

**East Carroll Housing Authority**

# **2012 Annual Plan**

**2012 - 2016 Version 01**



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>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5- Year Plan.</p> <p style="padding-left: 40px;"><i>The East Carroll 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"> <li>✓ <i>Any change to Mission Statement such as:</i></li> <li>✓ <i>50% deletion from or addition to the goals and objectives as a whole.</i></li> <li>✓ <i>50% or more decrease in the quantifiable measurement of any individual goal or objective</i></li> </ul> <p style="padding-left: 20px;">b. Significant Amendment or Modification to the Annual Plan</p> <ul style="list-style-type: none"> <li>✓ <i>50% variance in the funds projected in the Capital Fund Program Annual Statement</i></li> <li>✓ <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></li> <li>✓ <i>Any change in a policy or procedure that requires a regulatory 30-day posting</i></li> <li>✓ <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></li> <li>✓ <i>Any change inconsistent with the local, approved Consolidated Plan</i></li> </ul>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements <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>

**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-12</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2012</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 22,574.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 20,188.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 3,500.00			
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>				
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)	\$ 46,262.00	\$ -	\$ -	\$ -
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>  <i>Baker G. M. J.</i>	<b>Date</b>  4/9/2012	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



# 8.1 CAPITAL FUND PROGRAM ANNUAL STATEMENT/PERFORMANCE AND EVALUATION REPORT 2011 THRU 2004 P/E REPORTS

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

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-11</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2011</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 22,874.00		\$ -	
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 23,900.00			
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 4,090.00		\$ -	
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>				
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)	\$ 50,864.00	\$ -	\$ -	\$ -
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>  <i>Baker G. M. J.</i>	<b>Date</b>  4/9/2012	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-10</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2010</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 10,531.00		\$ -	\$ -
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 50,000.00		\$ 50,000.00	\$ 50,000.00
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>				
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)	\$ 60,531.00	\$ -	\$ 50,000.00	\$ 50,000.00
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> <i>Baker G. M. J.</i>	<b>Date</b> 4/9/2012	<b>Signature of Public Housing Manager</b>	<b>Date</b>
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here

**Part II: Supporting Pages**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-10</i> CFFP (Yes / No): Replacement Housing Factor Grant No:	<b>Federal FFY of Grant:</b> <i>2010</i>
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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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		\$ <i>10,531.00</i>		\$ <i>-</i>	\$ <i>-</i>	<i>In Process</i>
<i>LA262-001</i>	<i>Install A/C Heaters in units</i>	<i>1460</i>	<i>14</i>	\$ <i>50,000.00</i>		\$ <i>50,000.00</i>	\$ <i>50,000.00</i>	<i>Complete</i>
				\$ <b>60,531.00</b>	\$ <b>-</b>	\$ <b>50,000.00</b>	\$ <b>50,000.00</b>	

<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

**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-09</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2009</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 4,830.00		\$ 4,830.00	\$ 4,830.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 40,722.00		\$ 40,722.00	\$ 37,619.00
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>				
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)	\$ 45,552.00	\$ -	\$ 45,552.00	\$ 42,449.00
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: 4/9/2012	Signature of Public Housing Manager  Date
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-08</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2008</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 20,917.00		\$ 20,917.00	\$ 20,917.00
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 2,000.00		\$ 2,000.00	\$ 2,000.00
5	1411 Audit	\$ 2,000.00		\$ 2,000.00	\$ 2,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 36,163.00		\$ 36,163.00	\$ 18,081.00
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>				
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)	\$ 61,080.00	\$ -	\$ 61,080.00	\$ 42,998.00
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>  <i>Baker G. M. J.</i>	<b>Date</b>  4/9/2012	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here

**Part II: Supporting Pages**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-08</i> CFFP (Yes / No): Replacement Housing Factor Grant No:	<b>Federal FFY of Grant:</b> <i>2008</i>
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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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		\$ 20,917.00		\$ 20,917.00	\$ 20,917.00	<i>Complete</i>
<i>PHA Wide</i>	<i>Bidding &amp; Advertising</i>	<i>1410</i>		\$ 2,000.00		\$ 2,000.00	\$ 2,000.00	<i>Complete</i>
<i>PHA Wide</i>	<i>Audit Costs</i>	<i>1411</i>		\$ 2,000.00		\$ 2,000.00	\$ 2,000.00	<i>Complete</i>
<i>LA262-001</i>	<i>Install A/C &amp; Heater Units/Roof Repair</i>	<i>1460</i>	<i>6 Units</i>	\$ 36,163.00		\$ 36,163.00	\$ 18,081.00	<i>In Process</i>
				\$ 61,080.00	\$ -	\$ 61,080.00	\$ 42,998.00	

<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

**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-07</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2007</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 49,358.50		\$ 49,358.50	\$ 49,358.50
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 13,003.50		\$ 13,003.50	\$ 13,003.50
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>				
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)	\$ 62,362.00	\$ -	\$ 62,362.00	\$ 62,362.00
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>  <i>Baker G. M. J.</i>	<b>Date</b>  4/9/2012	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here

**Part II: Supporting Pages**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-07</i> CFFP (Yes / No): Replacement Housing Factor Grant No:	<b>Federal FFY of Grant:</b> <i>2007</i>
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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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		\$ <i>49,358.50</i>		\$ <i>49,358.50</i>	\$ <i>49,358.50</i>	<i>Complete</i>
<i>LA262-001</i>	<i>Replace cabinets in kitchen &amp; bathrooms</i>	<i>1460</i>	<i>10 Units</i>	\$ <i>13,003.50</i>		\$ <i>13,003.50</i>	\$ <i>13,003.50</i>	<i>Complete</i>
				\$ <i>62,362.00</i>	\$ <i>-</i>	\$ <i>62,362.00</i>	\$ <i>62,362.00</i>	

<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

**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Parish Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-06</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2006</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	<i>\$16,602.90</i>		<i>\$16,602.90</i>	<i>\$16,602.90</i>
3	1408 Management Improvements	<i>\$3,124.00</i>		<i>\$3,124.00</i>	<i>\$3,124.00</i>
4	1410 Administration (may not exceed 10% of line 21)	<i>\$3,124.00</i>		<i>\$3,124.00</i>	<i>\$3,124.00</i>
5	1411 Audit	<i>\$3,000.00</i>		<i>\$3,000.00</i>	<i>\$3,000.00</i>
6	1415 Liquidated Damages				
7	1430 Fees and Costs	<i>\$314.60</i>		<i>\$314.60</i>	<i>\$314.60</i>
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	<i>\$34,757.50</i>		<i>\$34,757.50</i>	<i>\$34,757.50</i>
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>				
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)	<i>\$60,923.00</i>	<i>\$0.00</i>	<i>\$60,923.00</i>	<i>\$60,923.00</i>
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>  <i>Brian A. M...</i>	<b>Date</b>  <i>4/9/2012</i>	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-05</i> Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY Grant:</b> <i>2005</i> <b>FFY of Grant Approval:</b>
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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 <sup>2</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>	\$ 6,311.00		\$ 6,311.00	\$ 6,311.00
3	1408 Management Improvements	\$ 2,000.00		\$ 2,000.00	\$ 2,000.00
4	1410 Administration (may not exceed 10% of line 21)	\$ 4,370.29		\$ 4,370.29	\$ 4,370.29
5	1411 Audit	\$ 2,000.00		\$ 2,000.00	\$ 2,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 4,059.29		\$ 4,059.29	\$ 4,059.29
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 9,570.42		\$ 9,570.42	\$ 9,570.42
10	1460 Dwelling Structures	\$ 28,799.00		\$ 28,799.00	\$ 28,799.00
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 6,000.00		\$ 6,000.00	\$ 6,000.00
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>				
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)	\$ 63,110.00	\$ -	\$ 63,110.00	\$ 63,110.00
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>  <i>Brian A. M...</i>	<b>Date</b>  4/9/2012	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here

Part II: Supporting Pages								
PHA Name: <i>East Carroll Housing Authority</i>		Grant Type and Number Capital Fund Program Grant No: <i>LA48P262501-05</i> CFFP (Yes / No): Replacement Housing Factor Grant No:				Federal FFY of Grant: <i>2005</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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<i>PHA Wide</i>	<i>Operations</i>	<i>1406</i>		\$ <i>6,311.00</i>		\$ <i>6,311.00</i>	\$ <i>6,311.00</i>	<i>Complete</i>
<i>PHA Wide</i>	<i>Staff Training</i>	<i>1408</i>		\$ <i>2,000.00</i>		\$ <i>2,000.00</i>	\$ <i>2,000.00</i>	<i>Complete</i>
<i>PHA Wide</i>	<i>Administrative Salary &amp; Travel</i>	<i>1410</i>		\$ <i>4,370.29</i>		\$ <i>4,370.29</i>	\$ <i>4,370.29</i>	<i>Complete</i>
<i>PHA Wide</i>	<i>Audit</i>	<i>1411</i>		\$ <i>2,000.00</i>		\$ <i>2,000.00</i>	\$ <i>2,000.00</i>	<i>Complete</i>
<i>PHA Wide</i>	<i>A/E Fees &amp; Costs</i>	<i>1430</i>		\$ <i>4,059.29</i>		\$ <i>4,059.29</i>	\$ <i>4,059.29</i>	<i>Complete</i>
<i>LA262-001</i>	<i>Landscaping</i>	<i>1450</i>		\$ <i>9,570.42</i>		\$ <i>9,570.42</i>	\$ <i>9,570.42</i>	<i>Complete</i>
<i>LA262-001</i>	<i>Install new cabinets in 12 units in the kitchen. Install new cabinets in 4 units in the bathrooms</i>	<i>1460</i>		\$ <i>28,799.00</i>		\$ <i>28,799.00</i>	\$ <i>28,799.00</i>	<i>Complete</i>
<i>LA262-001</i>	<i>Ranges &amp; Refrigerators as needed</i>	<i>1465.1</i>		\$ <i>6,000.00</i>		\$ <i>6,000.00</i>	\$ <i>6,000.00</i>	<i>Complete</i>
				\$ <i>63,110.00</i>	\$ <i>-</i>	\$ <i>63,110.00</i>	\$ <i>63,110.00</i>	

<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

**Part I: Summary**

<b>PHA Name:</b> <i>East Carroll Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <i>LA48P262501-04</i> Replacement Housing Factor Grant No: Date of CFFP: 	<b>FFY Grant:</b> <i>2004</i> <b>FFY of Grant Approval:</b> 
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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 <sup>2</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>	\$ 36,603.04		\$ 36,603.04	\$ 36,603.04
3	1408 Management Improvements	\$ 10,233.00		\$ 10,233.00	\$ 10,233.00
4	1410 Administration (may not exceed 10% of line 21)	\$ 5,600.00		\$ 5,600.00	\$ 5,600.00
5	1411 Audit	\$ 2,000.00		\$ 2,000.00	\$ 2,000.00
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 8,095.40		\$ 8,095.40	\$ 8,095.40
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 6,815.56		\$ 6,815.56	\$ 6,815.56
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 6,000.00		\$ 6,000.00	\$ 6,000.00
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>				
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)	\$ 75,347.00	\$ -	\$ 75,347.00	\$ 75,347.00
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				

<b>Signature of Executive Director</b>  <i>Baker G. M...</i>	<b>Date</b>  4/9/2012	<b>Signature of Public Housing Manager</b>  	<b>Date</b>  
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<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for Operations  
<sup>4</sup> RHF funds shall be included here



**Capital Fund Program - Five-Year Action Plan****Part I: Summary**

PHA Name/Number		<i>East Carroll Housing Authority</i>		Locality (City/Couty & State)		<i>East Carroll 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 <u>2012</u>	Work Statement for Year 2 FFY <u>2013</u>	Work Statement for Year 3 FFY <u>2014</u>	Work Statement for Year 4 FFY <u>2015</u>	Work Statement for Year 5 FFY <u>2016</u>			
B.	Physical Improvements Subtotal		\$ 28,290.00	\$ 28,290.00	\$ 28,290.00	\$ 28,290.00			
C.	Management Improvements								
D.	PHA - Wide Non-dwelling Structure and Equipment								
E.	Administration								
F.	Other								
G.	Operations		\$ 22,574.00	\$ 22,574.00	\$ 22,574.00	\$ 22,574.00			
H.	Demolition								
I.	Development								
J.	Capital Fund Financing - Debt Service								
K.	Total CFP Funds		\$ 50,864.00	\$ 50,864.00	\$ 50,864.00	\$ 50,864.00			
L.	Total Non-CFP Funds								
M.	Grand Total		\$ 50,864.00	\$ 50,864.00	\$ 50,864.00	\$ 50,864.00			

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
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>Replace roofs</i>		<i>\$ 11,019.00</i>	<i>Replace showers &amp; tubs</i>		<i>\$ 24,290.00</i>
	<i>Replace showers &amp; tubs</i>		<i>\$ 13,271.00</i>	<i>Purchases ranges, refrigerators, hot water heaters, etc.</i>		<i>\$ 4,000.00</i>
	<i>Purchases ranges, refrigerators, hot water heaters, etc.</i>		<i>\$ 4,000.00</i>			
	<b>Subtotal of Estimated Cost</b>		<b><i>\$ 28,290.00</i></b>	<b>Subtotal of Estimated Cost</b>		<b><i>\$ 28,290.00</i></b>



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

<b>Part III: Supporting Pages - Management Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY  <i>2011</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>Operations</i>		\$ 22,574.00	<i>Operations</i>		\$ 22,574.00
	<b>Subtotal of Estimated Cost:</b>		\$ 22,574.00	<b>Subtotal of Estimated Cost:</b>		\$ 22,574.00

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

<b>Part III: Supporting Pages - Management Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY  <i>2012</i>	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>Operations</i>		\$ 22,574.00	<i>Operations</i>		\$ 22,574.00
	<b>Subtotal of Estimated Cost:</b>		\$ 22,574.00	<b>Subtotal of Estimated Cost:</b>		\$ 22,574.00

## **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 East Carroll 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

*East Carroll 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
Barbara A. McDaniel	<i>Executive Director</i>
Signature	Date (mm/dd/yyyy)
	4/9/2012

**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.

East Carroll Housing Authority

PHA Name

LA262

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
Joyce Taylor	Chairman
Signature	Date
	4/9/2012