FY 2011 Agency Plans</p>
<p>8.3</p>	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. N/A</p>

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

KHA Waiting List(s):

**Out of the total percent (100%) of KHA’s waiting lists for its Public Housing Program & Section 8 Programs the following housing needs are identified (data is derived from combining both program waiting lists together):

Income: 86 % “households who are “extremely low income”(30% of Areas Median Income Guidelines),
12 % “households who are “low-income (30% but 50% of Areas Median Income Guidelines)
2 % “households who are “low-income (50% but 80% of Areas Median Income

Household Composition: 56 % With children
1 % Elderly
1 % With Disabilities

Race/Ethnicity: 85 % White
26 % Hispanic/Latino
8 % Black/African American
2 % Asian

Needed Bedroom Size Units: 1 Bd = 46 %
2 Bd = 38 %
3 Bd = 13 %
5 Bd = 3 %
6 (+) = No Need Identified

Tri-Cities Consolidated Plan:

Based on information provided by applicable Consolidated Plan (2010-2014 Tri-Cities Consolidate Plan – Consolidated Community Development & Affordable Housing Plan For The Cities of Kennewick, Richland & Pasco) the following information reasonably addresses identification of housing needs in KHA’s jurisdiction, however information is limited and/or is not provided within this data source (most current data, % for low income disabled, elderly, ethnicity, etc) **A total of 53% of Tri-Cities renter households who have incomes less than 50% of median income are paying more than 30% of their income for rental housing, cost burden individuals in the City of Kennewick is 53%, City of Richland is 54%, number/percentage of extremely low, low income (poverty) renters, high vacancy rate (99%), rising rents increasing annually (6%-8%), decreased general public assistance & SSI benefits leads limited options for housing and especially affordable housing options and is a contributor to homelessness, at risk for homelessness for individuals and household (with/without children) and the special needs populations who are extremely low and low income to no income are at the highest risk (elderly, persons with disabilities, HIV/AIDS, drug/alcohol dependency, domestic violence victims, youth, etc.). Tri-Cities/Benton County has limited shelter housing, one (1) domestic violence shelter (Benton County) housing a max of 35 individuals (women/children), one (1) local Mission housing a max 54 beds for singles males, 4 beds for single female, 41 single male/female with children, 166 shelter vouchers for a given night stay. Short-term transitional housing vouchers there are 303 family beds, 159 individual beds. All data provided demonstrates the great and increasing need for more affordable long-term, shelter & transitional housing in KHA’s jurisdiction. Consolidated Plan does not provide estimated or exact data for housing needs of accessibility, size of units, location and ethnicity.

9.0

Tri-Cities, Washington Crown Properties Management Apartment Rental Surveys:

Tri-Cities, Washington Crown Properties Management Apartment Rental Survey for September 2010 reported occupancy rate at 99% for the City of Kennewick, 99% for City of Richland, March 2011 Survey reported occupancy rates remain steady over the last year and at 99% for the City of Kennewick, 97% for the City Richland, resulting in housing hardship, homelessness and at risk for homelessness for extremely low and low income individuals/households with no availability to rental housing (affordable/market rent units) and due to continued steady high occupancy rates, rents have been and continue to increase and the extremely low and low income households are competing for the same units and usually higher income households will be offered the units (reflecting a market under pressure).

Benton & Franklin Counties 2010 Homeless Point-In-Time Count (PIT) – A B-County Survey:

Benton & Franklin Counties 2010 Homeless Point-In-Time Count (PIT) results (569 homeless households & 433 homeless individuals) documents an estimated 45 households representing 61 individuals were found out doors or staying in a vehicle. Other homeless counted were staying in shelters (136 persons) or transitional housing (236 persons); out of the total households surveyed for Benton County per percentage breakdown for homeless individuals was 38%, households was 32%, 22% was singles, 49% people in families and 69% people at risk of homelessness, 33% had mental health issues, 19% physically disabled, 5% developmental disabilities, 20% drug/alcohol addition, demonstrating the need for additional affordable long-term, shelter and transitional housing in our communities.

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan</p> <ol style="list-style-type: none"> 1. KHA anticipates to Section 8 Project-Base 13-16 units for the special needs population of low-income homeless households. KHA is seeking viable property for acquisition in eligible low-income Census Tract in the City of Kennewick, Benton County, and funding sources at this time for the anticipated project. By project-basing vouchers it will meet project funding purposes, will sustain viability for the low-income housing project, and will not impact Housing Authority’s (KHA) Section 8 Voucher capacity. 2. KHA will continue to identify and address all viable options and resources within its agency capacity to partner with community agencies to expand its housing stock in providing either transitional or long-term affordable housing for the special needs populations that are identified within our communities.
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <ol style="list-style-type: none"> (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. **None At This Annual Plan Submission (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” **The HA hereby defines substantial deviation and significant amendment or modification as any change in policy which significantly and substantially alters the Authority’s stated mission and the populations the Authority serves. This would include admissions preferences, demolition or disposition activities and conversion programs. Discretionary or administrative amendments consonant with the Authority’s stated overall mission and basic objectives will not be considered substantial deviations or significant amendments.
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ol style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (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. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)

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

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

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

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (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.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program
CFP FY 2011 Grant

Part I: Summary		Grant Type and Number		FFY of Grant: 2011	
PHA Name: Housing Authority City of Kennewick (KHA)		Capital Fund Program Grant No: WA19P01250111 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval:	
Type of Grant		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: 1)	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-10		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹ Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	30,000			
3	1408 Management Improvements	25,000			
4	1410 Administration (may not exceed 10% of line 21)	30,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	206,843			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program
CFP FY 2011 Grant

Part I: Summary		FFY of Grant: 2011	
PHA Name: Housing Authority City of Kennewick (KHA)	Grant Type and Number Capital Fund Program Grant No: WA19P01250111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:)	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	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)	291,843	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	206,843	
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	
<i>[Signature]</i>		<i>[Signature]</i>	
Date		Date	
04/06/2011			

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

Part II: Supporting Pages										
PHA Name: Housing Authority City of Kennewick (KHA)			Grant Type and Number Capital Fund Program Grant No: WA19P01250111 CFPP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2011				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work		
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²			
HA Wide	Operations-Allocation of Operations Salaries	1406		30,000						
	Management Improvements	1408		25,000						
	Administration-Allocation of Admin Salaries	1410		30,000						
12-1 Sunnyslope	ADA Compliance	1460		116,843						
12-4 Keewaydin	ADA Compliance	1460		90,000						
12-4 Keewaydin/ 12-1 Sunnyslope	Dwelling Equipment	1465		0						

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

² To be completed for the Performance and Evaluation Report.

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		Grant Type and Number		FFY of Grant: 2010	
PHA Name: Housing Authority City of Kennewick (KHA)		Capital Fund Program Grant No: WA19P01250110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval: 2010	
Type of Grant		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: Revision #1)	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report for Period Ending: 1/2011		<input type="checkbox"/> Final Performance and Evaluation Report	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Development Account		Summary by Development Account		Total Actual Cost ¹	
Line	Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	30,000	8,082	8,082	
3	1408 Management Improvements	25,000	11,000	10,762	
4	1410 Administration (may not exceed 10% of line 21)	30,000	3,000	2,053	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	190,000	196,843	173,211	173,211
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	10,000		6,479	6,479
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

Part I: Summary		FFY of Grant: 2010 FFY of Grant Approval: 2010	
PHA Name: City of Kennewick (KHA)	Grant Type and Number Capital Fund Program Grant No: WA19P01250110 Replacement Housing Factor Grant No: Date of CFFP:		
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: Revision #1) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
Line	Original	Revised²	Obligated
18a	1501 Collateralization or Debt Service paid by the PHA		Expended
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)	305,000	291,843
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	30,000	
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>Karlene A. Jensen</i>		Signature of Public Housing Director	
Date 04/06/2011		Date	

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

Part II: Supporting Pages		Federal FFY of Grant: 2010				
PHA Name: Housing Authority City of Kennewick (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P01250110 CFPP (Yes/No): Replacement Housing Factor Grant No:				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original Revised ¹	Total Actual Cost Funds Obligated ² Funds Expended ²	Status of Work
HA Wide	Operations	1406		30,000	8,082	In Progress
	Management Improvements	1408		25,000	11,000	In Progress
	Administration	1410		30,000	3,000	In Progress
12-1 Sunnyslope	Siding Project	1460		190,000	173,211	Complete
	ADA Compliance	1460		20,000	23,632	In Bid Process
12-4 Keewaydin	ADA Compliance	1460		10,000	0	
12-1 Sunnyslope/ 12-4 Keewaydin	Dwelling Equipment	1465		0	6,479	In Progress

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²To be completed for the Performance and Evaluation Report.

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

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval: 2009			
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P012501-09 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011	<input checked="" type="checkbox"/> Revised Annual Statement (revision no: Revision #2) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	30,000	59,626	59,626	59,626
3	1408 Management Improvements	25,000	25,000	25,000	25,000
4	1410 Administration (may not exceed 10% of line 21)	30,000	29,813	29,813	29,006
5	1411 Audit	5,000	5,000	0	0
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	185,000	0	0	0
10	1460 Dwelling Structures	0	177,848	99	99
11	1465.1 Dwelling Equipment—Nonexpendable	10,000	848	848	848
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	15,000	0	0	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	0	0	0	0
17	1499 Development Activities ⁴				

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⁴ RHF funds shall be included here.

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

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval: 2009	
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P012501-09 Replacement Housing Factor Grant No: Date of CFFP:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: Revision #2) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant		Total Actual Cost ¹	
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Development Account		<input type="checkbox"/> Revised ² <input type="checkbox"/> Obligated	
Line	Summary by Development Account	Original	Revised ²
18a	1501 Collateralization or Debt Service paid by the PHIA		
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)	300,000	298,135
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	0	0
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		Date	

[Handwritten Signature] 04/06/2011

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Part II: Supporting Pages		Federal FFY of Grant: 2009									
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK		Grant Type and Number Capital Fund Program Grant No: (KHA)WA19P012501-09 CFFP (Yes/No): Replacement Housing Factor Grant No:									
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work			
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²				
HA Wide	Operations 1. 10% Admin. Salaries TOTAL	1406		30,000	59,626	59,626	59,626		Complete		
HA Wide	Mgmt. Improvements 1. Staff Training - (HUD changes/compliance), Computer/Software & Equipment TOTAL	1408		25,000	25,000	25,000	25,000		Complete		
HA Wide	Administration 1. 10% Admin. Salaries (ED, Finance Officer, Acct. Asst.) TOTAL	1410		29,813	29,813	29,813	29,813		Complete		
	Audit 1. Audit Fees TOTAL	1411		5,000	5,000	0	0		In progress		
WA 12-1 Sunnyslope	Site Improvements 1. Siding 2. Landscaping/Tree Removal	1450	0	173,500 0	163,232 14,517	99 0	99 0		In Progress In Progress		
WA 12-4 Keewaydin	1. Common Area Carpet TOTAL			11,500 274,813	277,088	114,538	114,538		Revised		

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

Part I: Summary		FFY of Grant: 2008 FFY of Grant Approval: 2008	
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P012501-08 Replacement Housing Factor Grant No: Date of CFPP:	
Type of Grant	<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011	<input checked="" type="checkbox"/> Revised Annual Statement (revision no: Revision #3) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised ²	Total Actual Cost ¹ Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	48,896	48,896
3	1408 Management Improvements	20,000	20,000
4	1410 Administration (may not exceed 10% of line 21)	29,448	29,448
5	1411 Audit	5,000	5,000
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement	180,592	128,272
10	1460 Dwelling Structures	8,000	4,418
11	1465.1 Dwelling Equipment—Nonexpendable	10,000	10,000
12	1470 Non-dwelling Structures	0	0
13	1475 Non-dwelling Equipment	12,000	12,000
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs	500	0
17	1499 Development Activities ⁴		

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

Part I: Summary		FFY of Grant: 2008 FFY of Grant Approval: 2008	
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)	Grant Type and Number Capital Fund Program Grant No: WA19P012501-08 Replacement Housing Factor Grant No: Date of CFFP:		
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011 <input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: Revision #3) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated Expended
18a	1501 Collateralization or Debt Service paid by the PHIA		
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)	296,864	296,864
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	20,592	0
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	
<i>[Signature]</i>		<i>[Signature]</i>	
Date		Date	
04/06/2011			

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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⁴ RHF funds shall be included here.

Part II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P012501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations 1. 10% Admin. Salaries TOTAL	1406		29,448	48,896	48,896	48,896	Complete
HA Wide	Mgmt. Improvements 1. Staff Training - (HUD changes/compliance), Computer/Software & Equipment TOTAL	1408		20,000	20,000	20,000	20,000	Complete
HA Wide	Administration 1. 10% Admin. Salaries (ED, Finance Officer, Acct. Asst.) TOTAL	1410		29,448	29,448	29,448	29,448	Complete
	Audit 1. Audit Fees TOTAL	1411		5,000	5,000	5,000	5,000	Complete
WA 12-1 Sunnyslope	Site Improvements 1. Modify Existing Sidewalks - (2) Curb Ramps - ADA compliance 2 Siding 3. Safety Glass	1450	1	20,592	39,330	0	0	In Progress
WA 12-4 Keewaydin	1. Carpet Common Areas 2. Paint Common Areas 3. Renovate units TOTAL		1 1 4	57,549 0 11,500 5,500 85,451	17,500 3,582 0 0 124,690	17,500 3,582 0 0 124,690	17,500 3,582 0 0 124,690	Complete Complete Complete Complete Complete
	TOTAL			180,592	185,102	145,772	145,772	

Part II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK		Grant Type and Number Capital Fund Program Grant No: WA19P012501-08 CFPP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
WA 12-1 Sunnyslope	Dwelling Structures 1. Carpet/Vinyl	1460	3	4,000	773	773	773	Revised/Complete
WA 12-4 Keewaydin	1. Carpet/Vinyl		3	4,000	3,645	3,645	3,645	Complete
	Total			8,000	4,418	4,418	4,418	
WA 12-1 Sunnyslope	Dwelling Equip 1. Appliances	1465	7	6,500	6,500	6,500	6,500	Complete
WA 12-4 Keewaydin	1. Appliances		5	3,500	6,500	3,500	3,500	Complete
	Total			10,000	10,000	10,000	10,000	
HA Wide	Non-Dwelling Structures	1470	0					
	Total		0					
WA 12-1 Sunnyslope	Non-Dwelling Equipmen 1. Maintenance Vehicle	1475	1	10,000	12,000	12,000	12,000	Complete
WA 12-4 Keewaydin	1. Cement Mixer		1	2,000	0	0	0	Revised/complete
	Total			12,000	12,000	12,000	12,000	
WA 12-4 Keewaydin	Relocation Costs	1495	5	500	0	0	0	Revised/Complete
	Total			500	0	0	0	

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: WA19P012501-07 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2007 FFY of Grant Approval: 2007	
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Reserve for Disasters/Emergencies <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011		Revised Annual Statement (revision no: Revision #4) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	29,448	29,448	29,448	29,448
3	1408 Management Improvements	19,000	19,500	19,483	19,483
4	1410 Administration (may not exceed 10% of line 21)	29,448	29,448	29,448	29,448
5	1411 Audit	4,000	4,000	4,000	4,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	37,992	27,690	27,690	12,099
10	1460 Dwelling Structures	126,100	134,100	134,100	115,973
11	1465.1 Dwelling Equipment—Nonexpendable	16,300	16,300	16,300	16,300
12	1470 Non-dwelling Structures	22,000	0	0	0
13	1475 Non-dwelling Equipment	9,700	9,700	9,700	9,700
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	500	0	0	0
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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⁴ RHF funds shall be included here.

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

Part I: Summary		FFY of Grant: 2007 FFY of Grant Approval: 2007	
PHA Name: W/A012 HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P012501-07 Replacement Housing Factor Grant No: Date of CFFP:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: Revision #4) <input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 1/2011			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ²
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)	294,988	270,186
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	29,992	33,717
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		Date	

[Signature] 04/06/2011

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

Part II: Supporting Pages		Federal FFY of Grant: 2007									
PHA Name: HOUSING AUTHORITY CITY OF KENNEWICK (KHA)		Grant Type and Number Capital Fund Program Grant No: WA19P012501-07 CFFP (Yes/ No): No Replacement Housing Factor Grant No:									
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work			
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²				
HA Wide	Operations 1. 10% Admin. Salaries TOTAL	1406		29,448	29,448	29,448	29,448	Complete			
HA Wide	Mgmt. Improvements 1. Staff Training - (HUD changes/compliance), Computer/Software & Equipment TOTAL	1408		19,000	19,483	19,483	19,483	Complete			
HA Wide	Administration 1. 10% Admin. Salaries (ED, Finance Officer, Acct. Asst.) TOTAL	1410		29,448	29,448	29,448	29,448	Complete			
	Audit 1. Audit Fees TOTAL	1411		4,000	4,000	4,000	4,000	Complete			
WA 12-1 Sunnyslope	Site Improvements 1. Modify Existing Sidewalks - (2) Curb Ramps - ADA compliance-Relocate Mailbox & access area 2. Siding	1450	1	29,992	27,690	27,690	12,099	In Progress			
WA 12-4 Keewaydin	1. Carpet Common Area TOTAL		1	8,000	23,970	23,970	23,970	Revised/Complete			
	TOTAL			37,992	51,660	51,660	36,069				

Part II: Supporting Pages		Federal FFY of Grant: 2007						
PHA Name: WA012 HOUSING AUTHORITY CITY OF KENNEWICK		Grant Type and Number Capital Fund Program Grant No: WA19P012501-07 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
WA 12-1 Sunnyslope	Dwelling Structures 1. Unit Venting 2. Carpet/Vinyl	1460	5 1	37,100 3,000	18,127 3,000	18,127 3,000	0 3,000	In Progress Complete
WA 12-4 Keewaydin	1. Renovate Kitchens/Baths 2. Carpet/Vinyl 3. DOL Wage Determination I		2 2	84,000 2,000	27,244 2,000	27,244 2,000	27,244 2,000	Complete Complete Complete
	Total			126,100	107,920	107,920	89,793	
WA 12-1 Sunnyslope	Dwelling Equip 1. Appliances	1465	8	7,500	7,500	7,500	7,500	Complete
WA 12-4 Keewaydin	1. Appliances		10	8,800	8,800	8,800	8,800	Complete
	Total			16,300	16,300	16,300	16,300	
HA Wide	Non-Dwelling Structures	1470	0	0	0	0	0	Revised
	Total		0	0	0	0	0	
HA Wide	Non-Dwelling Equipmen 1. Power Washer	1475	1	9,700	5,761	5,761	5,761	Complete Complete
	2. Maintenance Vehicle		1	0	3,939	3,939	3,939	
	Total			9,700	9,700	9,700	9,700	
WA 12-4 Keewaydin	Relocation Cost	1495	5	500	0	0	0	Revised
	Total			500	0	0	0	

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

HOUSING AUTHORITY CITY OF KENNEWICK
(Kennewick Housing Authority – KHA)
(WA012)

FY 2011
AGENCY ANNUAL PLAN

“RESIDENT ADVISORY BOARD (RAB) COMMENTS”

KHA PLAN NARRATIVE

1. KHA Resident Advisory Board (RAB)

KHA acknowledges its Public Housing Program, Section 8 Housing Choice Voucher Program and Section 8 Project-Based Voucher Programs as its collective Resident Advisory Board (RAB).

2. Resident Advisory Board (RAB) Comments To KHA’s FY 2011 Agency Annual Plan

KHA held Tenant Meeting(s) for its Public Housing Program and Section 8 tenants on the following dates to review and receive comments from tenants regarding KHA’s FY 2011 Agency Annual Plan:

- Sunnyslope Homes Development (Public Housing Program)
March 15, 2011 / 6:00 PM – 6:30 PM
Sunnyslope Homes Community Center
(1 Tenant attended the Meeting)
- Keewaydin Plaza Development (Public Housing Program)
March 17, 2011 / 6:30 PM – 7:00 PM
Keewaydin Plaza Community Room
(12 Tenants attended the Meeting)
- Section 8 Program & Section 8 Project-Based (Mitchell Manor) - 1st Meeting
March 23, 2011 / 6:30 PM – 7:15 PM
Sunnyslope Homes Community Center
(8 Tenants attended the Meeting)
- Section 8 Program & Section 8 Project-Based (Mitchell Manor) - 2nd Meeting
March 24, 2011 / 6:30 PM – 7:30 PM
KHA’s Richland Satellite Office
(8 Tenants attended the Meeting)

KHA distributed copies of its FY 2011 Agency Annual Plan at the scheduled tenant meetings and was also available for review at KHA’s main administration office.

KHA did not receive any comments (verbal or written) regarding items to its FY 2011 Annual Plan from its Resident Advisory Board (RAB) from either its Public Housing or Section 8 tenants.

HOUSING AUTHORITY CITY OF KENNEWICK
(Kennewick Housing Authority – KHA)
(WA012)

FY 2011
AGENCY ANNUAL PLAN

“CHALLENGED ELEMENTS”

KHA PLAN NARRATIVE

1. Challenged Elements To KHA FY 2011 Agency Annual Plan:

KHA held a Public Hearing Meeting for the general public on March 28, 2011, 3:00 PM in KHA’s Board Room (KHA Administration Office/Community Room) to review and receive public comments on KHA’s FY 2011 Agency Annual Plan. No attendees were at the public hearing meeting.

KHA received its required Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan (HUD-50077-SL Form) from City of Kennewick Manager, certifying KHA’s FY 2011 Agency Annual Plan and is consistent with the City’s Consolidated Plan/Tri-Cities HOME Consortium Plan, pursuant to 24 CFR Part 91.

KHA did not receive comments (verbal or written) regarding any elements or challenged elements to its FY 2011 Agency Annual Plan from the general public or the City of Kennewick.

HOUSING AUTHORITY CITY OF KENNEWICK
(Kennewick Housing Authority – KHA)
(WA012)

FY 2011
AGENCY ANNUAL PLAN

VIOLENCE AGAINST WOMEN AND DEPARTMENT OF JUSTICE REAUTHORIZATION
ACT OF 2005
(VAWA)

KHA PLAN NARRATIVE DESCRIPTION

1. **Activities, Services, or Programs Provided or Offered By An Agency, Directly or In Partnership With Other Service Providers, To Child or Adult Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking:**

KHA has partnered with the local agency of Domestic Violence Services (DVS) of Benton and Franklin Counties where DVS agency will provide confidential services to KHA tenants on a referral and voluntary basis. Confidential Services are delivered directly through DVS agency. Domestic Violence Services (DVS) and local agency Sexual Assault Response Center (SARC) of Benton and Franklin Counties periodically provides on-site presentations to KHA staff and tenants promoting its services (awareness, prevention, education, etc.).

2. **Activities, Services, or Programs Provided or Offered That Helps Child or Adult Victims of Domestic Violence, Dating Violence, Sexual Assault, or Stalking To Obtain or Maintain Housing:**

KHA revised its agency's Public Housing Program Admissions & Continued Occupancy Policy (ACOP) and Section 8 Administrative Plan to include Waiting List Local Preferences of A) Victims of Domestic Violence Who Are Homeless (PH Program Resolution #979 – 12/27/08, S8 Program Resolution #980 – 12/27/08).

KHA has been awarded a single family dwelling (duplex) unit under the City of Richland's Affordable Rental Housing Program to provide two (2) units to low-income households who are Victims of Domestic Violence and Homeless for "transitional" affordable housing project. Local funds from a community agency will support the rental subsidies for this project. KHA anticipates obtaining ownership by the end or at the beginning of its current or new fiscal year.

3. **Activities, Services, or Programs Provided or Offered To Prevent Domestic Violence, Dating Violence, Sexual Assault, and Stalking, or To Enhance Victim Safety In Assisted Families.**

Domestic Violence Services (DVS) and local agency Sexual Assault Response Center (SARC) of Benton and Franklin Counties periodically provides on-site presentations to KHA staff and tenants (through tenant meetings) promoting their services (awareness, prevention, education, etc.) along with available DVS & SARC agency literature readily accessible at KHA main administration office and satellite office for its tenants and the general public.

4. **KHA Procedures For Notifying Tenants Their Rights Under VAWA:**

Written notification of Rights under the VAWA Act will be issued to applicants, upon initial leasing and tenant household annual recertification and posted at KHA main administration office and satellite office for tenants and general public viewing notification. Section 8 Program Landlords are also notified in writing regarding the VAWA Act and requirements.

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 07/01/2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

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

HOUSING AUTHORITY CITY OF KENNEWICK (KHA)
 PHA Name

WA012
 PHA Number/HA Code

 5-Year PHA Plan for Fiscal Years 20 - 20

 X Annual PHA Plan for Fiscal Years 20 11 - 20

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

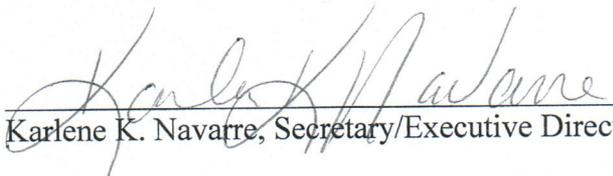
Name of Authorized Official THOMAS MOAK	Title BOARD COMMISSIONER / VICE-CHAIR
Signature 	Date 4-6-2011

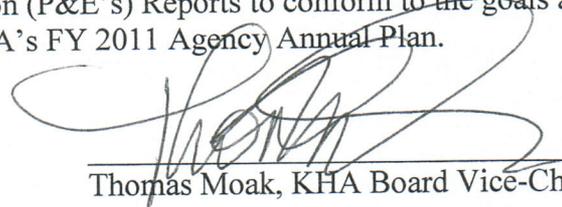
RESOLUTION #1080

APPROVAL OF KHA'S FY 2011 AGENCY ANNUAL PLAN

- WHEREAS:** KHA's FY 2011 Agency Annual Plan is in compliance with Section 511 of the Quality Housing and Work Responsibility Act (QHWRA) of 1998 and the ensuing HUD requirements.
- WHEREAS:** KHA's FY 2011 Agency Annual Plan is consistent with the City of Kennewick's Consolidated Plan for 2010-2014 and analysis of Impediments to Fair Housing Choices and pursuant to 24 CFR Part 91.
- WHEREAS:** KHA's FY 2011 Agency Annual Plan includes the Eligibility, Selection, and Admissions Policies from its Public Housing Program Admissions and Continued Occupancy Policy (ACOP), Section 8 Program Administrative Plan, and Capital Fund Program (CFP) FY 2011 Annual Budget, Capital Fund Program (CFP) FY 2010, FY 2009, FY 2008 and FY 2007 Annual Statement Performance & Evaluation (P&E's) Reports.
- WHEREAS:** KHA's FY 2011 Agency Annual Plan includes Public Housing Program, Section 8 Tenant-Based and Section 8 Project-Based Programs Grievance Procedures.
- WHEREAS:** KHA's FY 2011 Agency Annual Plan and corresponding policies will be effective July 1, 2011.

NOW THEREFORE, BE IT RESOLVED, the Housing Authority City of Kennewick Board of Commissioners has approved Resolution #1080 and will implement KHA's FY 2011 Agency Annual Plan and Capital Fund Program (CFP) FY 2011 Budget, Capital Fund Program (CFP) FY 2007 - 2010 Annual Performance Evaluation (P&E's) Reports to conform to the goals and objectives as addressed in KHA's FY 2011 Agency Annual Plan.


Karlene K. Navarre, Secretary/Executive Director


Thomas Moak, KHA Board Vice-Chair

CERTIFICATION

I, Karlene Navarre, do hereby certify that RESOLUTION #1080 was properly introduced, read and adopted on the 6th day of April 2011 by the following vote:

Ayes 4 NO 6

ATTEST:

Karlene K. Navarre
Secretary/Executive Director

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

HOUSING AUTHORITY CITY OF KENNEWICK (KHA)

Program/Activity Receiving Federal Grant Funding

CAPITAL FUND PROGRAM (CFP)

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

SUNNYSLOPE HOMES (12-1)
1915 W. 4TH PLACE
KENNEWICK, WA 99336
BENTON COUNTY

KEEWAYDIN PLAZA (12-4)
6 W. 6TH AVENUE
KENNEWICK, WA 99336
BENTON COUNTY

Check here if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

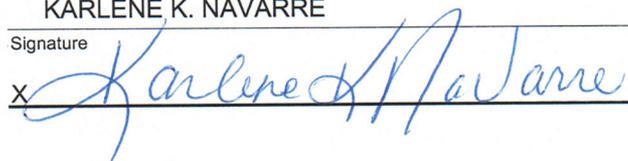
Name of Authorized Official

KARLENE K. NAVARRE

Title

EXECUTIVE DIRECTOR

Signature

X 

Date

04/06/2011

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: ^{4c}	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$ _____	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u>Karlene K. Navarre</u> Print Name: <u>KARLENE K. NAVARRE</u> Title: <u>EXECUTIVE DIRECTOR</u> Telephone No.: <u>(509) 586-8576 EXT. 103</u> Date: <u>04/06/2011</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

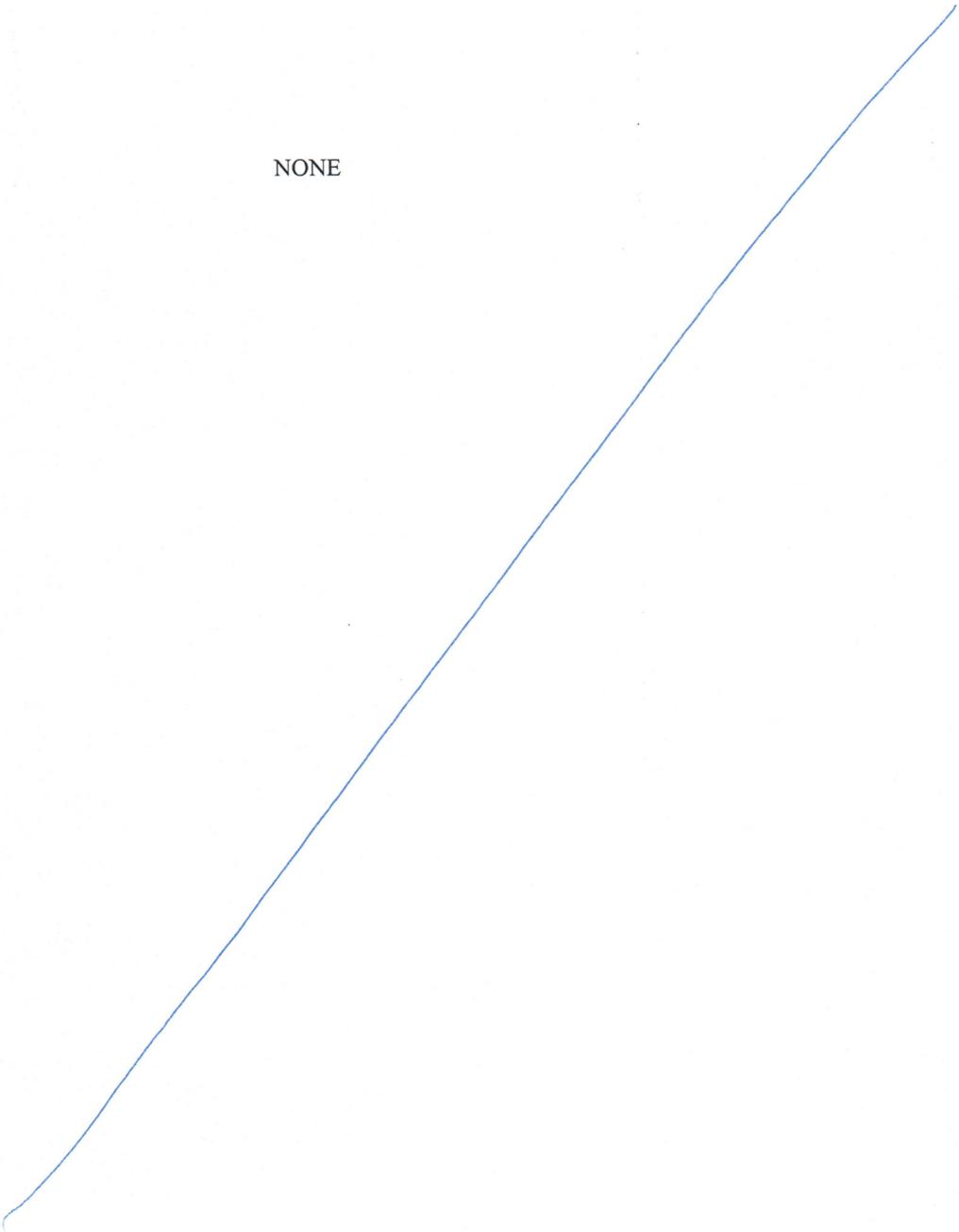
According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: _____ Page _____ of _____

NONE



Certification of Payments to Influence Federal Transactions

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

Applicant Name

HOUSING AUTHORITY CITY OF KENNEWICK (KHA)

Program/Activity Receiving Federal Grant Funding

CAPITAL FUND PROGRAM (CFP)

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

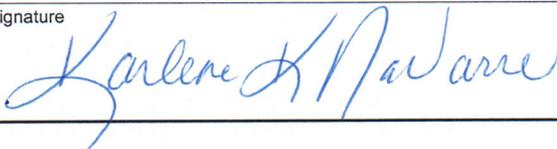
KARLENE K. NAVARRE

Title

EXECUTIVE DIRECTOR

Signature

Date (mm/dd/yyyy)



04/06/2011

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

Civil Rights Certification

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

Civil Rights Certification

Board Resolution # 1080

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

HOUSING AUTHORITY CITY OF KENNEWICK

WA012

PHA Name

PHA Number/HA Code

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

Name of Authorized Official THOMAS MOAK	Title BOARD COMMISSIONER / VICE-CHAIR
Signature 	Date 4-6-2011

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan**

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

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Marie Mosely the City Manager certify that the Five Year and
Annual PHA Plan of the Housing Authority City of Kennewick is consistent with the Consolidated Plan of
City of Kennewick / Benton County prepared pursuant to 24 CFR Part 91.

 3/16/11

Signed / Dated by Appropriate State or Local Official