

# PHA Plans

## Streamlined 5-Year/Annual Version

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

OMB No. 2577-  
0226  
(exp 05/31/2006)

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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief to certain PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

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## Streamlined 5-Year Plan for Fiscal Years 2012 - 2016

## Streamlined Annual Plan for Fiscal Year 2012

# PICAYUNE HOUSING AUTHORITY

**NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue. Full reporting for each component listed in the streamlined Annual Plan submitted with the 5-year plan is required.**

Streamlined Annual PHA Plan

**PHA Fiscal Year 2012**  
[24 CFR Part 903.12(b)]

**Table of Contents**

Provide the following table of contents for the streamlined Annual Plan submitted with the Five-Year Plan, including all streamlined plan components, and additional requirements, together with the list of supporting documents available for public inspection.

**A. ANNUAL STREAMLINED PHA PLAN COMPONENTS**

**Attachment "A" MS066A01**

Civil Rights Certifications (included with PHA Certifications of Compliance) and Significant Amendment

**Attachment "B" MS066B01**

Violence Against Women Act

**Attachment "C" MS066C01**

Resident Advisory Board and Comments

**Attachment "D" MS066D01**

Capital Fund Program Original Annual Statement FY2012

**Attachment "E" MS066E01**

Capital Fund Program RHF Original Annual Statement FY2012

**Attachment "F" MS066F01**

P&E Statements for CFP FY 2011

**Attachment "G" MS066G01**

P&E Statements for RHF FY 2011

**Attachment "H" MS066H01**

P&E Statements for CFP FY 2010

**Attachment "I" MS066I01**

P&E Statements for RHF FY 2010

**Attachment "j" MS066j01**

P&E Statements for RHF FY 2009

**Attachment "K" MS066K01**

P&E Statements for RHF FY 2008

**Attachment "L" MS066L01**

CFP Five Year Action Plan

**MS066V01**

PHA 5 Year and Annual Plan

**PHA 5-Year and Annual Plan**

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

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

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Picayune Housing Authority</u> PHA Code: <u>MS26P066</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2012</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>276</u> Number of HCV units: _____				
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input 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
					PH HCV
	PHA 1:				
	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>	<p><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:</p> <p>We have adopted the following Mission Statement to guide the activities of the PHA:</p> <ol style="list-style-type: none"> <li>1. To preserve the stock of existing housing owned and/or managed by the PHA.</li> <li>2. To increase the availability of decent, safe, and affordable housing in the jurisdiction of the PHA.</li> <li>3. To promote available, adequate, decent, safe and affordable housing.</li> <li>4. To promote economic opportunity and vitality and asset development.</li> <li>5. To ensure equal opportunity in housing for all Americans.</li> <li>6. To provide suitable living environment.</li> <li>7. To improve the physical condition of the existing housing units.</li> <li>8. To improve the service delivery efforts of management and maintenance.</li> </ol>				

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.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- PHA Goal: Expand the supply of assisted housing
  - Objectives:
    - Apply for additional rental vouchers:
    - Reduce public housing vacancies:
    - Leverage private or other public funds to create additional housing opportunities:
    - Acquire or build units or developments
    - Other (list below)

- PHA Goal: Improve the quality of assisted housing
  - Objectives:
    - Improve public housing management: (PHAS score ) MASS SCORE
    - Improve voucher management: (SEMAP score)
    - Increase customer satisfaction:
    - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
    - Renovate or modernize public housing units:
    - Demolish or dispose of obsolete public housing:
    - Provide replacement public housing:
    - Provide replacement vouchers:
    - Other: (list below)

- PHA Goal: Increase assisted housing choices
  - Objectives:
    - Provide voucher mobility counseling:
    - Conduct outreach efforts to potential voucher landlords
    - Increase voucher payment standards
    - Implement voucher homeownership program:
    - Implement public housing or other homeownership programs:
    - Implement public housing site-based waiting lists:
    - Convert public housing to vouchers:
    - Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- PHA Goal: Provide an improved living environment
  - Objectives:
    - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
    - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
    - Implement public housing security improvements:
    - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
    - Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

- PHA Goal: Promote self-sufficiency and asset development of assisted households
  - Objectives:
    - Increase the number and percentage of employed persons in assisted families:
    - Provide or attract supportive services to improve assistance recipients' employability:
    - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
    - Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
  - Objectives:
    - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
    - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
    - Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
    - Other: (list below)

**Other PHA Goals and Objectives: (list below)**

**PHA Goal 1: To preserve the stock of existing housing owned and/or managed by the PHA.**

**Objectives:**

- 1a. Inspect all housing units annually to ensure they are in decent, safe, and sanitary condition (4/2008) completed by Sept. 30 each year.
- 1b. Identify funds and resources that may be available to implement Goal 1 continue in subsequent plan years.
- 1c. Identify Capital Improvement items in a priority order, which are necessary to accomplish Goal 1. Initial

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: <b>NONE</b></p> <p><b>The PHA held its Public Hearing and Resident Advisory Board meeting on Monday, November 14, 2011 at 3:00 P. M. and There were no Challenged Elements regarding the annual and five year plan.</b></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. Picayune Housing Authority 1511 7<sup>th</sup> Avenue Picayune, MS 39466</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> <p>On July 7, 2009, we submitted our Demolition Application No. DDA0003630 to HUD covering the 56 units remaining at Beechwood Apartments, AMP No. MS066000003. The demolition of Beechwood Apartments has been completed with a HUD approved Actual Modernization Cost Certificate dated September 1, 2011.</p> <p>The Picayune Housing Authority intends to submit an application for tax credits to develop 80 units of the former Beechwood Apts – AMP 3 or portion thereof. This development will require CFFP financing, AHP Grants, CFP Funds, and etc.</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>
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>

**Additional Information.** Describe the following, as well as any additional information HUD has requested.

(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.

1. The PHA established the goal to reduce vacancies by 2% annually. The Housing Authority will continue this goal.
2. The PHA established the goal to improve the PHAS score and MASS score. The PHA will continue to improve these scores.
3. The PHA established the goal of having units compatible with private market rentals by the year 2014. With the use of Capital Funds, the PHA is on schedule meeting this goal.
4. The PHA established a goal to increase the average income of residents 2% annually. The PHA will continue to work with residents to help increase income.
5. The PHA established the goal to continue efforts to provide security for residents and screen applicants. The PHA has a "Security Contract" with the city and works with county law enforcement agencies to obtain arrest information on any tenant for necessary appropriate action. The PHA continues its efforts to improve security by providing drug prevention programs and security thru our Security Contract with the City. The PHA is meeting the requirements of this goal.
6. Improving the physical condition of the units and grounds is a constant process. The PHA continues to reduce vacancies with improved maintenance techniques, improved management and occupancy controls along with capital fund improvements.
7. We continue to counsel with residents on homeownership and pledge our support if they choose to pursue homeownership. It is not feasible at this time to convert any of our rental units to homeownership or section 8 tenant based assistance.
8. We have implemented flat rents and our policy will allow applicants/tenants to make a choice in rent selection. In our new lease and ACOP, preferences in housing will favor working families, homeless, elderly/handicapped and families with hardships.
9. The PHA established the goal to provide services for elderly families through senior services. The PHA is meeting this goal.
10. We continue to inspect all housing units annually. We have prioritized our needs for CFP funding. We continue to test apartments for LBP and asbestos and currently proceeding with specifications for abatement, as necessary. Our goal to renovate or modernize public housing units with Capital Fund Program funds is being achieved and is on schedule.
11. The PHA established the goal to continue the policy to assure affirmative equal access for all applicants. The PHA is meeting this goal.
12. The PHA established the goal to make handicapped modifications to units exceeding 504 requirements based on individual need. The PHA is meeting this goal.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

**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:**

The Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notice for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in requirement for administration of Public Housing requiring public comment and/or public hearing.

**B. Significant Amendment or Modification to the Annual Plan**

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;
- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

10.0

<b>11.0</b>	<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> <ul style="list-style-type: none"> <li>(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)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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## **Summary of Policy or Program Changes for the Upcoming Year**

The Housing Authority will adopt policies and procedures to update its Admission Continued Occupancy Policy, General Policies and Procedures and New Dwelling Lease.

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

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## ATTACHMENT “A”

### **Civil Rights Certifications**

[24 CFR Part 903.12 (b), 903.7 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations. It is the policy of the Housing Authority to comply with all Federal, State, and local nondiscrimination laws and with rules and regulations governing Fair Housing and Equal Opportunity in housing and employment. The Housing Authority will comply with all laws relating to Civil Rights, including: Title VI and VIII of the Civil Rights Act, Executive Order 11063, Section 504, Age Discrimination Act and American With Disabilities Act.

To further our commitment to fully comply with applicable Civil Rights laws, the Housing Authority will provide Federal/State/Local information to public housing residents regarding “discrimination” and any recourse available to them during resident orientation session, resident meetings and reexaminations.

### **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:**

The Housing Authority does recognize the need for public notification for items contained within the 5-Year and Annual Plans. This authority shall make proper notification for any Substantial Deviations from these plans as required under law. The exception to this definition is if the change has been made to meet regulatory compliance with The U.S. Department of Housing and Urban Development requirements. Substantial deviation or Significant amendment or Modification shall mean those of the mission statement, goals and objective, capital fund program or changes in significant expenditures. And changes in statutory requirement for administration of Public Housing requiring public comment and/or public hearing.

#### **B. Significant Amendment or Modification to the Annual Plan**

A Significant Amendment or Modification to the Annual Plan shall be construed to mean the following:

- Changes to rent or admissions policies or organization of the waiting list;

- Additions of non-emergency work items not currently included in the Annual Statement or the 5-Year Action Plan or changes in use of replacement reserve funds under the Capitol Fund;
- Any changes with regard to demolition or disposition, designation, homeownership programs or conversion activities.

These issues, if required, shall be raised with proper public notification. The Housing Authority acknowledges that an exception will be made by HUD to comply with the above changes that are adopted to reflect changes in HUD regulatory requirements: such changes will not be considered significant amendments by HUD.

# **ATTACHMENT “B”**

## **Picayune Housing Authority (PHA)**

### **Violence Against Women Act (VAWA) Policy**

Adopted Date: 12-10-07

Effective Date: 02-1-08

#### **I. Purpose and Applicability**

The purpose of this Policy is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and more generally to set forth PHA’s policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by PHA of all federally subsidized public housing. Notwithstanding its title, this Policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

#### **II. Goals and Objectives**

This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by PHA;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between PHA, law enforcement authorities, victim service providers, and others to promote the safety and well-being of victims of actual and threatened domestic violence, dating violence and stalking, who are assisted by PHA; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by PHA.

#### **III. Other PHA Policies and Procedures**

This Policy shall be referenced in and attached to PHA’s Five-Year Public Housing Agency Plan and shall be incorporated in and made a part of PHA’s Admissions and

Continued Occupancy Policy. PHA's annual public housing agency plan shall also contain information concerning PHA's activities, services or programs relating to domestic violence, dating violence, and stalking.

To the extent any provision of this policy shall vary or contradict any previously adopted policy or procedure of PHA, the provisions of this Policy shall prevail.

#### **IV. Definitions**

As used in this Policy:

A. *Domestic Violence* – The term 'domestic violence' includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

B. *Dating Violence* – means violence committed by a person—

(A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and

(B) where the existence of such a relationship shall be determined based on a consideration of the following factors:

(i) The length of the relationship.

(ii) The type of relationship.

(iii) The frequency of interaction between the persons involved in the relationship.

C. *Stalking* – means –

(A) (i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and (ii) to place under surveillance with the intent to kill, injure, harass or intimidate another person; and

(B) in the course of, or as a result of, such following, pursuit, surveillance or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to –

(i) that person;

(ii) a member of the immediate family of that person; or

(iii) the spouse or intimate partner of that person;

D. *Immediate Family Member* - means, with respect to a person –

- (A) a spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in loco parentis; or
- (B) any other person living in the household of that person and related to that person by blood or marriage.

E. *Perpetrator* – means person who commits an act of domestic violence, dating violence or stalking against a victim.

## **V. Admissions and Screening**

A. *Non-Denial of Assistance*. PHA will not deny admission to public housing to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

## **VI. Termination of Tenancy or Assistance**

A. *VAWA Protections*. Under VAWA, public housing residents have the following specific protections, which will be observed by PHA:

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be a “serious or repeated” violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of or assistance to the victim of that violence.
2. In addition to the foregoing, tenancy or assistance will not be terminated by PHA as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant’s control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance described in this paragraph is subject to the following limitations:
  - (a) Nothing contained in this paragraph shall limit any otherwise available authority of PHA to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant’s household. However, in taking any such action, PHA may apply a more demanding standard to the victim of domestic violence, dating violence or stalking than that applied to other tenants.
  - (b) Nothing contained in this paragraph shall be construed to limit the authority

of PHA to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or PHA, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance.

B. *Removal of Perpetrator.* Further, notwithstanding anything in paragraph VI.A.2. or Federal, State or local law to the contrary, PHA as the case may be, may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to a lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a resident or lawful occupant and who engages in acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the resident or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by PHA. Leases used for all public housing operated by PHA, shall contain provisions setting forth the substance of this paragraph.

## **VII. Verification of Domestic Violence, Dating Violence or Stalking**

A. *Requirement for Verification.* The law allows, but does not require, PHA to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this policy. Subject only to waiver as provided in paragraph VII. C., PHA shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by PHA.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

1. *HUD-approved form* - by providing to PHA a written certification, on a form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.
2. *Other documentation* - by providing to PHA documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing the domestic violence, dating violence or stalking, or the effects of the abuse,

described in such documentation. The professional providing the documentation must sign and attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse meeting the requirements of the applicable definition(s) set forth in this policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the documentation must also sign and attest to the documentation under penalty of perjury.

3. *Police or court record* – by providing to PHA a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.

B. *Time allowed to provide verification/ failure to provide.* An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by PHA, to provide verification, must provide such verification within 14 business days (*i.e.*, 14 calendar days, excluding Saturdays, Sundays, and federally-recognized holidays) after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action.

C. *Waiver of verification requirement.* The Executive Director of PHA, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this policy based on the victim's statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

## **VIII. Confidentiality**

A. *Right of confidentiality.* All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to PHA in connection with a verification required under section VII of this policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:

1. requested or consented to by the individual in writing, or
2. required for use in a public housing eviction proceeding as permitted in VAWA, or
3. otherwise required by applicable law.

B. *Notification of rights.* All residents of public housing administered by PHA shall be notified in writing concerning their right to confidentiality and the limits on such rights to confidentiality.

## **IX. Court Orders/Family Break-up**

A. *Court orders.* It is PHA's policy to honor orders entered by courts of competent jurisdiction affecting individuals assisted by PHA. This includes cooperating with law enforcement authorities to enforce civil protection orders issued for the protection of victims and addressing the distribution of personal property among household members in cases where a family breaks up.

B. *Family break-up.* Other PHA policies regarding family break-up are contained in PHA's Public Housing Admissions and Continuing Occupancy Plan (ACOP).

## **X. Relationships with Service Providers**

It is the policy of PHA to cooperate with organizations and entities, both private and governmental, that provide shelter and/or services to victims of domestic violence. If PHA staff become aware that an individual assisted by PHA is a victim of domestic violence, dating violence or stalking, PHA will refer the victim to such providers of shelter or services as appropriate. Notwithstanding the foregoing, this Policy does not create any legal obligation requiring PHA either to maintain a relationship with any particular provider of shelter or services to victims or domestic violence or to make a referral in any particular case. PHA's annual public housing agency plan shall describe providers of shelter or services to victims of domestic violence with which PHA has referral or other cooperative relationships.

## **XI. Notification**

PHA shall provide written notification to applicants, tenants, concerning the rights and obligations created under VAWA relating to confidentiality, denial of assistance and, termination of tenancy or assistance.

## **XII. Relationship with Other Applicable Laws**

Neither VAWA nor this Policy implementing it shall preempt or supersede any provision of Federal, State or local law that provides greater protection than that provided under VAWA for victims of domestic violence, dating violence or stalking.

## **XIII. Amendment**

This policy may be amended from time to time by PHA as approved by the PHA Board of Commissioners.

**Required Attachment C :Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Ms. Nora Morgan, 309 N. Beechwood Drive, Picayune, MS 39466

Ms. Elizabeth Terrance, 1501 7<sup>th</sup> Avenue, Picayune, MS 39466

Ms. Dorothy Spencer 1401 Bender Street, Picayune, MS 39466

Ms. Lauri Burns 1500 7<sup>th</sup> Avenue, Apt, C-1, Picayune, MS 39466

Mr. Guy Larson, 1501 Rosa Street, Apt. A-1, Picayune, MS 39466

Ms. Henrietta Smith, 1201 Kingsway Drive, Apt. 108, Picayune, MS 39466

Ms. Darlene Dickerson, 1604 7<sup>th</sup> Avenue, Picayune, MS 39466

**SELECTION OF RESIDENT ADVISORY BOARD MEMBERS:**

The Resident Advisory Board consists of seven (7) members who are adult recipient of PHA assistance. They are selected by the resident body/housing authority and serve in a dual capacity. Meetings are held quarterly.

**Challenged Elements**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: **NONE**

**There were no comments or challenged elements regarding the annual and five year plan.**

**Resident Advisory Board Recommendations**

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

If yes, provide the comments below:

b. 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)

The PHA held its Resident Advisory Board meeting on Monday, November 14, 2011 at 3:00 P. M.

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 8/30/2011

<b>Part I: Summary</b>		
<b>PHA Name: Picayune Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P066501-12 Replacement Housing Factor Grant No: Date of CFFP: N/A	<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b>

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/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 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>		6,000		
3	1408 Management Improvements		25,000		
4	1410 Administration (may not exceed 10% of line 21)		44,553		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		156,000		
8	1440 Site Acquisition				
9	1450 Site Improvement		10,000		
10	1460 Dwelling Structures		196,730		
11	1465.1 Dwelling Equipment—Nonexpendable		7,250		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
<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 8/30/2011

<b>Part I: Summary</b>						
<b>PHA Name:</b> Picayune Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P066501-12 Replacement Housing Factor Grant No: Date of CFFP: N/A			<b>FFY of Grant: 2012</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>						
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	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)	445,533				
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>Mary E. Davis</i>		<b>Date</b> 11/15/11		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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

<b>Part II: Supporting Pages</b>								
PHA Name: Picayune Housing Authority			Grant Type and Number Capital Fund Program Grant No: MS26P066501-12 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2012		
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>	
COCC	Management Fees	1410		44,553				
AMP 1	Operations	1406		3,000				
MS 66-001, 002, 003, 004, 005, 006, 009B	Security	1408		12,500				
	Consultant, Strategic Planning, EPC	1430		35,000				
	Modernization Consultant	1430		25,000				
	A/E Fees	1430		5,000				
	Inspections, Surveys, Etc.	1430		3,000				
	Site Improvements	1450		5,000				
	Stoves	1465.1	5	1,750				
	Refrigerators	1465.1	5	2,000				
AMP 2	Operations	1406		3,000				
MS 66-007, 009A	Security	1408		12,500				
	A/E Services	1430		25,000				
	Modernization Consultant	1430		25,000				
	Inspections, Surveys	1430		3,000				
	Consultant, Strategic Planning, EPC	1430		35,000				
	Site Improvements	1450		5,000				
	Stoves	1465.1	5	1,750				
	Reefers	1465.1	3	1,750				
	UFAS Compliant Units, 66-009A (3) Hearing/Visual Impaired 66-009A (1)	1460	3	196,730				
	GRAND TOTAL			445,533				

<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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 8/30/2011**

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 8/30/2011**

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Picayune Housing Authority				Federal FFY of Grant: 2012	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
COCC	09/30/14		09/30/16		
AMP 1	09/30/14		09/30/16		
AMP 2	09/30/14		09/30/16		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 8/30/2011

Part I: Summary						
PHA Name: Picayune Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-12 Date of CFFP:			FFY of Grant: 2012 FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>	43,950				

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

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

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

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

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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 8/30/2011

<b>Part I: Summary</b>						
<b>PHA Name:</b> Picayune		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No:MS26R066-501-12 Date of CFFP:			<b>FFY of Grant:2012</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:        ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	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)	43,950				
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>Mary E. Lewis</i>		<b>Date</b> 11/15/11		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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

<b>Part II: Supporting Pages</b>								
PHA Name: Picayune Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: MS26R066-501-12			Federal FFY of Grant: 2012		
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>	
HA WIDE	Replacement of 80 Units of Housing	1499		43,950				
	TOTAL			43,950				

<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

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

<b>Part I: Summary</b>						
PHA Name: Picayune Housing Authority		Grant Type and Number Capital Fund Program Grant No: MS26P066501-11 Replacement Housing Factor Grant No: Date of CFFP: N/A			FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:01 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-11 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements		2,400	2,400		
4	1410 Administration (may not exceed 10% of line 21)		44,553	44,553		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		82,000	82,000		
8	1440 Site Acquisition					
9	1450 Site Improvement		103,000	103,000		
10	1460 Dwelling Structures		187,080	164,080		
11	1465.1 Dwelling Equipment—Nonexpendable		15,500	9,500		
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment		11,000	40,000		
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

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

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

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

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

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

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

<b>Part I: Summary</b>		
<b>PHA Name:</b> Picayune Housing Authority	<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P066501-11 Replacement Housing Factor Grant No: Date of CFFP: N/A	<b>FFY of Grant: 2011</b> <b>FFY of Grant Approval:</b>

**Type of Grant**  
 Original Annual Statement                       Reserve for Disasters/Emergencies                       Revised Annual Statement (revision no:     )  
 Performance and Evaluation Report for Period Ending: 6-30-11                       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	445,533	445,553		
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>Mary E. Davis</i>	<b>Date</b> 11/15/11	<b>Signature of Public Housing Director</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.

<b>Part II: Supporting Pages</b>								
PHA Name: Picayune Housing Authority			Grant Type and Number Capital Fund Program Grant No: MS26P066501-11 CFFP (Yes/ No): NO Replacement Housing Factor Grant No:			Federal FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
COCC	Management Fees	1410		44,553	44,553			
AMP 1	Operations	1406		0	-0-			
MS 66-001, 002, 003, 004, 005, 006, 009B	Training	1408		1,200	1,200			
	Consultant	1430		5,000	18,500			
	A/E Fees	1430		24,000	3,000			
	Inspections, Surveys, Etc.	1430		3,000	3,000			
	Site Improvements	1450		3,000	3,000			
	Handicapped Accessible Units Renov.	1460						
	Project 001		1	30,000	-0-			
	Project 002		2	67,080	-0-			
	Project 003		2	60,000	-0-			
	Project 006		1	30,000	-0-			
	Stoves	1465.1	5	1,750	1,750			
	Refrigerators	1465.1	15	6,000	3,000			
	Grass Cutter	1475	1	11,000	16,000			
	Truck	1475	1	-0-	24,000			
AMP 2	Operations	1406		0	-0-			
MS 66-007, 009A	Training	1408		1,200	1,200			

<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.



<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Picayune Housing Authority					Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
COCC	09/30/13		09/30/15		
AMP 1	09/30/13		09/30/15		
AMP 2	09/30/13		09/30/15		
AMP 3	09/30/13		09/30/15		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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 8/30/2011

<b>Part I: Summary</b>				<b>FFY of Grant: 2011</b>	
<b>PHA Name: Picayune Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-11 Date of CFFP:		<b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:01 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-11		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	43,950	43,950		
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>	-0-	43,950		

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

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

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

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

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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 8/30/2011**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Picayune		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-11 Date of CFFP:			<b>FFY of Grant:2011</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 01 )		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-11		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	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)	43,950	43,950			
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>Mary E. Lewis</i>		<b>Date</b> 11/15/11		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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





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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 8/31/2011

<b>Part I: Summary</b>	
<b>PHA Name: Picayune Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P066-501-10 Replacement Housing Factor Grant No: Date of CFFP:
<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval:</b>	

Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:01 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06-30-11 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	100,000	100,000	100,000	100,000
3	1408 Management Improvements	78,677	74,677	66,677	22,578.52
4	1410 Administration (may not exceed 10% of line 21)	52,263	52,263	52,263	52,263
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	84,000	90,278	24,277.09	15,100.42
8	1440 Site Acquisition				
9	1450 Site Improvement	15,000	20,000	13,025	13,024.95
10	1460 Dwelling Structures	192,695	89,905	5,109	4,325
11	1465.1 Dwelling Equipment—Nonexpendable	0	22,000	17,907	17,904.85
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	0	1,815	1,815	1,815
14	1485 Demolition	0	71,697	71,697	0
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
**Expires 08/31/2011**

<b>Part I: Summary</b>						
<b>PHA Name:</b> Picayune Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P066-501-10 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 type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01 )		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06-30-11		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	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)	<b>522,635</b>	<b>522,635</b>	<b>352,770.09</b>	<b>227,011.74</b>	
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	66,677	66,677	66,677	22,578.52	
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>Mary E Davis</i>		<b>Date</b> 11/15/11		<b>Signature of Public Housing Director</b>		
				<b>Date</b>		

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

<b>Part II: Supporting Pages</b>								
PHA Name: Picayune Housing Authority			Grant Type and Number Capital Fund Program Grant No: MS26P066-501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
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>	
COCC	Management Fees	1410		52,263	52,263	52,263	52,263	
AMP I	Operations	1406		52,757	52,757	52,757	52,757	
66-001, 002, 003, 004	Security	1408		34,038	44,181	44,181	15,127	
005, 006, 009B	Training	1408		4,000	4,000	0	0	
	Strategic Planning Consultant	1430		10,000	0	0	0	
	A/E Fees	1430		5,000	0	0	0	
	Modernization Coordinator	1430		0	15,000	0	0	
	Inspections, Surveys, Applications	1430		3,000	1,467	1,467	1,466.18	
	Site Improvements	1450		5,000	10,000	8,727	8,727	
	Roofing	1460		68,600	0	0	0	
	Stoves	1465.1		0	4,000	3,670	3,669.38	
	Refrigerators	1465.1		0	8,500	8,237	8,236.86	
	Non Dwelling Equipment	1475		0	1,815	1,815	1,815	
AMP II	Operations	1406		28,014	28,014	28,014	28,014	
66-007, 66-009A	Security	1408		17,500	22,496	22,496	7,451.52	
	Training	1408		4,000	4,000	0	0	
	Strategic Planning Consultant	1430		10,000	0	0	0	
	A/E Fees	1430		20,000	9,175	9,175	0	
	Modernization Coordinator	1430		0	15,000	0	0	
	Inspections, Surveys, Applications	1430		3,000	723	723	722.15	
	Site Improvements	1450		5,000	10,000	4,298	4,297.95	

<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.

<b>Part II: Supporting Pages</b>								
PHA Name: Picayune Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: MS26P066-501-10 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>	
	HVAC	1460		124,095	784	784	0	
	Kitchen Cabinets	1460	92	0	89,121	4,325	4,325	
	Stoves	1465.1		0	3,500	1,808	1,807.32	
	Refrigerators	1465.1		0	6,000	4,192	4,191.29	
AMP III	Operations	1406		19,229	19,229	19,229	19,229	
66-008	Security	1408		15,139	0	0	0	
	Training	1408		4,000	0	0	0	
	Strategic Planning Consultant	1430		10,000	12,913	12,912.09	12,912.09	
	A/E Fees	1430		20,000	36,000	0	0	
	Inspections, Surveys, Applications	1430		3,000	0	0	0	
	Site Improvements	1450		5,000	0	0	0	
	Demolition	1485		0	71,697	71,697	0	
	<b>GRAND TOTAL</b>			<b>522,635</b>	<b>522,635</b>	<b>352,770.09</b>	<b>227,011.74</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.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Picayune Housing Authority					Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP I	09/30/2012		09/30/2014		
AMP II	09/30/2012		09/30/2014		
AMP III	09/30/2012		09/30/2014		

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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

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

<b>Part I: Summary</b>		
PHA Name: Picayune Housing Authority	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-10 Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval:

Type of Grant  
 Original Annual Statement     Reserve for Disasters/Emergencies     Revised Annual Statement (revision no:01-11/9/2011 )  
 Performance and Evaluation Report for Period Ending: 09/30/2011     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>				
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	43,950	0	0	0
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>		43,950	0	0

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

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

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

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

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

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

<b>Part I: Summary</b>		
<b>PHA Name:</b> Picayune	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-10 Date of CFFP:	<b>FFY of Grant:2010</b> <b>FFY of Grant Approval:</b>

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no:    )  
 Performance and Evaluation Report for Period Ending: 09/30/2011       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	43,950		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> <i>Mary E. Davis</i>	<b>Date</b> 11/15/11	<b>Signature of Public Housing Director</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.





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 8/30/2011

Part I: Summary						
PHA Name: PICAYUNE HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066501-09 Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:01 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-11 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	42,703	-0-			
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition	-0-	32,810.58	32,810.58		
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>	-0-	9,892.42			

<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.

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U.S. Department of Housing and Urban Development  
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 Expires 8/30/2011

<b>Part I: Summary</b>						
<b>PHA Name:</b> PICAYUNE HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066501-09 Date of CFFP:			<b>FFY of Grant:2009</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 01 )		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6-30-11		<input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>		
		Original	Revised <sup>2</sup>	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)	42,703	42,703			
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>Mary E. Davis</i>			<b>Date</b> 11/15/11		<b>Signature of Public Housing Director</b>	
					<b>Date</b>	

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





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

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

<b>Part I: Summary</b>				<b>FFY of Grant: 2008</b>	
<b>PHA Name: Picayune Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-08 Date of CFFP:		<b>FFY of Grant Approval:</b>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	38,486	-0-		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition		38,486	38,486	
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

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

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

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

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> Picayune	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: MS26R066-501-08 Date of CFFP:	<b>FFY of Grant:2008</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011			<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	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)	38,486	38,486	38,486	
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>Mary E. Davis</i>		<b>Date</b> 11/15/11		<b>Signature of Public Housing Director</b>	
				<b>Date</b>	

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





**Summary of Policy or Program Changes for the Upcoming Year**

The Housing Authority will build a new office building in 2012. We are in the process of soliciting an architect for design & engineering and site selection.

The Housing Authority will adopt policies and procedures to update its Rent Schedule and Admission Continued Occupancy Policy  
**Of changes listed below:**

<b>Part I: Summary</b>						
PHA Name/Number <b>Picayune Housing Authority</b>		Locality (City/County & State) <b>Picayune, Pearl River, MS</b>			<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</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 FFY 2015	Work Statement for Year 5 FFY 2016
B.	Physical Improvements Subtotal	Annual Statement	150,380	74,000	114,000	101,208
C.	Management Improvements		25,000	25,000	25,000	25,000
D.	PHA-Wide Non-dwelling Structures and Equipment		-0-	3,000	15,980	99,109
E.	Administration		44,553	44,553	44,553	44,533
F.	Other		111,600	86,600	111,600	111,600
G.	Operations		6,000	6,000	6,000	6,000
H.	Demolition		-0-	-0-	-0-	-0-
I.	Development		75,000	173,380	95,400	25,063
J.	Capital Fund Financing – Debt Service		-0-	-0-	-0-	
K.	Total CFP Funds		412,533	412,533	412,533	412,533
L.	Total Non-CFP Funds					
M.	Grand Total		412,533	412,533	412,533	412,533

<b>Part I: Summary (Continuation)</b>						
PHA Name/Number <b>Picayune Housing Authority</b>		Locality: <b>Picayune, Pearl River, MS</b>			<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b>	<input type="checkbox"/> <b>Revision No:</b>
A.	Development Number and Name Number	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 FFY 2015	Work Statement for Year 5 FFY 2016
		Annual Statement				
	COCC		44,533	44,533	44,553	44,553
	PHA WIDE		75,000	173,380	95,400	25,063
	AMP 1 MS 030-001P		105,600	168,600	115,600	204,709
	AMP 2 MS 030-002P		220,380	59,000	189,980	171,208

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013			Work Statement for Year: 3 FFY 2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
<b>See</b>	<b>COCC</b>			<b>COCC</b>		
<b>Annual Statement</b>	Management Fees e		44,553	Management Fees e		44,553
	<b>AMP I</b>			<b>AMP I</b>		
	Operations g		3,000	Operations g		3,000
	A/E Fees f		35,000	A/E Fees f		35,000
	Consultant Services f		25,000	Consultant Services f		25,000
	Inspections, Survey, Testing f		6,600	Inspections, Survey, Testing f		6,600
	Site Improvements b		2,000	Site Improvements b		2,000
	Stoves b	6	2,500	Stoves b	6	2,500
	Refrigerators b	6	2,500	Refrigerators b	6	2,500
	Non Dwelling Structure			Non Dwelling Structure		
	Non Dwelling Equipment			Non Dwelling Equipment d		3,000
	Security c		12,500	Demolition		
				Relocation		
				Acquisition		
				Roofing		
				UFAS Compliant Apts b		60,000
				Security		12,500
	<b>AMP II</b>			<b>AMP II</b>		
	Operations g		3,000	Operations g		3,000
	A/E Fees f		15,000	A/E Fees f		15,000
	Consultant Services f		25,000	Consultant Services f		
	Inspections, Survey, Testing f		5,000	Inspections, Survey, Testing f		5,000
	Site Improvements b		2,000	Site Improvements b		2,000
	Stoves b	6	2,500	Stoves b	6	2,500
	Refrigerators b	6	2,500	Refrigerators b	6	2,500
	UFAS Compliance 66-007 b		36,380	Non Dwelling Structure		
	Non Dwelling Equipment			Non Dwelling Equipment		
	Security		12,500	Security		12,500



<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2012	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
<b>See</b>	<b>COCC</b>			<b>COCC</b>		
<b>Annual Statement</b>	Management Fees e		44,553	Management Fees		44,553
	<b>AMP I</b>			<b>AMP I</b>		
	Operations g		3,000	Operations g		3,000
	A/E Fees f		35,000	A/E Fees f		35,000
	Consultant Services f		25,000	Consultant Services f		25,000
	Inspections, Survey, Testing f		6,600	Inspections, Survey, Testing f		6,600
	Site Improvements b		2,000	Site Improvements b		2,000
	Stoves b	6	2,500	Stoves b	6	2,500
	Refrigerators b	6	2,500	Refrigerators b	6	2,500
	Non Dwelling Structure			Office d		99,109
	Non Dwelling Equipment d		10,000	Non Dwelling Equipment		
	Demolition			Demolition		
	Relocation			Relocation		
	Acquisition			Acquisition		
	Roofing			Roofing		
	Security		12,500	Security		12,500
	<b>AMP II</b>			<b>AMP II</b>		
	Operations g		3,000	Operations g		3,000
	A/E Fees f		15,000	A/E Fees f		15,000
	Consultant Services f		25,000	Consultant Services f		25,000
	Inspections, Survey, Testing f		5,000	Inspections, Survey, Testing f		5,000
	Site Improvements b		2,000	Site Improvements b		2,000
	Stoves b	6	2,500	Stoves b	6	2,500
	Refrigerators b	6	2,500	Refrigerators b	6	2,500
	Non Dwelling Structure		3,000	Non Dwelling Structure		
	Non Dwelling Equipment d		2,980	Non Dwelling Equipment		
	Security c		12,500	Security c		12,500
	PHA WIDE			PHA WIDE		





