

1.0	PHA Information PHA Name: _____ Housing Authority of the County of Huntingdon _____ PHA Code: _____ PA027 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): _04/01/2012_____																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: _314_____ Number of HCV units: _307_____																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width:35%;">Participating PHAs</th> <th rowspan="2" style="width:8%;">PHA Code</th> <th rowspan="2" style="width:20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width:20%;">Programs Not in the Consortia</th> <th colspan="2" style="width:19%;">No. of Units in Each Program</th> </tr> <tr> <th style="width:10%;">PH</th> <th style="width:9%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	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:					
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PHA 2:																											
PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	Mission. <u>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:</u>																										
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.																										
6.0	PHA Plan Update--Yes (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Defiant Trespass Policy Preventative Maintenance Plan (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. Copies of the Annual Plan may be obtained from the Central Administrative office or at the Crawford Apartments Office in Huntingdon.																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i>																										
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.																										
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.																										
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.																										
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.																										

9.0

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

STATEMENT OF HOUSING NEEDS
2012 AGENCY PLAN

The Huntingdon County Housing Authority maintains 314 public housing units in Huntingdon County as well as 120 Housing Choice Vouchers dedicated to Huntingdon County residents. 187 Housing Choice Vouchers, absorbed in 2007, are targeted to residents of Fulton County. Since Huntingdon and Fulton counties are adjacent, they share many of the same characteristics and needs, and both are addressed in this report.

Resources used for assessing the housing needs of Huntingdon and Fulton Counties include the Consolidated Plan of the Commonwealth of Pennsylvania FFY 2000 through 2004 including the Action Plan for 2005, The Huntingdon County Comprehensive Plan, the Huntingdon and Fulton County Pennsylvania County Data Books, FHFA Housing Fact Sheets, 2010 U.S. Census Bureau Statistics, and analysis of current Housing Authority applicant/tenant data.

The Consolidated Plan of the Commonwealth of Pennsylvania examines the number of Pennsylvania households with housing problems on both statewide and jurisdictional levels. The majority of housing problems include homes and apartments that are sub-standard, overcrowded, or cost more than 30 percent of a family's income - the lower the income of the household, the greater the housing problems. 2010 statistics from Huntingdon and Fulton County data books continue to show that 72% of extremely low-income households have housing problems compared to 50% of very low-income households and 27% of low-income families. Furthermore, data reveals that the highest percentage of renters experiencing housing problems is found among renters with families of five or more persons and extremely low income. 87% of these households have housing problems.

2010 census housing data leads to the conclusion that only 23% of the occupied housing units in Huntingdon County are rentals and there is "not much variety in housing stock..." which "may limit choice for some households". Information from the Fulton County Data Book indicates that housing stock is much the same in Fulton County. For example, 77% of homes are owner-occupied and 16% are vacant. Nearly 8% of units lack either plumbing or full kitchen facilities, probably because there are many hunting cabins in both counties.

Making matters worse, according to all sources, the median income of households in both Huntingdon and Fulton counties is significantly below that of the state as a whole and unemployment is among the highest in the state. Because neither county has public transportation, residents must either have a car or live in the most populated areas to easily access work and services. With the exception of vacation homes, new development mainly occurs in the most densely populated communities.

Findings from an analysis of the Housing Authority's public housing and Section 8 waiting lists remain consistent with the above figures and comments. Of the 254 families currently on the Section 8 waiting lists, 193 (76%) are below 30% median income and 61 (24%) are very low income. There are currently 138 families on the public housing waiting list with 97 (70%) extremely low-income, 27 (20%) very low-income, and 14 (10%) low-income.

The number of families on the Section 8 waiting lists has more than doubled from last year at this time. Because of funding constraints, no new vouchers have been issued since April 2011. Hence, waiting time for new Huntingdon County applicants has risen from 3 months in 2010 to 18-24 months today. An eligible new applicant in Fulton County would have received a voucher immediately a year ago and will now wait 6-12 months. As need has increased, rising utility costs and uncertain funding continue to hamper the Authority's ability to serve these families.

Our one-bedroom public housing units, largely concentrated at Taylor Apartments and Greene Street Village, provide housing for predominantly elderly and disabled household and continue to attract more applicants than can be housed (62% of the public housing waiting list consists of one-bedroom applicants).

The goals and objectives in our recent five-year plan reflect both the housing needs of the two counties we serve and our endeavors to address them.

<p>9.1</p>	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>The Housing Authority continues to work and develop relationships with various Huntingdon and Fulton county agencies and committees on housing issues. Collaboration with these agencies and committees will result in greater strength to address housing needs in both counties, including additional home ownership opportunities as well as housing for the mentally disabled and those in need of emergency shelter.</p> <p>We now have two participants in the homeownership program and continue the search for more prospects.</p> <p>The Authority has completed the final phase of the transition plan for ADA compliance and Capital Fund dollars are fully available to address other physical plant needs.</p> <p>We will continue to direct efforts to the challenge of marketing public housing family communities by making the most of our resources and encouraging resident pride and participation.</p>
<p>10. 0</p>	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p style="text-align: center;"><u>AGENCY PLAN 2012</u> <u>PROGRESS TOWARD GOALS AND OBJECTIVES</u></p> <p>The Huntingdon County Housing Authority has continued working this past year toward achieving the goals and objectives specified in its Five Year Plan 2010-2014. Striving to achieve these goals is on-going and progress has been made toward all of the stated objectives. The following is a brief summary of our efforts and accomplishments.</p> <p>I. Goal –The Huntingdon County Housing Authority will assist its community to increase the availability of affordable, suitable housing for families in the low and very low income ranges:</p> <ul style="list-style-type: none"> • The Housing Authority provided support to the county by referring potential homeowners to the properties available under the Neighborhood Stabilization Program; and, • A current Section 8 participant has been selected to occupy the newly renovated home owned by the CCA. The goal is for this family to become a homeowner. <p>II. Goal – Manage the Huntingdon County Housing Authority in an ethical, effective, and Professional manner:</p> <ul style="list-style-type: none"> • Each administrative employee has attended trainings relevant to his/her particular position. • Management has also sent representatives to various round table discussions with the Pittsburgh HUD field office. • Staff continues to develop ways to work more efficiently by utilizing functions available with the new computer system • The Housing Authority has again made good use of Pennsylvania's COSTARS Cooperative Purchasing Program with the following purchases: <ul style="list-style-type: none"> ○ A Kubota utility vehicle for maintenance use ○ A new copier <p>III. Goal - Enhance the marketability of the Huntingdon County Housing Authority's public housing units, making them the affordable housing of choice for the very low-income residents of our community.</p> <ul style="list-style-type: none"> • "Select Security" installed a new wireless CCTV system at Chestnut Terrace to view suspected crime activity at the exterior of the complex. • Work on the patio area in front of Taylor Apartments is underway and will provide a safer and more pleasant outdoor gathering place for residents. • The interior halls and common areas at Taylor Apartments have been renovated, providing a warmer, homier environment. • Several unsightly and overgrown trees were removed from both the Chestnut Terrace and Crawford Apartment communities. • To aid in enhancing the desirability of our public housing communities, a <u>Defiant Trespass Policy</u> was adopted on November 11, 2011.

- IV. Goal –The Huntingdon County Housing Authority will work to improve the image of public housing in our community
- New clotheslines were installed to replace the “Umbrella” clotheslines at Hartman Village.
 - Housing Authority staff continued to actively participate in organizations such as Human Services Council, Domestic Violence Task Force, and the Center for Community Action.
 - March 1, 2011, the Housing Authority entered into an interagency agreement with the Mount Union Borough to provide supplemental security services for all Mount Union public housing communities.
 - The Allegheny County Housing Authority continues to perform criminal background checks for the Huntingdon County Housing Authority.

- V. Goal – Manage the Huntingdon County Housing Authority’s Housing Choice Voucher Program in an efficient and effective manner, maintaining its status as high performer under SEMAP.

- Increased Voucher utilization rate, utilizing nearly all of the allocated funding
- Continued to offer landlords a Direct Deposit option for monthly payments
- Continued to maintain and staff a Section 8 satellite office in Fulton County
- Staff attended HQS and Reasonable Accommodation training sessions.

- VI. Goal – The Huntingdon County Housing Authority will work to improve access of public housing residents to services that support economic opportunities and quality of life.

- The Mifflin-Juniata Special Needs Center, Inc. has expanded its services to Huntingdon County and the Housing Authority provides space for their teen activities at the community rooms of Greene Street in Mount Union and Crawford Apartments in Huntingdon.
- Maintained active participation in the *EARN* program as a job site
- Provided space for the fitness coordinator from “Snap Fitness” of Mount Union to conduct a weekly exercise program for Chestnut Terrace and Hartman Village residents.
- The HMJ Patch Program (one on one support program to stop using tobacco) holds classes at the WJR Community Center.

- VII. Goal – Maintain the Huntingdon County Housing Authority’s real estate in the best possible Condition

- The Housing Authority continued its practice of providing timely and high quality maintenance services to its residents.
- The Housing Authority continued to make repairs and enhancements necessary to improve the PHAS Physical Report overall scores of its communities. Regular Capital Funds and AARA funding have allowed several physical improvements to be completed.
- Three maintenance aides attended a “hands-on” maintenance training that included workshops on plumbing, drywall and electrical, as well as general maintenance.

- VIII. Goal – Operate the Huntingdon County Housing Authority in full compliance with all EEO regulations

- Postings were maintained as current and clearly visible.
- All requests for reasonable accommodation were addressed promptly.
- Both Section 8 and public housing staff attended trainings specific to handicapped accessibility issues.
- Maintained compliance with the requirements of the Violence Against Women Act of 2005.

- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and substantial deviation/modification”

SUBSTANTIAL DEVIATION AND SIGNIFICANT AMENDMENT/MODIFICATION

A. Substantial Deviation from the 5-Year Plan

- Any change to the Mission Statement;
- 50% deletion from or addition to the goals and objectives as a whole; and
- 50% or more decrease in the quantifiable measurement of any individual goal or objective.

B. Significant Amendment or Modification to the Annual Plan

- 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, and any change inconsistent with the local approved Consolidated Plan, at the discretion of the Executive Director.

11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)
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PHA Certifications of Compliance with PHA Plans and Related R e g u l a t i o n s
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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

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

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

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/TMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

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

Housing Authority of the County of Huntingdon
 PHA Name

PA027
 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 - 20

Annual PHA Plan for Fiscal Years 20 - 20

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

Name of Authorized Official James Bookhamer, III	Title Chairman
Signature 	Date 1/9/2012

Civil Rights Certification

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

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 Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

Housing Authority of the County of Huntingdon

PA027

 PHA Name

 PHA Number/HA Code

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

Name of Authorized Official		James Bookhamer, III		Title		Chairman	
Signature				Date		1/9/2012	

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

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

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

I, F. Edward Geiger, III, Director of the DCED - Center for Community Financing, certify that the Five Year and Annual PHA Plan of the Housing Authority of Huntingdon County is consistent with the Consolidated Plan of the Commonwealth of Pennsylvania prepared pursuant to 24 CFR Part 91.

F. Edward Geiger III

Signature

1/6/2012

Date

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the County of Huntingdon

Program/Activity Receiving Federal Grant Funding

Annual Housing Plan

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

- Chestnut Terrace, Ridge Ave. & Federal Drive, Mount Union, Huntingdon County Pennsylvania, 17066
- Greene Street Village, Greene Street, Mount Union, Huntingdon County, Pennsylvania, 17066
- Crawford Apartments, 711 Church Street, Huntingdon, Huntingdon County, Pennsylvania, 16652
- Taylor Apartments, Division Street, Mount Union, Huntingdon County, Pennsylvania, 17066
- Hartman Village, Division Street, Mount Union, Huntingdon County, Pennsylvania, 17066
- Section 8 Satellite Office, 292 Buchanan Trail, McConnellsburg, Fulton County, Pennsylvania, 17233

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

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

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

Name of Authorized Official James Bookhamer, III	Title Chairman
Signature <i>James Bookhamer, III</i>	Date 1/9/2012

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> other <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: HUNTINGDON COUNTY HOUSING AUTHORITY 100 FEDERAL DRIVE HUNTINGDON PA 17066 Congressional District, if known: 9th	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U. S. Department of Housing & Urban Development	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: James Bookhamer, III Title: Chairman <i>James Bookhamer, III</i> Telephone No.: 814-542-2531 Date: 1/9/2012	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

RESIDENT ADVISORY BOARD COMMENTS

2012 AGENCY PLAN

Resident meetings were held at four locations in 2011. Chestnut Terrace and Hartman Village met together at the WCR center on Federal Drive. Greene Street Village, Taylor Apartments and Crawford Apartment residents met in their respective community rooms. All residents were invited and encouraged to attend the meetings and voice opinions and concerns. The gatherings were designed to address issues relevant to the residents.

Officer Becker from the Mount Union Police Department attended the three Mount Union meetings and talked about the supplemental services contract between the police and the Housing Authority. He encouraged all residents report any problems to the officers when they patrol.

The Housing Authority has on file meeting agendas, attendance records and minutes from each meeting. Resident comments are listed below with some response from management.

Chestnut Terrace/Hartman Village

- Curfew times are not always effective
- Outsiders drive through and offer drugs
- Small children ride bikes late at night
- No parental supervision
- Some tenants drink in the park and leave bottles lying around
- Kids smash bottles in the park
- Kids are urinating on the playground
- "Outsiders" hanging out by clotheslines
- Like the new clotheslines
- Will cameras be installed on all rows of the site (when funds are available)

Greene Street Village

- Tomatoes and flowers disappearing overnight – may be a resident involved
- When will trees be trimmed or removed and underground lines put in? (work does not yet have a start date)

Taylor Apartments

- One police officer sits in his car and never comes in the building when he is on patrol

- Task Force “guys” were more effective than MU police area
- Police don’t always come when called
- Why no railings on walls in the halls?
- Some like the new wall colors, some don’t
- Where is smoking permitted? (On bench at front door area)
- Most said the new card system for the laundry machines is working well

Crawford Apartments

- Will purchase “welcome buckets” for new tenants and a gas grill with Association funds
- No one is willing to “step up and help” at planned activities
- Some want to play bingo again
- Some tenants don’t use their parking spaces, but park on the street
- Can parking spots be transferred when vacated?
- What is allowed on porches and what isn’t?

All comments and suggestions were considered by Housing Authority Management and steps were taken to address safety concerns. Some questions have already been addressed and all will be taken into consideration for future plans.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary		Locality (City/County & State)				Original 5-Year Plan X Revision No: 01	
PHA Name/Number	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	\$363,000.00	\$363,000.00	\$309,000.00	\$365,000.00	\$375,000.00	
C.	Management Improvements	\$22,939.00	\$22,939.00	\$35,000.00	\$19,939.00	\$19,939.00	
D.	PHA-Wide Non-dwelling Structures and Equipment	\$30,000.00	\$30,000.00	\$30,000.00	\$30,000.00	\$30,000.00	
E.	Administration	\$34,000.00	\$34,000.00	\$40,000.00	\$35,000.00	\$25,000.00	
F.	Other	\$35,939.00	\$35,939.00	\$35,939.00			
G.	Operations						
H.	Demolition						
I.	Development						
J.	Capital Fund Financing – Debt Service						
K.	Total CFP Funds						
L.	Total Non-CFP Funds						
M.	Grand Total	\$449,939.00	\$449,939.00	\$449,939.00	\$449,939.00	\$449,939.00	\$449,939.00

Capital Fund Program—Five-Year Action Plan

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

Part II: Supporting Pages – Physical Needs Work Statement(s)

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
See Annual Statement	AMP 1 Pa-27-1 Install porches	100	\$363,000.00	AMP 2 Pa-27-3 Crawford Apartments Boiler upgrade. Install thermostat controls	88	\$145,000.00
				AMP 1 Pa-27-4 Taylor Apartments A/C units	65	\$ 32,000.00
				AMP 1 Pa-27-5 Hartman Village Repave parking lots and upgrade drainage	35	\$ 45,000.00
				AMP 2 Pa-27-2 Greene Street Village Upgrade site lighting	26	\$ 42,000.00
				AMP 1 Pa-27-1 Chestnut Terrace Replace sidewalks	100	\$45,000.00
	Subtotal of Estimated Cost		\$363,000.00	Subtotal of Estimated Cost		\$309,000.00

EXECUTIVE SUMMARY

AGENCY PLAN 2012

The Huntingdon County Housing Authority has prepared its 2012 *Agency Plan* in accordance with the *Quality Housing & Work Responsibility Act of 1998* and the ensuing HUD requirements. The *Agency Plan* brings together resources and policies that will direct the use of funds allocated to the Housing Authority on an annual basis by the U.S. Department of Housing and Urban Development. In preparation for this plan, we have examined our purpose, policies, all aspects of our operation, and have solicited input from employees, residents of the public housing and section 8 communities we serve, human service agencies, local government, and the community at large.

The Authority's Board of Commissioners and staff remain committed to the mission of providing quality, safe, affordable housing, without discrimination, to low and very-low income households in both Huntingdon and Fulton Counties. Our agency will continue to have a close working relationship with all other community agencies to help meet the needs of current and future residents and Housing Choice Voucher participants.

The Capital Fund projects that were recently completed or are currently underway include:

- Interior renovations at Taylor Apartments,
- Exterior renovations at Taylor Apartments,
- Replacement of all underground utility lines at Greene Street Village,
- Upgrade of site lighting at Hartman Village,
- New hot water heaters at Hartman Village,
- New clotheslines at Hartman Village, and
- Furnace room doors at Chestnut Terrace.

It is anticipated that the bulk of the 2012 Capital Fund work will occur at Crawford Apartments, providing a much needed upgrade to the exterior areas of this community.

Administratively, the Huntingdon County Housing Authority continues to examine and revise its policies to reflect an ever-changing world. To this end, the Authority has:

- Developed a written *Preventative Maintenance Plan* and updated its *Maintenance Plan*;
- Entered into an agreement with Mount Union Borough to provide supplemental security services effective March 1, 2011;
- Continued its interagency agreement with the Allegheny County Housing Authority to perform criminal background checks; and
- Adopted a written *Defiant Trespass Policy*.

Functioning in an ever-changing regulatory and economic environment, we continue to serve those families having incomes under 50% of median. The overwhelming majority rely on a fixed source of income such as social security, TANF and pensions. Therefore, we recognize that our resident population consists of families with significant needs. In addition, both Huntingdon and Fulton Counties are rural and offer few employment opportunities for unskilled workers other than part-time, low-wage positions with no benefits or stability. Combined with a limited affordable rental market, this profile provides several challenges to confront.

With this constituency and these demographics in mind, the Housing Authority continues to strive toward its goals and fulfill its mission.

DEFIANT TRESPASS POLICY

SECTION 1 GENERAL BAR POLICY

The Housing Authority of the County of Huntingdon is a body corporate and politic organized and existing under the laws of the Commonwealth of Pennsylvania, and in particular, the Housing Authorities Law, 35 P.S. 1541 et seq. The purpose of the Authority is to provide safe, sanitary, residential accommodations for persons of low and moderate income. Persons residing in Housing Authority property are entitled to the quiet and peaceful enjoyment of their property.

In order to promote and implement this purpose, the Authority is authorized and empowered to adopt rules and regulations pertaining to the safe, quiet and peaceful enjoyment of the property by the residents who live there.

SECTION 2 BARRING CONDUCT

Any person who commits or is alleged to have committed any of the following acts may be barred from all Housing Authority property:

- Any person who commits an act of violence on Housing Authority property, or
- Any person using, possessing, selling or distributing illegally any controlled substance on Housing Authority property, or any person who is engaged in any other type of drug-related activity, or
- Any person who commits an act of destruction, defacement or removal of any part of the premises or project or
- Any person who commits an activity that threatens residents, their families and/or guests right to peaceful enjoyment of their housing community.

SECTION 3 DURATION OF BAR

Any person who commits an act of the nature described in Section 2 shall be barred from all Housing Authority property as follows:

- A. Any person who allegedly commits an act classified under Pennsylvania law as murder of any degree shall be barred for life from entry upon any property of the Housing Authority of the County of Huntingdon.
- B. Any person who allegedly commits an act classified under Pennsylvania law as a felony of the first degree shall be barred from all Authority property for a period of five (5) years.
- C. Any person who allegedly commits any other act of the nature described in Section 2 shall be barred from all Authority property for a period of one year.

SECTION 4 BAR NOTICE

All such acts and alleged acts as defined in Section 2 shall be reported to the Deputy Executive Director of the Authority by an Authority employee within five (5) days of when such an act comes to their attention.

The Authority shall also request and receive police incident reports from the various local police departments any time an incident of the nature in Section 2 occurs on Authority property and the police are summoned to the Authority property or an investigation leads to the incident occurring on Authority property.

Once the alleged act is reported to the Deputy Executive Director, he/she will issue a bar notice to the actor at the actor's last known address.

1. The notice shall be based upon the conduct stated in Section 2.
2. The notice shall state the duration of the bar in accordance with Section 3.
3. The notice shall inform the actor that he/she has the right to appeal the bar notice to the Executive Director of the Authority in accordance with Section 6.

SECTION 5 SERVICE OF NOTICE

The bar notice shall be mailed or hand delivered to the actor. If mailed, the notice shall be sent to his or her last known address by certified mail, return receipt requested. If hand delivered a certificate of service shall be completed by the employee, law enforcement officer or constable delivering the notice to the actor.

If the certified mail is returned to the Authority as unclaimed or refused, the notice shall again be sent to the actor at his/her last known address by regular mail, accompanied by a Certificate of Mailing. Service shall be complete upon receipt of the certified mail return receipt, or upon the mailing of the subsequent regular mail so long as the bar notice via regular mail is not returned to the Authority with the notation of "Addressee Unknown."

The certified mail receipt card and Certificate of Mailing shall be attached to the Authority's copy of the bar notice. If hand delivered, the Certificate of Service shall be attached to the Authority's copy of the bar notice.

A copy of the bar notice shall also be sent to the applicable local police department.

SECTION 6 APPEAL

Any actor receiving a bar notice shall have the privilege of appealing the issuance of the bar notice to the Executive Director of the Authority. The appeal must be filed in writing and state the specific reason or reasons why the actor should not be barred for the violation of the provisions of Section 2 of this policy. The appeal shall not act as a supersedeas of the bar.

The Director shall set a hearing for the appellant within twenty (20) days of the receipt of the appeal and notify the appellant of the same. All appeals shall take place during regular business hours of the Authority and be held in the conference room of the Authority offices at 100 Federal Drive, Mount Union, Pennsylvania 17066 or at such other location so designated in the letter scheduling the appeal.

The Director shall make a decision within five business days following the conclusion of the hearing. Failure of the appellant to appear shall automatically be grounds for dismissal of the appeal. If the bar is reversed the Authority shall notify the local police department of the removal of the bar.

SECTION 7 BAR LOG AND POSTING

The Authority shall maintain a log of all persons barred from Authority property. The log shall be updated on a monthly basis. In addition to the bar log, the Authority shall maintain a file with all bar notices and mail receipts or certificates of service.

The bar log shall be available for Tenant view and inspection in the management office of each residential development owned or managed by the Authority. A Notice as to the existence and location of the Defiant Trespass Log and the duty of each and every tenant to periodically inspect the list to insure that any guest of a tenant is not on the Defiant Trespass List shall be posted in a conspicuous location outside the management office for each housing site. Attached is a copy of the Notice to be posted.

SECTION 8 VIOLATION

Any person violating the provisions of this bar policy shall be immediately reported to the appropriate law enforcement department for arrest and prosecution under 18 Pa.C.S.A. 3503. In addition, staff may also begin the eviction process against tenants who violate the provisions of this Policy as set forth in Section 7.

SECTION 9 ADOPTION – AMENDMENT – RATIFICATION

This policy is hereby officially adopted by the Board of Commissioners of the Housing Authority of the County of Huntingdon at a regular meeting thereof held on the ___ day of _____, 2011, a quorum of the Board being present and a majority voting in favor thereof.

This policy may be amended in writing by majority vote of the Board of Commissioners. All prior acts of barring persons from the Authority property are hereby ratified and confirmed.

(Vice) Chairman

ATTEST:

Secretary

NOTICE

The Housing Authority of the County of Huntingdon has a Defiant Trespass Policy which prohibits certain individuals from entering upon Housing Authority property, including any occupied rental unit or common area.

It is the responsibility of each tenant to insure that your guest and people that come to visit you are not on the Defiant Trespass List. A copy of the list of those individuals who are barred from Housing Authority property is available for tenant inspection in the management office and should be reviewed by each tenant periodically.

You can be evicted for permitting persons on the Defiant Trespass List to visit with you on Authority property.

Adopted effective November 15, 2011

NOTICE TO ALL RESIDENTS

Issued: September 28, 2011

At the Housing Authority Board of Directors meeting on September 20, 2011 the Directors discussed establishing a written defiant trespass policy. Per HUD regulations, the proposed Policy must be provided to all tenants prior to implementation so residents have the opportunity to submit written comments to the Board prior to any final action.

Although staff has issued defiant trespass notices in the past, the Authority does not have a written policy. The proposed policy will provide staff guidance on such matters as

- What is considered barring conduct,
- The duration of the bar,
- The method for serving the notice,
- Appeal procedures, and
- Resident responsibilities.

This Policy if implemented will impact residents in a number of ways. However, perhaps most importantly, the proposed Policy requires staff issue a defiant trespass notice on residents who are evicted because of acts outlined in Section 2. Further, each resident will be responsible for knowing who is on the debarred list (a listing will be posted at each office).

A copy of the proposed Policy is attached. We strongly encourage you to review this Policy. If adopted, violations of the Policy may lead to the Authority initiating actions to terminate occupancy of the offending tenants. All written comments must be submitted to the Administration Office located at 100 Federal Drive, Mount Union PA 17066 no later than Friday, October 28, 2011.

Dawn Sunderland PHM
Executive Director

PREVENTATIVE MAINTENANCE PLAN

FOR

**THE HOUSING AUTHORITY OF
THE COUNTY OF HUNTINGDON**

INTRODUCTION

The Huntingdon County Housing Authority has developed a *Preventative Maintenance Plan* as an addition to and a part of its *Maintenance Plan*, adopted on November 16, 1999 and most recently revised on June 16, 2009. The *Preventative Maintenance Plan* will assist in achieving control of maintenance by reducing resident-generated work orders, speeding up vacancy turnaround, reducing the frequency and severity of breakdowns and service interruptions, and providing information to management regarding property condition and needs. The existing work order system will be used to implement the plan and to determine its timeliness.

The *Preventative Maintenance Plan* identifies the inspections that need to be completed, the method and time of completion. These inspections will include checking, measuring, observing and correcting deficiencies found in major mechanical systems and the exterior of buildings and grounds.

By identifying and accomplishing work that is predictable and repetitive, maintenance staff will be better able to avoid waiting for a crisis to occur before addressing a predictable problem. A successful plan will prevent emergencies, substantially reduce resident-generated work orders, and save future dollars. The preventative maintenance inspections will also establish a record of deterioration which may signal modernization needs that can be systematically planned and scheduled.

CHESTNUT TERRACE

OVERALL SUMMARY OF PROPERTY

WEEKLY

- ❖ **Water Main**

MONTHLY

- ❖ **Lighting**
- ❖ **Asphalt**
- ❖ **Signage**
- ❖ **Fire Alarm**
- ❖ **Stairs and Landings**
- ❖ **Playground Equipment**
- ❖ **Painted Curbs**
- ❖ **Landscaping**
- ❖ **Pest Control**

BI-ANNUALLY

- ❖ **HVAC**
- ❖ **Fences**
- ❖ **Structural**
- ❖ **Handrails**
- ❖ **Storm Drains**
- ❖ **Hot Water Heaters**
- ❖ **Exterior Gas Service Lines**

ANNUALLY

- ❖ **Electrical Systems/Room**
- ❖ **Fire Extinguishers**
- ❖ **Gutters and Downspouts**
- ❖ **Roofing**
- ❖ **Sewer Laterals**
- ❖ **Main Gas System – Per Contract**
- ❖ **Fire Alarm Water Flow Testing (William Rutter Center)**
- ❖ **Smoke Alarms – Per Contract**
- ❖ **Fire Hydrants**
 - **Flush**
 - **Remove Caps & Lubricate**
 - **Condition or Paint**

INDIVIDUAL COMPONENTS CHECKLIST OF CHESTNUT TERRACE SUMMARY

WATER MAIN – Check Weekly

- _____ Check Pressure
- _____ Inspect for leaks

LIGHTING – Check Monthly

- _____ Building lighting
- _____ Emergency lighting
- _____ Common area lighting
- _____ Pedestrian lighting
- _____ Landscaping lighting
- _____ Soffit lighting
- _____ Junction box covers
- _____ Junction boxes
- _____ Sensors

ASPHALT – Check Monthly

- _____ Overall visual condition
- _____ Potholes
- _____ Cracking
- _____ Weed and root encroachment
- _____ Chalking
- _____ Graveling
- _____ Water erosion – Check for origin
- _____ Needs major repair and slurry coat
- _____ Condition of striping markings
- _____ Excess oil from parked vehicles
- _____ Excess wear in trash disposal areas
- _____ Softening of asphalt
- _____ Horizontal integrity

CONCRETE – Check Monthly

- _____ Lifted concrete
- _____ Pock marks
- _____ Cracks
- _____ Chipped steps
- _____ Slippery areas
- _____ Voids – excess spacing
- _____ Metal spacers

- _____ Unevenness
- _____ Expansion joints
- _____ Potential tripping hazards

SIGNAGE – Check Monthly

- _____ General appearance
- _____ Paint – peeling, fading, no longer crisp
- _____ Lettering – missing or partial letters
- _____ Posts – upright, stable
- _____ Building mounted numbers – adherence to surface

STAIRS AND LANDINGS – Check Monthly

- _____ Concrete – Look for cracks
- _____ Railings – Look for loose welds, loose bolts, holes
- _____ Evaluate overall appearance
- _____ Puddling and unevenness
- _____ Excess wear and slippery conditions
- _____ Walkways
- _____ General hazards
- _____ Exterior Handrails
 - Tight fitting
 - Sealant around entry point at ground

PLAYGROUND EQUIPMENT – Check Monthly

- _____ Bolts, nuts and anchors
- _____ Rough edges
- _____ Hinges on moving equipment
- _____ Springs
- _____ Loose posts and equipment members
- _____ Paint quality
- _____ Adjacent concrete and areas for hazards
- _____ Condition of play surface

CLOTHESLINES – Check Bi-Annually

- _____ Tighten or replace as needed
- _____ Check condition of posts

PAINTED CURBS – Check Monthly

- _____ Appearance of paint and condition of curbing

LANDSCAPING – Check Monthly

- _____ Encroachment of vines on buildings
- _____ Encroachment of root systems into buildings and walkways
- _____ Irrigation run-off
- _____ Encroachment of shrubs and trees on buildings
- _____ Tree growth into power lines
- _____ Safety relationship of overall landscape

MAIN GAS SYSTEM – Check Bi-Annually (In addition to Contract)

- _____ Visually check condition of line
- _____ Test for leakage with soap & water or gas test meter
- _____ Test operation of valves
- _____ Service lines and valves

PEST CONTROL

- _____ Per Contract

SMOKE ALARMS – HA Check Every Six Months (In addition to Contract)

- _____ Push test button and check with smoke
- _____ Change batteries
- _____ Mounting
- _____ Connections

FENCES – Check Every Six Months

- _____ Overall appearance
- _____ Structural health
- _____ Rust
- _____ Alignment
- _____ Missing panels

STRUCTURAL MEMBERS – Check Every Six Months

- _____ Overall condition of buildings for signs of structural failure
- _____ Foundations:
 - Cracking
 - Slippage
 - Water encroachment
- _____ Sills:
 - Rot
 - Termites
 - Fungus

_____ **Joists:**

- Rot
- Termites
- Bowing
- Splitting
- Fungus

_____ **Studs:**

- Rot
- Termites
- Bowing Splitting
- Fungus

_____ **Beams:**

- Rot
- Termites
- Bowing
- Splitting
- Fungus

_____ **Masonry Walls:**

- Cracks
- Scaling
- Mortar
- Crumbling

_____ **Exterior Handrails**

- Tight Fitting
- Sealant around entry point at ground

EXTERIOR BUILDING SURFACES – Check Annually

_____ **Check for and remove graffiti**

_____ **Inspect walls for**

- Cracks
- Painting Needs
- Condition of Grout

_____ **Replace and tighten building numbers and signs as required**

_____ **Check condition of and repair as necessary:**

- Entrance Steps
- Handrails
- Porches

_____ **Check exterior lighting fixtures – repair or replace if necessary**

_____ **Check condition and repair as needed:**

- Soffit
- Fascia
- Siding

FIRE EXTINGUISHERS – Check Annually

- _____ Qualified contractor inspects all prior to expiration date
- _____ HA checks gauge and nozzle monthly
- _____ HA marks tag 6 months prior to expiration date

GUTTERS AND DOWNSPOUTS – Check Annually

- _____ Blow out gutter with air or water
- _____ Check joints
- _____ Check straps, nails, seams, elbows
- _____ Ensure gutters are pitched toward downspouts
- _____ Check attachment to building
- _____ Check discharge area for proper drainage away from building
- _____ Remove large debris from roof
- _____ Remove leaves from roof
- _____ Check condition of splash block

STORM DRAINS – Check Annually

- _____ Drainage
- _____ Condition of grates, covers, adjacent concrete or asphalt
- _____ Dirt build-up around drain area that might impede directional flow
- _____ General safety conditions

HOT WATER HEATERS – Check Every Six Months

- _____ Color of gas flame
- _____ Condition of burners
- _____ Condition of access cover
- _____ Gate valve
- _____ Leaks in piping
- _____ Relief valve
- _____ Temperature setting
- _____ Check valve
- _____ Exhaust Piping
- _____ Rust in Water
- _____ Corrosion or rust on tank plate or jacket
- _____ Unusual sounds
- _____ Condition of mechanical room
- _____ Pipe insulation
- _____ Close valve on hot water outlet on top of storage tank
- _____ Open drain valve and allow incoming cold water to flush soft sediment from bottom of storage tank

BOILERS – Check Every Six Months

- _____ Circulation pump
- _____ Check boiler temperature and pressure
- _____ Color of gas flame
- _____ Condition of burner
- _____ Leaks in piping or boiler
- _____ Relief valve
- _____ Exhaust piping
- _____ Rust or corrosion
- _____ Pipe insulation

SEWER LATERALS – Check Annually

- _____ Ensure that clean-out covers are accessible
- _____ Pipe integrity – visible areas
- _____ Use power roter to ream out all laterals from clean-out points

ROOFING – Check Annually

- _____ Visually inspect
- _____ Pay attention to southern/northern exposures for weather-generated problems, peak areas, sagging
- _____ Missing shingles
- _____ Curled shingles
- _____ Dry rot
- _____ Mildew (northern exposure)
- _____ Bare spots
- _____ Decay
- _____ Separations in flashing
- _____ Check around roof openings (chimneys, vent stacks, etc.)
- _____ Be alert for encroachment of trees and abrasion
- _____ Check for clogging of scuppers and drains
- _____ Check condition of metal access box
- _____ Check condition of venting system

WILLIAM C RUTTER COMMUNITY CENTER

KITCHEN

Electric Stoves – Check Annually

- Surface and oven elements
- Check door gaskets
- Oven racks present?
- Oven door operation
- Oven light
- Legible temperature setting on knobs
- Check for electrical shorts
- Drip pans
- Check for potential fire hazards

Electric Refrigerators – Check Annually

- Turn thermostat to highest and lowest setting – Does compressor respond?
- Clean compressor and compressor compartment
- Clean condenser coils
- Check condition of door gasket, adjust or replace if necessary
- Inspect cord and plug
- Inspect interior for wall cracks
- Check operation of fan motor
- Inspect refrigerator bar and brackets
- Check defrost pan
- Check temperature controls
- Inspect interior shelves and supports
- Check light switch and bulbs – replace as needed
- Check crisper tray
- Check kick plate

Cabinets – Check Annually

- Check hardware
- Operation of doors and drawers

MEETING ROOM – Check Annually

- _____ Floor tile condition
- _____ Lights
- _____ Furniture
- _____ Equipment
- _____ Walls
- _____ Switches
- _____ Windows
- _____ Doors

RESTROOMS – Check Annually

- _____ Plumbing
- _____ Electrical
- _____ Fixtures
- _____ Mirrors
- _____ Walls
- _____ Switches
- _____ Windows
- _____ Doors
- _____ Floor tile condition

AIR CONDITIONER/HEATING UNITS – Check Bi-Annually

- _____ Clean and inspect filters
- _____ Check all seals and insulation
- _____ Inspect all wiring and controls
- _____ Clean discharge grills
- _____ Cover motor & control nodule and, using hot water and mild soap, wash:
 - Evaporator coil
 - Condenser coil
 - Base pan
- _____ Clean condensation drain
- _____ Check all fasteners

SPRINKLER TEST – Check Annually

- _____ Per Contract
- _____ Check & mark water pressure

FURNACE – Check Annually

CRAWFORD APARTMENTS

OVERALL SUMMARY OF PROPERTY

MONTHLY

- ❖ Lighting
- ❖ Asphalt
- ❖ Concrete
- ❖ Landscape Drainage
- ❖ Signage
- ❖ Fire Alarm
- ❖ Stairs and Landings
- ❖ Playground Equipment
- ❖ Painted Curbs
- ❖ Landscaping
- ❖ Pest Control

BI-ANNUALLY

- ❖ HVAC
- ❖ Fences
- ❖ Structural
- ❖ Handrails
- ❖ Storm Drains
- ❖ Hot Water Heaters
- ❖ Exterior Gas Service Lines

ANNUALLY

- ❖ Electrical Systems/Room
- ❖ Fire Extinguishers
- ❖ Gutters and Downspouts
- ❖ Roofing
- ❖ Sewer Laterals
- ❖ Main Gas System – Per Contract
- ❖ Fire Alarm Water Flow Testing
- ❖ Smoke Alarms – Per Contract
- ❖ Fire Hydrants
 - Flush
 - Remove Caps & Lubricate
 - Condition or Paint

INDIVIDUAL COMPONENTS CHECKLIST OF CRAWFORD APARTMENTS SUMMARY

LIGHTING – Check Monthly

- Building lighting
- Common area lighting
- Pedestrian lighting
- Landscaping lighting
- Soffit lighting
- Junction box covers
- Junction boxes
- Sensors

ASPHALT – Check Monthly

- Overall visual condition
- Potholes
- Cracking
- Weed and root encroachment
- Chalking
- Graveling
- Water erosion – Check for origin
- Needs major repair and slurry coat
- Condition of striping markings
- Excess oil from parked vehicles
- Excess wear in trash disposal areas
- Softening of asphalt
- Horizontal integrity

CONCRETE – Check Monthly

- Lifted concrete
- Pock marks
- Cracks
- Chipped steps
- Slippery areas
- Voids – excess spacing
- Metal spacers
- Unevenness
- Expansion joints
- Potential tripping hazards

SIGNAGE – Check Monthly

_____ **General appearance**

_____ **Paint**

- **Peeling**
- **Fading**
- **no longer crisp**

_____ **Lettering**

- **Missing letters**
- **Partial letters**

_____ **Posts**

- **Upright**
- **stable**

_____ **Building mounted numbers – adherence to surface**

LANDSCAPE DRAINAGE – Check Monthly

_____ **Proper water flow**

_____ **Obstruction to drain system**

_____ **Integrity of piping and covers**

STAIRS AND LANDINGS – Check Monthly

_____ **Concrete – Look for:**

- **Cracks**
- **loose welds**
- **loose bolts**
- **holes**

_____ **Railings**

_____ **Evaluate overall appearance**

_____ **Puddling and unevenness**

_____ **Excess wear and slippery conditions**

_____ **Walkways**

_____ **General hazards**

PLAYGROUND EQUIPMENT – Check Monthly

_____ **Bolts, nuts and anchors**

_____ **Rough edges**

_____ **Hinges on moving equipment**

_____ **Springs**

_____ **Loose posts and equipment members**

_____ **Paint quality**

_____ **Adjacent concrete and areas for hazards**

_____ **Condition of play surface**

PAINTED CURBS – Check Monthly

- _____ Appearance of paint
- _____ Condition of curbing

LANDSCAPING – Check Monthly

- _____ Encroachment of shrubs and trees on buildings
- _____ Tree growth into power lines
- _____ Safety relationship of overall landscape

MAIN GAS SYSTEM – Check Bi-Annually (In addition to Contract)

- _____ Visually check condition of line
- _____ Test for leakage with soap & water or gas test meter
- _____ Test operation of valves
- _____ Service lines and valves

PEST CONTROL

- _____ Per Contract

SMOKE ALARMS – HA Check Every Six Months (In addition to Contract)

- _____ Push test button and check with smoke
- _____ Change batteries
- _____ Mounting
- _____ Connections

FENCES – Check Every Six Months

- _____ Overall appearance
- _____ Structural health
- _____ Rust
- _____ Alignment
- _____ Missing panels

STRUCTURAL MEMBERS – Check Every Six Months

- _____ Overall condition of buildings for signs of structural failure
- _____ Foundations:
 - Cracking
 - Slippage
 - Water encroachment

_____ **Sills:**

- Rot
- Termites
- Fungus

_____ **Joists:**

- Rot
- Termites
- Bowing
- Splitting
- Fungus

_____ **Studs:**

- Rot
- Termites
- Bowing Splitting
- Fungus

_____ **Beams:**

- Rot
- Termites
- Bowing
- Splitting
- Fungus

_____ **Masonry Walls:**

- Cracks
- Scaling
- Mortar
- Crumbling

_____ **Exterior Handrails**

- Tight Fitting
- Sealant around entry point at ground

EXTERIOR BUILDING SURFACES – Check Annually

_____ **Check for and remove graffiti**

_____ **Inspect walls for**

- Cracks
- Painting Needs
- Condition of Grout

_____ **Replace and tighten building numbers and signs as required**

_____ **Check condition of and repair as necessary:**

- Entrance Steps
- Handrails
- Porches

_____ **Check exterior lighting fixtures – repair or replace if necessary**

_____ Check condition and repair as needed:

- Soffit
- Fascia
- Siding

ELECTRICAL SYSTEMS AND ELECTRICAL ROOMS – Check Annually

- _____ Utility room panels
- _____ Cleanliness of utility room
- _____ Loose wires
- _____ Locks on doors
- _____ Overall integrity and safety
- _____ Circuit breaker identification

FIRE EXTINGUISHERS – Check Annually

- _____ Qualified contractor inspects all prior to expiration date
- _____ HA checks gauge and nozzle monthly, marks tag at six months

GUTTERS AND DOWNSPOUTS – Check Annually

- _____ Blow out gutter with air or water
- _____ Check joints
- _____ Check straps, nails, seams, elbows
- _____ Ensure gutters are pitched toward downspouts
- _____ Check attachment to building
- _____ Check discharge area for proper drainage away from building
- _____ Remove large debris from roof
- _____ Remove leaves from roof
- _____ Check condition of splash block

STORM DRAINS – Check Annually

- _____ Drainage
- _____ Condition of grates, covers, adjacent concrete or asphalt
- _____ Dirt build-up around drain area that might impede directional flow
- _____ General safety conditions

HOT WATER HEATERS – Check Every Six Months

- _____ Color of gas flame
- _____ Condition of burners
- _____ Condition of access cover
- _____ Gate valve
- _____ Leaks in piping
- _____ Relief valve

- _____ Temperature setting
- _____ Check valve
- _____ Exhaust Piping
- _____ Rust in Water
- _____ Corrosion or rust on tank plate or jacket
- _____ Unusual sounds
- _____ Condition of mechanical room
- _____ Pipe insulation
- _____ Close valve on hot water outlet on top of storage tank
- _____ Open drain valve and allow incoming cold water to flush soft sediment from bottom of storage tank

BOILERS – Check Every Six Months

- _____ Circulation pump
- _____ Check boiler temperature and pressure
- _____ Color of gas flame
- _____ Condition of burner
- _____ Leaks in piping or boiler
- _____ Relief valve
- _____ Exhaust piping
- _____ Rust or corrosion
- _____ Pipe insulation

SEWER LATERALS – Check Annually

- _____ Ensure that clean-out covers are accessible
- _____ Pipe integrity – visible areas
- _____ Use power roter to ream out all laterals from clean-out points

ROOFING – Check Annually

- _____ Blisters
- _____ Seams
- _____ Cracks
- _____ Exposed nail heads
- _____ Bare areas
- _____ Ponding
- _____ Curling
- _____ Curling
- _____ Cove areas abutting parapets
- _____ Cracks in parapets
- _____ Check around roof openings (chimneys, vent stacks, etc.)
- _____ Check for clogging of scuppers and drains
- _____ Check condition of metal access box
- _____ Check condition of venting system

COMMON AREAS

ELECTRIC STOVES – Check Annually

- _____ Surface and oven burners
- _____ Oven door operation
- _____ Oven light
- _____ Legible temperature setting on knobs
- _____ Check for electrical shorts
- _____ Drip pans
- _____ Check for potential fire hazards

ELECTRIC REFRIGERATORS – Check Annually

- _____ Turn thermostat to highest and lowest setting – Does compressor respond?
- _____ Clean compressor and compressor compartment
- _____ Clean condenser coils
- _____ Check condition of door gasket, adjust or replace if necessary
- _____ Inspect cord and plug
- _____ Inspect interior for wall cracks
- _____ Check operation of fan motor (clean if necessary)
- _____ Inspect refrigerator bar and brackets
- _____ Check defrost pan
- _____ Check temperature controls
- _____ Inspect interior shelves and supports
- _____ Check light switch and bulbs – replace as needed
- _____ Check crisper tray
- _____ Check kick plate

COMMUNITY BUILDING

- _____ Floor tile condition
- _____ Lights
- _____ Furniture
- _____ Equipment
- _____ Restrooms
 - Plumbing
 - Electrical
 - Fixtures
 - Mirrors
- _____ Walls
- _____ Switches
- _____ HVAC
- _____ Windows
- _____ Doors

AIR CONDITIONER/HEATING UNITS – Check Bi-Annually

- _____ **Clean and inspect filters**
- _____ **Check all seals and insulation**
- _____ **Inspect all wiring and controls**
- _____ **Clean discharge grills**
- _____ **Cover motor & control nodule and, using hot water and mild soap, wash:**
 - **Evaporator coil**
 - **Condenser coil**
 - **Base pan**
- _____ **Clean condensation drain**
- _____ **Check all fasteners**
- _____ **Oil fan motor**

LAUNDRY ROOMS

- _____ **Plumbing connections**
- _____ **Lights**
- _____ **Equipment**
- _____ **Sinks**
- _____ **Floors**
- _____ **Fire Extinguisher**
- _____ **Walls/ceiling**
- _____ **Trash receptacles**
- _____ **Vents – lint free**
- _____ **Countertops**
- _____ **Leaks**

GREENE STREET VILLAGE

OVERALL SUMMARY OF PROPERTY

MONTHLY

- ❖ Lighting
- ❖ Asphalt
- ❖ Concrete
- ❖ Signage
- ❖ Landscape Drainage
- ❖ Fire Alarm
- ❖ Stairs and Landings
- ❖ Porches
- ❖ Painted Curbs
- ❖ Landscaping
- ❖ Pest Control

BI-ANNUALLY

- ❖ HVAC
- ❖ Structural
- ❖ Storm Drains
- ❖ Hot Water Heaters
- ❖ Exterior Gas Service Lines

QUARTERLY

- ❖ Gutters and Downspouts

ANNUALLY

- ❖ Electrical Systems/Room
- ❖ Fire Extinguishers
- ❖ Gutters and Downspouts
- ❖ Roofing
- ❖ Sewer Laterals
- ❖ Main Gas System – Per Contract
- ❖ Fire Alarm Water Flow Testing
- ❖ Smoke Alarms – Per Contract

INDIVIDUAL COMPONENTS CHECKLIST OF GREENE STREET VILLAGE SUMMARY

LIGHTING – Check Monthly

- _____ Building lighting
- _____ Common area lighting
- _____ Junction box covers
- _____ Junction boxes
- _____ Sensors

CONCRETE – Check Monthly

- _____ Lifted concrete
- _____ Pock marks
- _____ Cracks
- _____ Chipped steps
- _____ Slippery areas
- _____ Voids – excess spacing
- _____ Metal spacers
- _____ Unevenness
- _____ Expansion joints
- _____ Potential tripping hazards

SIGNAGE – Check Monthly

- _____ General appearance
- _____ Paint – peeling, fading, no longer crisp
- _____ Lettering – missing or partial letters
- _____ Posts – upright, stable
- _____ Building mounted numbers – adherence to surface

STAIRS AND LANDINGS – Check Monthly

- _____ Concrete – Look for:
 - Cracks - Spalling
 - Holes
- _____ Railings
 - Loose welds
 - Loose bolts
- _____ Exterior Handrails
 - Tight Fitting
 - Sealant around entry point at ground
- _____ Evaluate overall appearance
- _____ Puddling and unevenness

- _____ Excess wear
- _____ Walkways
- _____ General hazards

CLOTHESLINES – Check Bi-Annually

- _____ Tighten or replace as needed
- _____ Check condition of posts

PAINTED CURBS – Check Monthly

- _____ Appearance of paint
- _____ Condition of curbing

LANDSCAPING – Check Monthly

- _____ Encroachment of shrubs and trees on buildings
- _____ Tree growth into power lines
- _____ Safety relationship of overall landscape

MAIN GAS SYSTEM – Check Bi-Annually (In addition to Contract)

- _____ Visually check condition of line
- _____ Test for leakage with soap & water or gas test meter
- _____ Test operation of valves
- _____ Service lines and valves

PEST CONTROL

- _____ Per Contract

SMOKE ALARMS – HA Check Every Six Months

- _____ Push test button and check with smoke
- _____ Change batteries
- _____ Check Mounting
- _____ Test Connections

STRUCTURAL MEMBERS – Check Every Six Months

- _____ Overall condition of buildings for signs of structural failure
- _____ Foundations:
 - Cracking
 - Slippage
 - Water encroachment

- _____ **Sills:**
 - **Rot**
 - **Termites**
 - **Fungus**
- _____ **Joists:**
 - **Rot**
 - **Termites**
 - **Bowing**
 - **Splitting**
 - **Fungus**
- _____ **Studs:**
 - **Rot**
 - **Termites**
 - **Bowing Splitting**
 - **Fungus**
- _____ **Beams:**
 - **Rot**
 - **Termites**
 - **Bowing**
 - **Splitting**
 - **Fungus**
- _____ **Masonry Walls:**
 - **Cracks**
 - **Scaling**
 - **Mortar**
 - **Crumbling**

EXTERIOR BUILDING SURFACES – Check Annually

- _____ **Check for and remove graffiti**
- _____ **Inspect walls for**
 - **Cracks**
 - **Painting Needs**
 - **Condition of Grout**
- _____ **Replace and tighten building numbers and signs as required**
- _____ **Check exterior lighting fixtures – repair or replace if necessary**
- _____ **Check condition and repair as needed:**
 - **Soffit**
 - **Fascia**
 - **Siding**

ELECTRICAL SYSTEMS AND ELECTRICAL ROOMS – Check Annually

- _____ **Utility room panels**
- _____ **Cleanliness of utility room**
- _____ **Loose wires**

- _____ Lock on doors
- _____ Overall integrity and safety
- _____ Circuit breaker identification
- _____ Rust or corrosion

FIRE EXTINGUISHERS – Check Annually

- _____ Qualified contractor inspects all prior to expiration date
- _____ HA checks gauge and nozzle and marks tag monthly

GUTTERS AND DOWNSPOUTS – Check Quarterly

- _____ Blow out gutter with air or water
- _____ Check joints
- _____ Check straps, nails, seams, elbows
- _____ Ensure gutters are pitched toward downspouts
- _____ Check attachment to building
- _____ Check discharge area for proper drainage away from building
- _____ Remove large debris from roof
- _____ Remove leaves from roof
- _____ Check condition of splash block

STORM DRAINS – Check Annually

- _____ Drainage
- _____ Condition of grates, covers, adjacent concrete or asphalt
- _____ Dirt build-up around drain area that might impede directional flow
- _____ General safety conditions

SEWER LATERALS – Check Annually

- _____ Ensure that clean-out covers are accessible
- _____ Pipe integrity – visible areas
- _____ Use power roter to ream out all laterals from clean-out points

ROOFING – Check Annually

- _____ Visually inspect
- _____ Pay attention to southern/northern exposures for weather-generated problems, peak areas, sagging
- _____ Missing shingles
- _____ Curled shingles
- _____ Dry rot
- _____ Mildew
- _____ Bare spots
- _____ Decay

- _____ Separations in flashing
- _____ Check around roof openings (chimneys, vent stacks, etc.)
- _____ Be alert for encroachment of trees and abrasion
- _____ Check condition of drip edge
- _____ Check condition of venting system

COMMUNITY BUILDING

ELECTRIC STOVES – Check Annually

- _____ Surface and oven burners
- _____ Oven door operation
- _____ Oven light
- _____ Legible temperature setting on knobs
- _____ Check for electrical shorts
- _____ Drip pans
- _____ Check for potential fire hazards
- _____ Check door gaskets

ELECTRIC REFRIGERATORS – Check Annually

- _____ Turn thermostat to highest and lowest setting – Does compressor respond?
- _____ Clean compressor and compressor compartment
- _____ Clean condenser coils
- _____ Check condition of door gasket, adjust or replace if necessary
- _____ Inspect cord and plug
- _____ Inspect interior for wall cracks
- _____ Check operation of fan motor (clean if necessary)
- _____ Inspect refrigerator bar and brackets
- _____ Check defrost pan
- _____ Check temperature controls
- _____ Inspect interior shelves and supports
- _____ Check light switch and bulbs – replace as needed
- _____ Check crisper tray
- _____ Check kick plate

MEETING ROOM

- _____ Floor tile condition
- _____ Lights
- _____ Emergency lighting
- _____ Windows and screens
- _____ Automatic door operation and seals
- _____ Furniture
- _____ Equipment
- _____ Restrooms
 - Plumbing
 - Electrical
 - Fixtures
 - Mirrors

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

Part I: Summary		Grant Type and Number	PA0280927501-09	Federal FY of Grant:			
PHA Name:		Capital Fund Program Grant No:		FFY of Grant Approval:			
Huntingdon County Housing Authority		Replacement Housing Factor Grant No:		2009			
Date of CFFP:							
Type of Grant		<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending					
<input type="checkbox"/> Reserves for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 004) <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Original	Revised 2	Obligated	Total Actual Cost 1	Expended	
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	\$44,109.00	\$3,036.80	\$3,036.80	\$3,036.80	\$0.00	
3	1408 Management Improvements	\$52,500.00	\$34,471.00	\$34,471.00	\$34,471.00	\$34,471.00	
4	1410 Administration (may not exceed 10% of line 21)	\$37,500.00	\$23,450.64	\$23,450.64	\$23,450.64	\$16,051.48	
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
7	1430 Fees and Costs	\$42,500.00	\$40,655.00	\$40,655.00	\$40,655.00	\$34,808.00	
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
9	1450 Site Improvement	\$180,800.00	\$445,032.56	\$445,032.56	\$445,032.56	\$10,144.56	
10	1460 Dwelling Structures	\$34,000.00	\$0.00	\$0.00	\$0.00	\$0.00	
11	1465.1 Dwelling Equipment—Nonexpendable	\$157,000.00	\$0.00	\$0.00	\$0.00	\$0.00	
12	1470 Non-dwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
13	1475 Non-dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
15	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
16	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
17	1499 Development Activities ⁴	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
18	1501 Collateralization of Debt Service paid by PHA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
18a	9000 Collateralization of Debt Service paid Via System of Direct Payment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
19	1502 Contingency (may not exceed 8% of line 2-19)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
21	Amount of Annual Grant: (sum of lines 2-19)	\$548,409.00	\$546,646.00	\$546,646.00	\$546,646.00	\$95,475.04	
22	Contingency Account Compared to Construction Accounts						
23	Amount of line 20 Related to LBP Activities						
24	Amount of line 20 Related to Section 504 Activities						
25	Amount of line 20 Related to Security – Soft Costs						
26	Amount of Line 20 related to Security-- Hard Costs						
27	Amount of line 20 Related to Energy Conservation Measures						
Signature of Executive Director		Date		Signature of Public Housing Director			Date
Dawn Sanduland		1-10-12					

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

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

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

Part II: Supporting Pages		Grant Type and Number PA0289027501-09		Federal FFY of Grant: 2009				
PHA Name: Huntingdon County Housing Authority		Capital Fund Program Grant No: Replacement Housing Factor Grant No:		CFEP (Yes/No):				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised1	Funds Obligated2	Funds Expended2	
AMP 1 PA-27-1	Operations	1406	1	\$ 44,109.00	\$ 3,036.80	\$ 3,036.80	\$ -	
			Subtotal	\$ 44,109.00	\$ 3,036.80	\$ 3,036.80	\$ -	
AMP 1 PA-27-2	Replace underground utilities	1450	26	\$ 164,000.00	\$ -			Moved to 2011 CFPP
AMP 1 PA-27-5	Replace clothes lines--Force Account	1450	35	\$ 16,800.00	\$ 10,144.56	\$ 10,144.56	\$ 10,144.56	Item Complete
AMP 1 PA-27-4	Landscaping, sidewalks, exterior renovations	1450	65	\$ -	\$ 434,888.00	\$ 434,888.00	\$ -	New work item.
AMP 1 PA-27-5	Upgrade exterior lighting	1450	35	\$ -	\$ -			New work item.
			Subtotal	\$ 180,800.00	\$ 445,032.56	\$ 445,032.56	\$ 10,144.56	
AMP 1 PA-27-3	Replace Toilets	1460	88	\$ 34,000.00	\$ -			AARA Funded
			Subtotal	\$ 34,000.00	\$ -			
PHA-WIDE	All-sites--Replace refrigerators	1465.1	314	\$ 157,000.00	\$ -			AARA Funded
			Subtotal	\$ 157,000.00	\$ -			
PHA-WIDE	Cooperative Agreement with local police for extra patrols and drug enforcement.	1408	1	\$ 35,000.00	\$ 12,980.00	\$ 12,980.00	\$ 12,980.00	
PHA-WIDE	Training	1408	1	\$ 7,500.00	\$ 2,500.00	\$ 2,500.00	\$ 2,500.00	
PHA-WIDE	Computer Upgrade	1408	1	\$ 10,000.00	\$ 18,991.00	\$ 18,991.00	\$ 18,991.00	
			Subtotal	\$ 52,500.00	\$ 34,471.00	\$ 34,471.00	\$ 34,471.00	

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

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

Part I: Summary

PHA Name: **Huntingdon County Housing Authority** Grant Type and Number: **PA0280927501-10**
 Authority: **Replacement of Housing Factor Grant No:** **002**) **2**
 Performance and Evaluation Report for Period Ending: **Date of CFFP:** **Final Performance and Evaluation Report**

Type of Grant:

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised	
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) ³	\$3,023.00	\$10,880.16	
3	1408 Management Improvements	\$52,500.00	\$50,450.00	\$37,833.96
4	1410 Administration (may not exceed 10% of line 21)	\$31,500.00	\$49,974.28	\$46,274.70
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs	\$42,500.00	\$40,097.32	\$30,534.06
8	1440 Site Acquisition			
9	1450 Site Improvement		\$69,888.00	
10	1460 Dwelling Structures	\$317,000.00	\$106,302.24	\$71,406.63
11	1465.1 Dwelling Equipment--Nonexpendable			
12	1470 Non-dwelling Structures	\$95,000.00	\$213,931.00	\$86,436.00
13	1475 Non-dwelling Equipment			
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities			
18	1501 Collateralization of Debt Service paid by PHA			
18a	9000 Collateralization of Debt Service paid Via System of Direct Payment			
19	1502 Contingency (may not exceed 8% of line 20)			
21	Amount of Annual Grant: (sum of lines 2-19)	\$541,523.00	\$541,523.00	\$272,485.35
22	Contingency Account Compared to Construction Accounts			
23	Amount of line 20 Related to LBP Activities			
24	Amount of line 20 Related to Section 504 Activities			
25	Amount of line 20 Related to Security--Soft Costs			
26	Amount of Line 20 related to Security-- Hard Costs			
27	Amount of line 20 Related to Energy Conservation Measures			

Signature of Executive Director: *[Signature]* Date: **1-10-12**
 Signature of Public Housing Director: _____ Date: _____

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

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

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

Part II: Supporting Pages											
PHA Name:		Grant Type and Number		PA0280927501-10		Federal FFY of Grant:		2010			
Huntingdon County Housing Authority		Capital Fund Program Grant No:		Replacement Housing Factor Grant No:		CFPP (Yes/No):					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work			
				Original	Revised	Funds Obligated ²	Funds Expended ²				
AMP 1 Chestnut Terrace PA-27-1	Operations	1406	1	\$ 3,023.00	\$ 10,880.16						
			SUBTOTAL	\$ 3,023.00	\$ 10,880.16						
AMP 1 Chestnut Terrace PA-27-1	Replace gutters & downspouts	1460	100	\$ 250,000.00	\$ 63,500.00	\$ 63,500.00	\$ 50,085.00				
AMP 1 Hartman Village PA-27-5	Replace water heaters--Force Account	1460	35	\$ 25,000.00	\$ 35,000.00	\$ 21,468.00	\$ 13,519.39				
AMP 1 Chestnut Terrace PA-27-1	Replace utility room doors--Force Account	1460	100	\$ 42,000.00	\$ 7,802.24	\$ 7,802.24	\$ 7,802.24				
			SUBTOTAL	\$ 317,000.00	\$ 106,302.24	\$ 92,770.24	\$ 71,406.63				
AMP 1 Taylor Apartments PA-27-4	Upgrade common areas, hallways, building floors and light fixtures	1470	65	\$ 95,000.00	\$ 213,931.00	\$ 213,931.00	\$ 86,436.00				
			SUBTOTAL	\$ 95,000.00	\$ 213,931.00	\$ 213,931.00	\$ 86,436.00				
PHA-WIDE	Cooperative Agreement with local police for extra patrols and drug enforcement	1408	1	\$ 35,000.00	\$ 25,000.00	\$ 25,000.00	\$ 21,390.96				
PHA-WIDE	Training	1408	1	\$ 7,500.00	\$ 3,000.00	\$ 3,000.00	\$ 3,000.00				
PHA-WIDE	Computer Equipment, Upgrade	1408	1	\$ 10,000.00	\$ 22,450.00	\$ 19,500.00	\$ 13,443.00				
			SUBTOTAL	\$ 52,500.00	\$ 50,450.00	\$ 47,500.00	\$ 37,833.96				

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

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

Part I: Summary		Grant Type and Number	PA0280927501-11	Federal FY of Grant:
PHA Name:		Capital Fund Program Grant No:		FFY of Grant Approval:
Huntingdon County Housing Authority		Replacement Housing Factor Grant No:		2011
Date of CFFP:				
Type of Grant				
<input type="checkbox"/> Original Annual Statement		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 01)		
<input type="checkbox"/> Performance and Evaluation Report for Period Ending		<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Original	Revised 2	Total Actual Cost 1
1	Total non-CFP Funds			Obligated
2	1406 Operations (may not exceed 20% of line 21) ³	\$9,051.00	\$9,051.00	Expended
3	1408 Management Improvements	\$15,000.00	\$28,500.00	
4	1410 Administration (may not exceed 10% of line 21)	\$26,000.00	\$26,000.00	
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs	\$15,000.00	\$15,000.00	
8	1440 Site Acquisition			
9	1450 Site Improvement	\$384,888.00	\$371,388.00	\$309,888.00
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 4			
18	1501 Collateralization of Debt Service paid by PHA			
18a	9000 Collateralization of Debt Service paid Via System of Direct Payment			
19	1502 Contingency (may not exceed 8% of line 20)			
21	Amount of Annual Grant: (sum of lines 2-19)	\$449,939.00	\$449,939.00	\$309,888.00
22	Contingency Account Compared to Construction Accounts			
23	Amount of line 20 Related to LBP Activities			
24	Amount of line 20 Related to Section 504 Activities			
25	Amount of line 20 Related to Security --Soft Costs			
26	Amount of Line 20 related to Security-- Hard Costs			
27	Amount of line 20 Related to Energy Conservation Measures			
Signature of Executive Director		Signature of Public Housing Director		Date
<i>Jean Smedley</i>				1-11-12

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

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

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

Part II: Supporting Pages											
PHA Name: Huntingdon County Housing Authority		Grant Type and Number Capital Fund Program Grant No: PA0280927501-11 CFFP (Yes/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	Funds Obligated	Funds Expended				
AMP 1 Chestnut Terrace PA-27-1	Operations	1460	1	\$ 9,051.00	\$ 9,051.00						
			Subtotal	\$ 9,051.00	\$ 9,051.00						
AMP 1 Greene Street PA-27-2	Replace underground utility lines and install additional handicapped sidewalks	1450	26	\$ 309,888.00	\$ 309,888.00	\$ 309,888.00					
AMP 2 Crawford Apartments PA-27-3	Replace concrete walks/patios	1450	88	\$ 75,000.00	\$ 61,500.00						
			Subtotal	\$ 384,888.00	\$ 371,388.00	\$ 309,888.00					
AMP 1 - MU Sites	Cooperative Agreement with local police for extra patrols and drug enforcement	1408	1	\$ 15,000.00	\$ 15,000.00						
PHA-WIDE	Training	1408	1	\$ -	\$ 3,500.00						
PHA-WIDE	Computer Upgrade	1408	1	\$ -	\$ 10,000.00						
			Subtotal	\$ 15,000.00	\$ 28,500.00						
PHA-WIDE	Administration	1410	1	\$ 26,000.00	\$ 26,000.00						
			Subtotal	\$ 26,000.00	\$ 26,000.00						
PHA-WIDE	Fees and Costs	1430	1	\$ 15,000.00	\$ 15,000.00						
			Subtotal	\$ 15,000.00	\$ 15,000.00						
			Grand total	\$ 449,939.00	\$ 449,939.00	\$ 309,888.00					

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

2 To be completed for the Performance and Evaluation Report.

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
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Part I: Summary		FFY of Grant: 2012	
PHA Name: Huntingdon County Housing Authority	Grant Type and Number Capital Fund Program Grant No: PA0280927501-12 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ² Obligated Expended
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)	\$ 449,939.00	
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 <i>Sam Sanduland</i>		Date 01/10/2012	Signature of Public Housing Director Date

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

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

Part I: Summary		Grant Type and Number		FFY of Grant: 2012	
PHA Name: Housing Authority of the County of Huntington		Capital Fund Program Grant No: PA0280927501-12		FFY of Grant Approval:	
Date of CFFP:		Replacement Housing Factor Grant No:			
Type of Grant	Original	Revised ²	Total Estimated Cost	Obligated	Total Actual Cost ¹
<input checked="" type="checkbox"/> Original Annual Statement					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:					
<input type="checkbox"/> Summary by Development Account					
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements	\$ 30,000.00			
4	1410 Administration (may not exceed 10% of line 21)	\$ 35,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition	\$ 30,000.00			
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 354,939.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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