

<b>PHA Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: St. Charles Parish Housing Authority PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 10/2012 PHA Code:L A094000200				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units:129 Number of HCV units:373				
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: To promote adequate and affordable housing, economic opportunity and a suitable living environment for low, very low and extremely low income households free from discrimination.				

**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.

1. Renovate or modernize portions of 129 public housing units by 9/30/14. To accomplish this goal, the St. Charles Parish Housing Authority shall implement these renovations as follows:  
Year 1: Replace 39 lavatories, replace 29 tub/showers, paint 29 units, replace 29 cabinets and countertops, replace 29 floor tiles, replace 27 heater vent lights, replace 29 furnaces, purchase 20 energy efficient appliances.  
Year 2: Re-wire 3 units, replace 149 windows, increase attic insulation at 129 units, replace 14 doors, and replace 14 cabinets and countertops, purchase 20 energy efficient appliances.  
Year 3: Re-wire 3 units, blow wall insulation AT 129 units, weather-strip and caulk 129 units, replace 30 cabinets and countertops, install 129 setback thermostats, install 60 energy efficient toilets, purchase 20 energy efficient appliances.  
Year 4: Re-wire 5 units, insulate hot water pipes at 129 units, install energy efficient lights in 129 kitchens, replace 112 exterior doors, install 258 energy efficient light fixtures, and purchase 20 energy efficient appliances.  
Year 5: Re-wire 3 units, install 23 energy efficient toilets, replace 37 exterior doors, paint 30 units, replace 30 cabinets and countertops, replace 30 heater vent lights, purchase 20 energy efficient appliances, install 52 energy efficient wall furnaces. **THE PHA HAD TO DEVIATE FROM THIS GOAL DUE TO BUDGET CONSTRAINTS. THE PHA CONDUCTED COMPREHENSIVE REPAIRS TO A LIMITED NUMBER OF UNITS, BUT DID ACCOMPLISH THE COMPREHESIVE RENOVATIONS.**
2. Improve voucher management and public housing management by increasing management scores to at least 90% by 9/30/14. To accomplish this goal the St. Charles Parish Housing Authority shall implement the following:  
Year 1: Increase management scores to become a standard performer by scoring a minimum of 70 points.  
Year 2: Increase management scores to a minimum of 74 points.  
Year 3: Increase management scores to a minimum of 78 points.  
Year 4: increase management scores to a minimum of 82 points.  
Year 5: Increase management scores to a minimum of 86 points.  
The above shall be accomplished by improving unit turn around, improving capital fund management, improving response to work orders, and improving outreach to landlords and tenants. **THE PHA DID NOT ACHIEVE THESE SCORES, BUT IS CONTINUING TO STRIVE FOR ACHIVEMENT.**

Improved housing management to 99.5 by 9/30/09: The PHA did not accomplish this goal.

6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: We have revised Parts I, II &amp; III (both management and physical) of our 5 year plan; and we have revised parts I &amp; II of our annual statements. We have revised Parts I, II &amp; III (both management and physical) of our 5 year plan; and we have revised parts I &amp; II of our 2010, 2011 AND 2012 annual statements.</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. PHA main office, 200 Boutte Estates Drive, Boutte, LA 70039</p>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>

8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>According to the 2011 Census, St. Charles Parish has a total population of 52,780. There are 19,896 housing units, of which 93 are occupied. Further, 81.6 are owner occupied, while 17% are renter occupied. There are 8% vacant units in the Parish. The average affordable housing unit costs approximately \$170,200. Approximately 12.5% of the population is below the poverty level in the Parish, making housing affordability and accessibility very difficult for that specific population. Also, there are 10.2% of the population age 65 years and older. About 10.2% of the housing units are multi-unit structures, where units are relatively in close proximity to each other. The St. Charles Parish Housing Authority currently has 1,143 families on its Section 8 waiting list and 260 families on its Low-Rent waiting list categorized as follows: 0BR – 3 families; 1BR – 161 families; 2BR – 84 families; 3BR – 12 families; and 4BR – 0 families. The Authority has developed the below listed strategies in section 9.1 to address the housing needs in its jurisdiction.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b> We will address housing needs by performing the following: We will reduce vacancies to at least 5%; improve PASS score to 80%, improve response to service requests, increase staff training, renovate existing housing stock, provide voucher mobility training, provide outreach to landlords, counsel tenants on affordable housing opportunities, deconcentrate poverty in existing housing and make opportunities available for elderly and handicapped residents.</p>

<b>10.0</b>	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5- Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”. The St. Charles Parish PHA definition of “substantial deviation/modification is any increase or decrease over 50% in funds projected in it Capital Fund program Annual Statement, or a 50% variance in funds projected in the capital Fund Program Annual Statement. In implementing this definition, the St. Charles Parish PHA does not propose to deviate from its annual plan by utilization of HUD 50057.1 in implementing provisions of the 2011 Capital Fund Annual Statement.</p>
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- 11.0** **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.
- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
  - (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. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan.  
NOTE: No comments were received from the Resident Advisory Board.  
PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
  - (g) Challenged Elements: We have no challenged elements.
  - (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

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

**U.S. Department of Housing and Urban Development**

Office of Public and Indian Housing  
Expires 4/30/20011

<b>PART I: SUMMARY</b>						
PHA Name/Number: St. Charles Parish LA094000200			Locality (Boutte, LA, St. Charles Parish)		<input type="checkbox"/> <b>Original 5-Year Plan</b> <input checked="" type="checkbox"/> <b>Revision No: 4</b>	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY2015	Work Statement for Year 5 FFY 2016
<b>B</b>	Physical Improvements Subtotal	Annual Statement	119,333.00	119,333.00	119,333.00	119,333.00
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
<b>E</b>	<b>ADMINISTRATION</b>		300.00	300.00	300.00	300.00
F.	Other: Fees & Costs		14,496.00	14,496.00	14,496.00	14,496.00
G.	Operations		1,000.00	1,000.00	1,000.00	1,000.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		135,129.00	135,129.00	135,129.00	135,129.00
L.	Total Non-CFP Funds					
M.	Grand Total		135,129.00	135,129.00	135,129.00	135,129.00







<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2015			Work Statement for Year: 5 FFY 2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	Install central heat/air, replace exterior and interior doors, remove furnaces, heater vent lights, cabinets & counter tops, vanities, toilets, gut entire units, install new drywall, upgrade electric service panels, re-wire, receptacles and switches, fluorescent light in kitchen, light fixtures, porch lights plumbing, floors, paint units @ 3 units @ 39,778 each	3	119,333	Install central heat/air, replace exterior and interior doors, remove furnaces, heater vent lights, cabinets & counter tops, vanities, toilets, gut entire units, install new drywall, upgrade electric service panels, re-wire, receptacles and switches, fluorescent light in kitchen, light fixtures, porch lights plumbing, floors, paint units @ 3 units @ 39,778 each	3	119,333



**Capital Fund Program**

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

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

**Part I: Summary**

<b>PHA Name: St. Charles Parish</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P09450109 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>
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**Type of Grant**  Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: 03/31/12  Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	2,702.00	2,702.00	2,702.00	2,702.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	300.00	300.00	300.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	17,635.00	17,635.00	17,635.00	17,635.00
8	1440 Site Acquisition				
9	1450 Site Improvement	15,000.00	0.00	0.00	0.00
10	1460 Dwelling Structures	115,707.00	130,707.00	130,707.00	113,957.79
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	25,000.00	25,000.00	25,000.00	0.00
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> St. Charles Parish	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P09450109 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2009</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input checked="" type="checkbox"/> <b>Revised Annual Statement (revision no: )</b> <input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 03/31/2012</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
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)	176,344.00	176,344.00	176,344.00	134,294.79
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>	<b>Signature of Public Housing Director</b>		
			<b>Date</b>		

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

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

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: St. Charles Parish		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA40P09450109 CFFP (Yes/ No): Replacement Housing Factor Grant No:				<b>Federal FFY of Grant: 2009</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Operations: Routine Maintenance	1406		2,702	2,702	2,702	2,702	All funds expended
PHA Wide	Administration	1410		300	300	300	0	No funds expended
PHA Wide	Fees & Costs – hire A/E @ 10,805: hire Coordinator 16,000	1430	2	17,635	17,635	17,635	17,635	All funds expended
PHA Wide	Site Improvements:	1450	1	15,000	0	0	0	Delete all work in this category
	Dwelling Structures: Units 255, 266, 259, 260 :replace exterior & interior doors, furnaces, heater vent lights, cabinets & countertops, vanities, toilets, increase AMPS at electric service panels, re-wire units, replace plumbing,	1460	1	115,707	146,537	146,537	22,972.77	Increase by 15,000 to perform comprehensive work

	floors, light fixtures, gut entire units and install new drywall, paint units @ 26,140 per unit. COMPLETED NEW – Repair unit 90 for turnaround @ 11,599.21							
	Non-dwelling Structures: office renovations	1470	1	25,000	25,000	0	0	No fund expended
				176,344	176,344	176,344	134,294.79	

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

<sup>2</sup> 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  
 Expires 4/30/2011

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part I: Summary</b>					
<b>PHA Name: St. Charles Parish</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P09450108 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval:</b>
<input type="checkbox"/> <b>Type of Grant</b> <input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>			<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>		
<input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 3/31/12</b>			<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	5,000.00	5,000.00	5,000.00	5,000.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	300.00	300.00	300.00	300.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	17,635.00	17,635.00	17,635.00	15,135.00
8	1440 Site Acquisition	15,000.00	15,000.00	15,000.00	15,000.00
9	1450 Site Improvement	130,707.00	130,707.00	130,707.00	130,707.00
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00	10,000.00	10,000.00	9,099.87
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> St. Charles Parish	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P09450108 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2008</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>		<input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 3/31/12</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
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)	178,642.00	178,642.00	178,642.00	174,941.87
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>	<b>Signature of Public Housing Director</b>		
			<b>Date</b>		

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

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

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

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



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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

Form HUD 50057.1 (4/2008)



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

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

<b>Part I: Summary</b>					
<b>PHA Name: St. Charles Parish</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P094501-12 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b>
<input checked="" type="checkbox"/> <b>Type of Grant Original Annual Statement</b>			<input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>		<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>			<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	1,000.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	300.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	14,496.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	119,333.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> St. Charles Parish	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P094501-12 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2012</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
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)	135,129.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>	<b>Signature of Public Housing Director</b>		
			<b>Date</b>		

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with fewer than 250 units in management may use 100% of CFP Grants for operations.  
<sup>4</sup> RHF funds shall be included here.  
 Form HUD 50057.1 (4/2008)

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program  
**Expires 4/30/2011**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part II: Supporting Pages</b>								
PHA Name: St. Charles Parish		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA40P094501-12 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2012</b>			
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Operations: Routine Maintenance	1406	1	1,000				
PHA Wide	Administration	1410		300				
PHA Wide	Fees & Costs – hire A/E & Environmental	1430	2	14,496				
PHA Wide	Site Improvements	1450						
	Dwelling Structures: Dwelling Structures: Replace wall furnace, upgrade electric service panels, re-wire units, replace receptacles and switches, repair dry wall, paint units, replace vent hoods, replace heater vent lights, install fluorescent light in	1460	1	119,129				

	kitchen, replace light fixtures, replace exterior lights, replace exterior and interior doors, replace cabinets and countertops, replace tub and toilet with assemblies, replace aluminum windows, replace floors @ 3 units @ \$40,111each = \$120,333								
	Dwelling Equipment:	1465.1							
				135,129					

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

<sup>2</sup> 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  
 Expires 4/30/2011

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part I: Summary</b>					
<b>PHA Name: St. Charles Parish</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P094501-10 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval:</b>
<input type="checkbox"/> <b>Type of Grant</b> <input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>			<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>		
<input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 03/31/2012</b>			<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	5,008	5,008	5,008.00	5,008.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	498	498.00	498.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	17,548	17,548	17,548.00	17,548.00
8	1440 Site Acquisition				
9	1450 Site Improvement	14,926	0	0.00	0.00
10	1460 Dwelling Structures	126,915	141,841	141,841.00	116,478.86
11	1465.1 Dwelling Equipment—Nonexpendable	10,000	10,000	10,000.00	0.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program  
**Expires 4/30/2011**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part I: Summary</b>					
<b>PHA Name:</b> St. Charles Parish		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P094501-10 Replacement Housing Factor Grant No: Date of CFFP:		<b>FFY of Grant:2010</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: 1 )</b> <input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 03/31/2012</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>	
		<b>Original</b>	<b>Revised <sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
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)	174,895	174,895	174,895.00	139,034.86
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

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

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

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

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program  
**Expires 4/30/2011**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part II: Supporting Pages</b>								
PHA Name: St. Charles Parish		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA40P094501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:				<b>Federal FFY of Grant: 2010</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Operations: Routine Maintenance	1406	1	5,008	5,008	5,008	5,008	All funds expended
PHA Wide	Administration	1410		498	498	498	0	In progress
PHA Wide	Fees & Costs – A/E @ \$24,130; Hire Coordinator @ 6,500	1430	2	17,548	17,548	17,548	17,548	Completed
PHA Wide	Site Improvements:	1450		14,926	0	0	0	Deleted this item
	Dwelling Structures: REAC Requirements # 1: Unit 48 - Replace front entry door, replace broken window; Unit 50 - Replace bathroom door; Unit 60 – Replace exterior door, replace GFI & smoke detector; Unit 72 – Replace exterior door hardware, replace front/rear entry	1460	1	126,915	141,841	141,841	116,478.86	Increase by 14,926 for repairs

	<p>doors, extend tpr valve @ water heater within 18 in to floor; Unit 86 – Replace bathroom door/exterior storage door with vented door, replace GFI, replace kitchen exhaust fan; Unit 89 – Replace exterior storage door with vented door, extend water heater tpr valve within 18 in to floor; Unit 79 – Replace rear entry door, replace exhaust fan in kitchen; Unit 75 – Replace exterior storage door with vented door; Unit 71 – Replace exterior storage door with vented door, replace bath door, extend water heater tpr within 18 in to floor; Unit 69 – Replace bath entry door, rear entry door, and exterior storage door (with vented door), extend water heater tpr within 18 in to floor; Unit 59 – Replace front entry door, closet door and exterior storage door (with vented door), replace smoke detector; Unit 49 – Replace front entry door, bath door and bedroom door, paint unit; Unit 254 – Replace bath door, exterior</p>							
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	<p>storage door with vented door, replace GFI, extend water heater tpr valve within 18 in to floor, replace smoke detector; Unit 252 – replace exterior storage door with vented door, align chimney @ hot water closet; Unit 248 – replace hardware @ rear entry door., replace exterior storage door with vented door; Unit 228 – replace exterior storage door with vented door, extend water tpr valve within 18 in to floor; Unit 224 – replace exterior storage door with vented door; Unit 209 – replace front /rear entry doors, exterior storage door with vented door, replace smoke detector; Unit 221 – replace exterior storage door with vented door; Unit 247 – replace front/rear entry doors, exterior storage door with vented door, replace GFI, extend water heater tpr valve within 18 in to floor @ \$6,249  REAC Requirements # 2:  Unit 9 – Replace closet door, paint unit, replace missing fuses @ breaker;</p>							
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	<p>Unit 46 – Replace closet door, replace inoperable window; Unit 52 – replace faucet in bath sink, replace front entry door; Unit 82 – replace bedroom door, replace closet door; Unit 93 – Replace closet door; Unit 73 – replace front entry door, closet door, replace/repair panel box; Unit 61 – replace bath door; Unit 57 – replace broken outlet switch, replace smoke detector; Unit 232 – replace bedroom door; unit 229 – replace smoke detector, replace inoperable window; unit 253 – replace bath door; unit 258 – replace bedroom door @ \$6,249</p> <p>REAC Requirements # 3: Repair hole in fence @ Boutte complex; Unit 1 – Replace front entry door, bedroom door, closet door, replace GFI, remove mildew @ closet door; unit 5 – replace front entry door, replace GFI; unit 10 – replace lavatory hardware, replace plumbing @ tub faucet, replace water heater door, 3 bedroom doors, entry door,</p>							
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	<p>remove mildew @ bath window; Unit 6 – replace entry door, pantry door, replace exterior storage door with vented door; unit 50 – replace entry door, 2 bedroom doors ; exterior storage door with vented door, replace living room window; unit 60 – replace rear entry door, replace GFI, exterior storage door with vented door; unit 80 – replace bath faucet, replace GFI, extend water heater tpr within 18 in to floor, replace living room window; unit 88 – replace bath door, exterior storage door with vented door, align chimney; unit 96 – replace entry door; unit 98 – replace tub hardware, replace entry door, replace missing chimney @ water heater; unit 87 – extend water heater tpr within 18 in to floor, replace exterior storage door with vented door; unit 244 – replace bath door, 3 bedroom doors, GFI, missing @ water heater, remove mold in bedroom 3, replace exterior storage door with</p>							
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	<p>vented door; unit 240 – replace GFI, replace window in b2 bedrooms; unit 226 – replace bath door, replace exterior storage door with vented door, replace missing switch in kitchen, replace window in living room; unit 216 – replace entry door, replace bath door, replace receptacles in living room, replace window in living room; unit 202 – repair, paint ceiling in bath, replace entry door, closet door in living room, align chimney @ water heater, remove mildew @ bath; unit 211 – replace smoke detector, replace window in bedroom; unit 221 – replace entry doors, replace smoke detector; nit 233 – replace entry door, GFI, replace window in bedroom; unit 237 – replace GIF, align chimney @ water heater, replace 2 bedroom windows; unit 245 – replace closet door in living room, replace entry door, GFI, replace relief valve @ water heater, replace 3 bedroom windows; unit 262 –</p>							
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	replace bath door, replace 2 bedroom windows @ \$6,249. Total REAC = \$18,747 NON-REAC ITEMS: replace wall furnace, upgrade electric service panels, re-wire units, replace receptacles and switches, repair dry wall, paint units, replace vent hoods, replace heater vent lights, install fluorescent light in kitchen, replace light fixtures, replace exterior lights, replace exterior and interior doors, replace cabinets and countertops, replace tub and toilet with assemblies, replace aluminum windows, replace floors @ 3 units @ \$23,000 each = \$92,035. COMPLETED. NEW – Repair units 258, 260, 56, 74, 76, and 248 for turn around							
	Dwelling Equipment: purchase appliances	1465.1		10,000	10,000	10,000	0	Not started
				174,895	174,895	174,895	139,034.86	

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

<sup>2</sup> 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  
 Expires 4/30/2011

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part I: Summary</b>					
<b>PHA Name: St. Charles Parish</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P094501-11 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2011</b> <b>FFY of Grant Approval:</b>
<input type="checkbox"/> <b>Type of Grant</b> <input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b>			<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>		
<input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 3/31/12</b>			<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	2,000.00	2,000.00	0	0
3	1408 Management Improvements	2,000.00	2,000.00	0	0
4	1410 Administration (may not exceed 10% of line 21)	300.00	300.00	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,260.00	15,260	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	124,462.00	124,462.00	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	5,000.00	5,000.00	0	0
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program  
**Expires 4/30/2011**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part I: Summary</b>					
<b>PHA Name:</b> St. Charles Parish	<b>Grant Type and Number</b> Capital Fund Program Grant No: LA48P094501-11 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant:2011</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b> <input checked="" type="checkbox"/> <b>Performance and Evaluation Report for Period Ending: 3/31/12</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost<sup>1</sup></b>	
		<b>Original</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b>	<b>Expended</b>
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)	149,022.00	149,022.00	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
<b>Signature of Executive Director</b>		<b>Date</b>		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

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

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

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

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

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program  
**Expires 4/30/2011**

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226

<b>Part II: Supporting Pages</b>								
PHA Name: St. Charles Parish		<b>Grant Type and Number</b> Capital Fund Program Grant No: LA40P094501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:				<b>Federal FFY of Grant: 2011</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide	Management Improvements: Training and Travel	1408	1	2,000	2,000	0	0	Not started
PHA Wide	Operations: Routine Maintenance	1406	1	2,000	2,000	0	0	Not started
PHA Wide	Administration: Advertisement	1410	3	300	300	0	0	Not started
PHA Wide	Fees & Costs – A/E @ \$10,000; Hire Coordinator @ 3,260; Hire Environmental Professional @ \$2,000	1430	3	15,260	15,260	0	0	Not started
PHA Wide	Site Improvements:	1450						
	Dwelling Structures: Replace wall furnace, upgrade electric service panels, re-wire units, replace receptacles and switches, repair dry wall, paint units, replace vent	1460	1	124,462	124,462	0	0	Not started

	hoods, replace heater vent lights, install fluorescent light in kitchen, replace light fixtures, replace exterior lights, replace exterior and interior doors, replace cabinets and countertops, replace tub and toilet with assemblies, replace aluminum windows, replace floors @ 3 units @ \$41,847 each = \$124,462							
	Dwelling Equipment: purchase energy efficient appliances	1465.1	1	5,000	5,000	0	0	Not started
	Non-Dwelling Structures:							
				149,022	149,022	0	0	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.





**ST. CHARLES PARISH HOUSING AUTHORITY VIOLENCE AGAINST WOMEN AND JUSTICE DEPARTMENT REAUTHORIZATION ACT 2005 POLICY STATEMENT**

**PURPOSE:** The purpose of this policy is to assure that the St. Charles Parish Housing Authority is in compliance with Notice PIH 2006-23 dated June 23, 2006, entitled, "Violence Against Women and Justice Department Reauthorization Act 2005".

**POLICY:** The St. Charles Parish Housing Authority shall support or assist victims of domestic violence, dating violence, sexual assault, or stalking in its Section 8 and Public Housing Programs. The St. Charles Parish Housing Authority shall prohibit the eviction of, and removal of assistance from certain persons living in public housing or Section 8 assisted housing if the asserted ground for such action is domestic violence, dating violence, sexual assault, or stalking.

**PROCEDURE:** The Executive Director shall have ultimate responsibility to enforce this policy. The Executive Director shall delegate responsibility to the Section 8 and Public Housing Managers to ensure that this policy is enforced. The Executive Director shall make referrals to the local Office of Community Services in St. Charles parish for persons who are victims of domestic violence. The executive Director shall also follow-up with the Office of Community Services to assure service provision.