

Minden Housing Authority

2012 Annual Plan

2012 - 2016 Version 01

PHA 5-Year and Annual Plan

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

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

1.0	PHA Information PHA Name: <u>Minden Housing Authority</u> PHA Code: <u>LA037</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>7/2012</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>247</u> Number of HCV units: <u>137</u>				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <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: <i>The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</i>				
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <i>The goal of the Minden Housing Authority is to Expand the supply of assisted housing by reducing public housing vacancies, Improve the quality of assisted housing by improving PHAS Score & SEMAP Score and also by renovating/modernizing public housing units. Increase assisted housing choices by increasing voucher payment standards and implementing public housing or other homeownership programs. Providing an improved living environment by Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments, Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments and Implement public housing security improvements. Promote self-sufficiency and asset development of assisted households by Increase the number and percentage of employed persons in assisted families. And also Ensure equal opportunity and affirmatively further fair housing by Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability, Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability and also by Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.</i>				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <i>None of the Housing Authority PHA Annual Plan Elements have been revised since its last Annual Plan submission.</i> (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. <i>Main Administrative Office is where the public may obtain copies of the 5-Year and Annual PHA Plan.</i>				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. <i>Please see pages 4 - 5</i>				
8.1	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. <i>Please see pages 6 - 11</i>				
8.2	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. <i>Please see pages 12 - 16</i>				
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.				

9.0	<p>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.</p>
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>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5- Year Plan.</p> <p style="padding-left: 40px;"><i>The Minden Housing Authority continues to work on the goals described in the 2011 PHA Plan by updating and rehabbing units and keeping the units, safe and sanitary.</i></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p style="padding-left: 20px;">a. Substantial Deviation from the 5-Year Plan</p> <ul style="list-style-type: none"> ✓ <i>Any change to Mission Statement such as:</i> ✓ <i>50% deletion from or addition to the goals and objectives as a whole.</i> ✓ <i>50% or more decrease in the quantifiable measurement of any individual goal or objective</i> <p style="padding-left: 20px;">b. Significant Amendment or Modification to the Annual Plan</p> <ul style="list-style-type: none"> ✓ <i>50% variance in the funds projected in the Capital Fund Program Annual Statement</i> ✓ <i>Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement</i> ✓ <i>Any change in a policy or procedure that requires a regulatory 30-day posting</i> ✓ <i>Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs</i> ✓ <i>Any change inconsistent with the local, approved Consolidated Plan</i>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements <i>There were no challenged elements</i></p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

8.0 CAPITAL IMPROVEMENTS

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 3/31/2014

Part I: Summary

PHA Name: <i>Minden Housing Authority</i>	Grant Type and Number Capital Fund Program Grant No: <i>LA48P037501-12</i> Replacement Housing Factor Grant No: Date of CFFP:	FFY Grant: <i>2012</i> FFY of Grant Approval:
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Type of Grant

Original Annual Statement
 Reserve for Disaster/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs ²	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 27,535.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 110,000.00			
10	1460 Dwelling Structures	\$ 112,812.00			
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 25,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 275,347.00	\$ -	\$ -	\$ -
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director  Date 4/10/2012	Signature of Public Housing Manager Date
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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

8.1 CAPITAL FUND PROGRAM ANNUAL STATEMENT/PERFORMANCE AND EVALUATION REPORT 2011, 2010 & 2009

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 3/31/2014

Part I: Summary

PHA Name: <i>Minden Housing Authority</i>	Grant Type and Number Capital Fund Program Grant No: <i>LA48P037501-11</i> Replacement Housing Factor Grant No: Date of CFFP:	FFY Grant: <i>2011</i> FFY of Grant Approval:
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Type of Grant

Original Annual Statement
 Reserve for Disaster/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: *12/31/2011*
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs ²	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 30,000.00		\$ 30,000.00	\$ -
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 29,744.30		\$ 29,744.30	\$ -
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 29,745.70		\$ 29,745.70	\$ 20,822.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 177,967.00		\$ 177,967.00	\$ -
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 30,000.00		\$ 30,000.00	\$ -
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	\$ 297,457.00	\$ -	\$ 297,457.00	\$ 20,822.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director  Date 4/10/2012	Signature of Public Housing Manager Date
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Part II: Supporting Pages

PHA Name:	Grant Type and Number	Federal FFY of Grant:
<i>Minden Housing Authority</i>	Capital Fund Program Grant No: <i>LA48P037501-11</i> CFFP (Yes / No): Replacement Housing Factor Grant No:	<i>2011</i>

Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Dev. Account No	QTY	Total Estimated Costs		Total Actual Costs		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		\$ 30,000.00		\$ 30,000.00	\$ -	<i>In Process</i>
<i>PHA Wide</i>	<i>Administration - Computer Software</i>	<i>1410</i>		\$ 29,744.30		\$ 29,744.30	\$ -	<i>In Process</i>
<i>PHA Wide</i>	<i>A/E Fees & Costs</i>	<i>1430</i>		\$ 29,745.70		\$ 29,745.70	\$ 20,822.00	<i>In Process</i>
<i>LA037-00003</i>	<i>Replace water heaters, supply lines, drain pans, replace old gate valves</i>	<i>1460</i>	<i>37</i>	\$ 23,161.30		\$ 23,161.30	\$ -	<i>In Process</i>
<i>LA037-00003</i>	<i>New cabinets, light fixtures, paint</i>	<i>1460</i>	<i>20</i>	\$ 40,255.70		\$ 40,255.70	\$ -	<i>In Process</i>
<i>LA037-00003</i>	<i>Install showers, refinish walls, plumbing, etc.</i>	<i>1430</i>	<i>23</i>	\$ 46,000.00		\$ 46,000.00	\$ -	<i>In Process</i>
<i>LA037-00003</i>	<i>Replace washing machine drains valve boxes, supply valves, paint and repair where necessary</i>	<i>1460</i>	<i>41</i>	\$ 22,550.00		\$ 22,550.00	\$ -	<i>In Process</i>
<i>LA037-00003</i>	<i>Locate sewer line and install new cleanouts</i>	<i>1460</i>	<i>14</i>	\$ 7,000.00		\$ 7,000.00	\$ -	<i>In Process</i>
<i>LA037-00003</i>	<i>Blow insulation 4" to 6" inches</i>	<i>1460</i>	<i>26</i>	\$ 39,000.00		\$ 39,000.00	\$ -	<i>In Process</i>
<i>PHA Wide</i>	<i>Replace vehicle</i>	<i>1475</i>	<i>1</i>	\$ 30,000.00		\$ 30,000.00	\$ -	<i>In Process</i>
				\$ 297,457.00	\$ -	\$ 297,457.00	\$ 20,822.00	

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

² To be completed for the Performance and Evaluation Report

Part I: Summary

PHA Name: <i>Minden Housing Authority</i>	Grant Type and Number Capital Fund Program Grant No: <i>LA48P037501-10</i> Replacement Housing Factor Grant No: Date of CFFP:	FFY Grant: <i>2010</i> FFY of Grant Approval:
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Type of Grant

Original Annual Statement
 Reserve for Disaster/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: *12/31/2011*
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs ²	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 36,027.70		\$ 36,027.70	\$ 33,793.33
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 288,344.30		\$ 288,344.30	\$ 125,788.67
10	1460 Dwelling Structures	\$ 35,905.00		\$ 35,905.00	\$ 35,905.00
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	\$ 360,277.00	\$ -	\$ 360,277.00	\$ 195,487.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director  Date 4/10/2012	Signature of Public Housing Manager Date
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Part II: Supporting Pages

PHA Name: <i>Minden Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No: <i>LA48P037501-10</i> CFFP (Yes / No): Replacement Housing Factor Grant No:			Federal FFY of Grant: <i>2010</i>			
Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Costs		Total Actual Costs		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
<i>PHA Wide</i>	<i>A/E Fees & Costs</i>	<i>1430</i>		\$ <i>36,027.70</i>		\$ <i>36,027.70</i>	\$ <i>33,793.33</i>	<i>In Process</i>
<i>LA037-001</i>	<i>Sheppard Park - Repair eroision, add topsoil & build retaining walls</i>	<i>1450</i>	<i>10</i>	\$ <i>40,000.00</i>		\$ <i>40,000.00</i>	\$ <i>14,096.00</i>	<i>In Process</i>
<i>LA037-001</i>	<i>Remove and repair trip hazard on sidewalks</i>	<i>1450</i>	<i>20</i>	\$ <i>40,000.00</i>		\$ <i>40,000.00</i>	\$ <i>14,096.00</i>	<i>In Process</i>
<i>LA037-001</i>	<i>Repair Driveway Entry</i>	<i>1450</i>	<i>1</i>	\$ <i>20,000.00</i>		\$ <i>20,000.00</i>	\$ <i>12,000.00</i>	<i>In Process</i>
<i>LA037-002</i>	<i>Remove old playground equipment</i>	<i>1450</i>		\$ <i>2,000.00</i>		\$ <i>2,000.00</i>	\$ <i>2,000.00</i>	<i>In Process</i>
<i>LA037-002</i>	<i>Remove old playground equipment</i>	<i>1450</i>		\$ <i>2,000.00</i>		\$ <i>2,000.00</i>	\$ <i>2,000.00</i>	<i>In Process</i>
<i>LA037-002</i>	<i>Remove 6x6 landscape timbers along streets & replace with ornamental stone or concrete</i>	<i>1450</i>		\$ <i>30,000.00</i>		\$ <i>30,000.00</i>	\$ <i>15,000.00</i>	<i>In Process</i>
<i>LA037-001</i>	<i>Replace existing handrails</i>	<i>1450</i>	<i>16</i>	\$ <i>15,500.00</i>		\$ <i>15,500.00</i>	\$ <i>10,500.00</i>	<i>In Process</i>
<i>LA037-003</i>	<i>Alleviate flooding at the end of Stone St.</i>	<i>1450</i>		\$ <i>15,500.00</i>		\$ <i>15,500.00</i>	\$ <i>10,500.00</i>	<i>In Process</i>
<i>LA037-003</i>	<i>Remove or repair trip hazards on sidewalk</i>	<i>1450</i>	<i>10</i>	\$ <i>15,500.00</i>		\$ <i>15,500.00</i>	\$ <i>10,500.00</i>	<i>In Process</i>
<i>LA037-004</i>	<i>Grade for better drainage behind buildings 815 - 816</i>	<i>1450</i>		\$ <i>15,500.00</i>		\$ <i>15,500.00</i>	\$ <i>10,500.00</i>	<i>In Process</i>
<i>LA037-004</i>	<i>Remove or repair trip hazards on sidewalk</i>	<i>1450</i>	<i>10</i>	\$ <i>15,500.00</i>		\$ <i>15,500.00</i>	\$ <i>10,500.00</i>	<i>In Process</i>
<i>LA037-004</i>	<i>Repair Driveway and parking areas and re-stripe</i>	<i>1450</i>		\$ <i>76,844.30</i>		\$ <i>76,844.30</i>	\$ <i>14,096.67</i>	<i>In Process</i>
<i>LA037-001</i>	<i>Remove attic fans & seal openings</i>	<i>1460</i>	<i>60 Units</i>	\$ <i>8,976.00</i>		\$ <i>8,976.00</i>	\$ <i>8,976.00</i>	<i>In Process</i>
<i>LA037-002</i>	<i>Remove attic fans & seal opening</i>	<i>1460</i>	<i>70 Units</i>	\$ <i>8,976.00</i>		\$ <i>8,976.00</i>	\$ <i>8,976.00</i>	<i>In Process</i>
<i>LA037-003</i>	<i>Remove attic fans & seal opening</i>	<i>1460</i>	<i>70 Units</i>	\$ <i>8,976.00</i>		\$ <i>8,976.00</i>	\$ <i>8,976.00</i>	<i>In Process</i>
<i>LA037-004</i>	<i>Remove attic fans & seal opening</i>	<i>1460</i>	<i>36 Units</i>	\$ <i>8,977.00</i>		\$ <i>8,977.00</i>	\$ <i>8,977.00</i>	<i>In Process</i>
				\$ 360,277.00	\$ -	\$ 360,277.00	\$ 195,487.00	

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

² To be completed for the Performance and Evaluation Report

Part I: Summary

PHA Name: <i>Minden Housing Authority</i>	Grant Type and Number Capital Fund Program Grant No: <i>LA48P037501-09</i> Replacement Housing Factor Grant No: Date of CFFP:	FFY Grant: <i>2009</i> FFY of Grant Approval:
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Type of Grant

- Original Annual Statement
 Reserve for Disaster/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: *12/31/2011*
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Costs ²	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 36,149.20		\$ 36,149.20	\$ 36,149.20
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 40,000.00		\$ 40,000.00	\$ 40,000.00
10	1460 Dwelling Structures	\$ 266,304.80		\$ 266,304.80	\$ 264,667.00
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 19,038.00		\$ 19,038.00	\$ 19,038.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
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)	\$ 361,492.00	\$ -	\$ 361,492.00	\$ 359,854.20
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director 	Date 4/10/2012	Signature of Public Housing Manager	Date
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⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name: <i>Minden Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No: <i>LA48P037501-09</i> CFFP (Yes / No): Replacement Housing Factor Grant No:				Federal FFY of Grant: <i>2009</i>		
Development Number Name / PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Costs		Total Actual Costs		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
<i>PHA Wide</i>	<i>A/E Fees & Costs</i>	<i>1430</i>		\$ <i>36,149.20</i>		\$ <i>36,149.20</i>	\$ <i>36,149.20</i>	<i>Complete</i>
<i>LA037-001, 002, 003, 004, 005</i>	<i>Replace trees where needed due to root damage</i>	<i>1450</i>	<i>10</i>	\$ <i>15,000.00</i>		\$ <i>15,000.00</i>	\$ <i>15,000.00</i>	<i>Complete</i>
<i>LA037-001 & 005</i>	<i>Water diversion from units; replace 100 lf of sidewalk due to uneveness</i>	<i>1450</i>		\$ <i>25,000.00</i>		\$ <i>25,000.00</i>	\$ <i>25,000.00</i>	<i>Complete</i>
<i>LA037-001, 002, 003, 004, 005</i>	<i>Painting interior & exterior of units where needed</i>	<i>1460</i>	<i>25 Units</i>	\$ <i>40,000.00</i>		\$ <i>40,000.00</i>	\$ <i>40,000.00</i>	<i>Complete</i>
<i>LA037-001 & 005</i>	<i>Repair/replace A/C units & furnaces as needed</i>	<i>1460</i>	<i>35 Units</i>	\$ <i>226,304.80</i>		\$ <i>226,304.80</i>	\$ <i>224,667.00</i>	<i>In Process</i>
<i>PHA Wide</i>	<i>Replace Maintenance equipment and office equipment (computers, printers, fax, copiers) etc as needed</i>	<i>1475</i>		\$ <i>19,038.00</i>		\$ <i>19,038.00</i>	\$ <i>19,038.00</i>	<i>Complete</i>
				\$ <i>361,492.00</i>	\$ <i>-</i>	\$ <i>361,492.00</i>	\$ <i>359,854.20</i>	

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

Capital Fund Program - Five-Year Action Plan

Part I: Summary						
PHA Name/Number <i>Minden Housing Authority</i>		Locality (City/Couty & State) <i>Webster Parish</i>			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <i>2012</i>	Work Statement for Year 2 FFY <i>2013</i>	Work Statement for Year 3 FFY <i>2014</i>	Work Statement for Year 4 FFY <i>2015</i>	Work Statement for Year 5 FFY <i>2016</i>
B.	Physical Improvements Subtotal		\$ <i>235,347.00</i>	\$ <i>239,319.00</i>	\$ <i>134,319.00</i>	\$ <i>134,319.00</i>
C.	Management Improvements					
D.	PHA - Wide Non-dwelling Structure and Equipment		\$ <i>-</i>	\$ <i>-</i>	\$ <i>30,000.00</i>	\$ <i>30,000.00</i>
E.	Administration					
F.	Other		\$ <i>40,000.00</i>	\$ <i>36,028.00</i>	\$ <i>111,028.00</i>	\$ <i>111,028.00</i>
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds		\$ <i>275,347.00</i>	\$ <i>275,347.00</i>	\$ <i>275,347.00</i>	\$ <i>275,347.00</i>
L.	Total Non-CFP Funds					
M.	Grand Total		\$ <i>275,347.00</i>	\$ <i>275,347.00</i>	\$ <i>275,347.00</i>	\$ <i>275,347.00</i>

Capital Fund Program - Five-Year Action Plan

Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <i>2012</i>	Work Statement for Year <u>2013</u> FFY <u>2013</u>			Work Statement for Year <u>2014</u> FFY <u>2014</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
	<i>Remodel bathrooms to include fixtures,</i>	<i>48</i>	<i>\$ 235,347.00</i>	<i>Southfield Landscaping & new fencing</i>		<i>\$ 119,659.00</i>
				<i>New roofing at site 004</i>	<i>35</i>	<i>\$ 119,660.00</i>
	Subtotal of Estimated Cost		\$ 235,347.00	Subtotal of Estimated Cost		\$ 239,319.00

Capital Fund Program - Five-Year Action Plan

Part II: Supporting Pages - Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY 2012	Work Statement for Year <u>2015</u> FFY <u>2015</u>			Work Statement for Year <u>2016</u> FFY <u>2016</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
	<i>New roofs at site 001</i>	59	\$ 92,070.00	<i>New roofs at site 001</i>	59	\$ 92,070.00
	<i>Paint units as needed</i>	59	\$ 42,249.00	<i>Paint units as needed</i>	59	\$ 42,249.00
	<i>Landscaping PHA Wide</i>		\$ 75,000.00	<i>Landscaping PHA Wide</i>		\$ 75,000.00
	Subtotal of Estimated Cost:		\$ 209,319.00	Subtotal of Estimated Cost:		\$ 209,319.00

Capital Fund Program - Five-Year Action Plan

Part III: Supporting Pages - Management Needs Work Statement(s)						
Work Statement for Year 1 FFY 2012	Work Statement for Year <u>2013</u> FFY <u>2013</u>			Work Statement for Year <u>2014</u> FFY <u>2014</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
	<i>A/E Fees & Costs</i>		\$ 40,000.00	<i>A/E Fees & Costs</i>		\$ 36,028.00
	Subtotal of Estimated Cost:		\$ 40,000.00	Subtotal of Estimated Cost:		\$ 36,028.00

Capital Fund Program - Five-Year Action Plan

Part III: Supporting Pages - Management Needs Work Statement(s)						
Work Statement for Year 1 FFY 2012	Work Statement for Year <u>2015</u> FFY <u>2015</u>			Work Statement for Year <u>2016</u> FFY <u>2016</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Costs
	<i>A/E Fees & Costs</i>		\$ 36,028.00	<i>A/E Fees & Costs</i>		\$ 36,028.00
	<i>Purchase service truck</i>		\$ 30,000.00	<i>Purchase service truck</i>		\$ 30,000.00
	Subtotal of Estimated Cost:		\$ 66,028.00	Subtotal of Estimated Cost:		\$ 66,028.00

10 -B. Criteria for Substantial Deviations and Significant Amendments

(1) Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

- a. Substantial Deviation from the 5-Year Plan
 - ✓ *Any change to Mission Statement such as:*
 - ✓ *50% deletion from or addition to the goals and objectives as a whole.*
 - ✓ *50% or more decrease in the quantifiable measurement of any individual goal or objective*

- b. Significant Amendment or Modification to the Annual Plan
 - ✓ *50% variance in the funds projected in the Capital Fund Program Annual Statement*
 - ✓ *Any increase or decrease over 50% in the funds projected in the Financial Resource Statement and/or the Capital Fund Program Annual Statement*
 - ✓ *Any change in a policy or procedure that requires a regulatory 30-day posting*
 - ✓ *Any submission to HUD that requires a separate notification to residents, such as HOPE VI, Public Housing Conversion, Demolition/Disposition, Designated Housing or Homeownership Programs*
 - ✓ *Any change inconsistent with the local, approved Consolidated Plan*

D. Other Information Required by HUD

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

11.0(f) Resident Advisory Board (RAB) Comments

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

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

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
 - Attached at Attachment (File name)
 - Provided below:

3. In what manner did the PHA address those comments? (select all that apply)
 - Considered comments, but determined that no changes to the PHA Plan were necessary.
 - The PHA changed portions of the PHA Plan in response to comments
List changes below:

 - Other: (list below)

11.0(g) Challenged Elements

The PHA received no challenges on elements of the 2012 PHA Plan.

Required Attachment A: Community Service Requirement

In order to be eligible for continued occupancy, each adult family member must either (1) contribute to eight hours community service per month (not including political activities) within the community in which the public housing development is located or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement. The following adult members are exempt from this requirement: Family members who are 62 or older, family members who are blind or disabled, family members who are primary caregiver for someone who is blind or disabled, family members engaged in work activity, family members who are exempt from work activity under Part A Title IV of the Social Security Act or under any other state welfare program, including the welfare to work program, family members receiving assistance under a state program funded under Part A Title IV of the Social Security Act or under any other state welfare program, including welfare to work and who are in compliance with that program

Required Attachment B: Violence against Women Act (VAWA)

*The **Minden Housing Authority**, as administrator of a federal funded housing program – shall protect victims of criminal, domestic violence, sexual assault, or stalking, as well as members of the victims' family – from losing their HUD assisted housing as a result of the aforementioned crime committed against them.*

The agency's Administrative Plan covers denial of admission to the program and termination of continued participation relative to the Violence against Women Act and serves as protection of such abuse.

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Minden Housing Authority

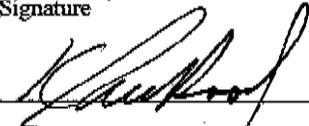
Program/Activity Receiving Federal Grant Funding

2012 Capital Fund Program

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

- | | |
|---|---|
| <p>(1) No federal appropriated funds have been paid or will be paid, by or on behalf of the , 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.</p> <p>(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 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.</p> | <p>(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.</p> <p>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 \$10,000.00 and not more than \$100,000.00 for each such failure.</p> |
|---|---|

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	Title
<i>K. Reese Hood</i>	<i>Executive Director</i>
Signature	Date (mm/dd/yyyy)
	<i>4/10/12</i>

Civil Rights Certification

U. S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 04/30/2011

**Civil Rights Certification
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 Commissioners, 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.

Minden Housing Authority

PHA Name

LA037

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

Title

Larry Johnson

Chair

Signature

Date

4/10/12