

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Tioga County Housing Authority</u> PHA Code: <u>PA050-01</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2012</u>				
<b>2.0</b>	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>458</u> Number of HCV units: <u>213</u>				
<b>3.0</b>	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
<b>5.0</b>	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. N/A				
<b>5.1</b>	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:  <b>The mission of the Tioga County Housing Authority is the same as that of the Department of Housing and Urban Development; To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</b>				

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.

- Expand the supply of assisted housing through reduced vacancies. Goal 1%
- Leverage private or other public funds to create additional housing opportunities through Bradford/Tioga Leased Housing Corporation. Currently constructing an 11 unit building of subsidized housing.
- Improve the quality of assisted housing by improving public housing management. Goal 95%
- Improve Voucher management. Goal 95%
- Increase customer satisfaction. Obtain 10 pts. On PHA score.
- Provide additional support services to tenants for housekeeping and personal care. Currently allow 1 and ½ hours of housekeeping for each elderly, handicapped or disabled resident.
- Renovate and modernize public housing units with continued upgrades of 448 Public Housing Units.
- Increase assisted housing choices. Provide information at interview.
- Conduct outreach efforts to landlords.
- Refer qualified tenants to Trehab 1<sup>st</sup> Time Homebuyers Program.
- Improve community quality of life and economic vitality by implementing public housing security improvements such as lock systems and security camera.
- Promote self-sufficiency and asset development of families and individuals. Implemented a preference for working families as well as applied for FSS Grant monies.
- Refer tenants to successful New Choices and Career Link Programs for job training.
- Increase funding for home support services contract and PA waiver program.
- Participate with Nursing Home Transition Team with Area Agency on Aging.
- Continue to co-operate with Endless Mountain Transportation Agency.
- Ensure equal opportunity in housing for all Americans by advertising to include equal housing opportunity statement.
- Authority has achieved compliances with all Federal ADA/504 Requirements.
- Authority will continue to go beyond federal requirements by providing additional reasonable accommodations to applicants/tenants who make requests or who are determined to be in need of reasonable accommodations as a result of annual housing inspections of apartments.
- Continue to cooperate with the Center for Independent living in implementing specific project recommendations.
- \* Enacted a tenant selection and assignment plan which includes a housing preference for victims of domestic violence.

5.2	<p><b>Goals and Objectives.</b> 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.</p> <ul style="list-style-type: none"> <li>• <b>Expand the supply of assisted housing through reduced vacancies. Goal 1%</b></li> <li>• <b>Leverage private or other public funds to create additional housing opportunities through Bradford/Tioga Leased Housing Corporation. Currently constructing an 11 unit building of subsidized housing.</b></li> <li>• <b>Improve the quality of assisted housing by improving public housing management. Goal 95%</b></li> <li>• <b>Improve Voucher management. Goal 95%</b></li> <li>• <b>Increase customer satisfaction. Obtain 10 pts. On PHA score.</b></li> <li>• <b>Provide additional support services to tenants for housekeeping and personal care. Currently allow 1 and ½ hours of housekeeping for each elderly, handicapped or disabled resident.</b></li> <li>• <b>Renovate and modernize public housing units with continued upgrades of 448 Public Housing Units.</b></li> <li>• <b>Increase assisted housing choices. Provide information at interview.</b></li> <li>• <b>Conduct outreach efforts to landlords.</b></li> <li>• <b>Refer qualified tenants to Trehab 1<sup>st</sup> Time Homebuyers Program.</b></li> <li>• <b>Improve community quality of life and economic vitality by implementing public housing security improvements such as lock systems and security camera.</b></li> <li>• <b>Promote self-sufficiency and asset development of families and individuals. Implemented a preference for working families as well as applied for FSS Grant monies.</b></li> <li>• <b>Refer tenants to successful New Choices and Career Link Programs for job training.</b></li> <li>• <b>Increase funding for home support services contract and PA waiver program.</b></li> <li>• <b>Participate with Nursing Home Transition Team with Area Agency on Aging.</b></li> <li>• <b>Continue to co-operate with Endless Mountain Transportation Agency.</b></li> <li>• <b>Ensure equal opportunity in housing for all Americans by advertising to include equal housing opportunity statement.</b></li> <li>• <b>Authority has achieved compliances with all Federal ADA/504 Requirements.</b></li> <li>• <b>Authority will continue to go beyond federal requirements by providing additional reasonable accommodations to applicants/tenants who make requests or who are determined to be in need of reasonable accommodations as a result of annual housing inspections of apartments.</b></li> <li>• <b>Continue to cooperate with the Center for Independent living in implementing specific project recommendations.</b></li> </ul>
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6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ol style="list-style-type: none"> <li>1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. There have been no changes to the elements of the previous Annual Plan</li> <li>2. Financial Resources. There have been no changes to the elements of the previous Annual Plan. However, funding in all categories has been reduced due to Federal budget constraints.</li> <li>3. Rent Determination. There have been no changes to the elements of the previous Annual Plan</li> <li>4. Operation and Management. There have been no changes to the elements of the previous Annual Plan</li> <li>5. Grievance Procedures. There have been no changes to the elements of the previous Annual Plan</li> <li>6. Designated Housing for Elderly and Disabled Families. There have been no changes to the elements of the previous Annual Plan</li> <li>7. Community Service and Self-Sufficiency. There have been no changes to the elements of the previous Annual Plan</li> <li>8. Safety and Crime Prevention. There have been no changes to the elements of the previous Annual Plan</li> <li>9. Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing. There have been no changes to the elements of the previous Annual Plan</li> <li>10. Civil Rights Certification. There have been no changes to the elements of the previous Annual Plan</li> <li>11. Fiscal Year Audit. There have been no changes to the elements of the previous Annual Plan. There were no findings in the latest audit.</li> <li>12. Asset Management. There have been no changes to the elements of the previous Annual Plan</li> <li>13. Violence Against Women Act (VAWA). There have been no changes to the elements of the previous Annual Plan</li> </ol> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p><b>The 5-year Plan and Annual PHA Plan is available for Public View at the Central Office as well as the Authority website <a href="http://www.tbhra.com">www.tbhra.com</a></b></p>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p> <p style="text-align: center;"><b>SEE ATTACHED</b></p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p style="text-align: center;"><b>SEE ATTACHED</b></p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p style="text-align: center;"><b>SEE ATTACHED</b></p>

8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  X Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p> <p style="text-align: center;"><b>HUD'S APPROVAL ON FILE</b></p>
9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p style="text-align: center;"><b>STATISTICS ON FILE</b></p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>Maximize the number of affordable units available to the Tioga County Housing Authority within it's current resources by:</b></p> <ul style="list-style-type: none"> <li>• <b>Employ effective maintenance and management policies to maximize the number of public housing units off-line.</b></li> <li>• <b>Reduce turnover for vacated public housing units.</b></li> <li>• <b>Maintain or increase section 8 lease-up rate by establishing payment standards that will enable families to rent throughout the jurisdiction.</b></li> <li>• <b>Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size.</b></li> <li>• <b>Maintain or increase Section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program.</b></li> <li>• <b>Increase the number of affordable housing units by applying for additional section 8 vouchers should they become available.</b></li> <li>• <b>Implement Project Based Housing as part of our Admissions and Occupancy Policy.</b></li> <li>• <b>Leverage affordable housing resources in the community through creation of mixed-finance housing.</b></li> <li>• <b>Employee admissions preference aimed at families who are working.</b></li> <li>• <b>Adopt rent policies to support and encourage work.</b></li> <li>• <b>Carry out modifications needed in public housing based on the section 504 needs assessment for Public Housing.</b></li> <li>• <b>Affirmatively market to local non-profit agencies that assist families with disabilities.</b></li> <li>• <b>Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units.</b></li> </ul>

10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p><b><u>Goal – Leverage private or other public funds to create additional housing opportunities.</u></b></p> <p><b>Progress:</b> The Authority continues to explore opportunities for additional public &amp; private resources</p> <p><b><u>Goal – Acquire or build units or developments.</u></b></p> <p><b>Progress:</b> The Authority through its non profit affiliate is in the process of constructing and placed in service tax credits for 11 units of affordable housing for the elderly.</p> <p><b><u>Goal – Housing Choice Vouchers have been set aside for use with the Area Agency on Aging nursing home transition program.</u></b></p> <p><b>Progress:</b> One Voucher is being utilized currently through this program. The Authority is still working with AAA to process more.</p> <p><b><u>Goal – The Authority has partnered with the TreHab Agency to process applications for a number of their newly developed mixed housing projects.</u></b></p> <p><b>Progress:</b> The Authority has several section 8 clients residing in the newly constructed Oak Ridge Townhouses operated by TreHab Agency.</p> <p><b><u>Goal – To assist residents with transportation throughout the County and surrounding areas as needed for medical or other appointments.</u></b></p> <p><b>Progress:</b> The Authority pays a monthly stipend to the Endless Mountain Transportation Association on behalf of our residents to allow for free transportation.</p> <p><b><u>Goal – Assist residents with housekeeping needs to allow for longer independent living.</u></b></p> <p><b>Progress:</b> The Authority currently pays a homemaker service for 11/2 hours of housekeeping service every other week for residents that are elderly, handicapped or disabled</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>A substantial deviation or significant amendment or modification, which requires public notice and comment, will be required if a change is made to the Plan, or any component thereof, related to the following:</b></p> <ul style="list-style-type: none"> <li>• Demolition or conversion of units;</li> <li>• Implementation of a homeownership program;</li> <li>• Additions of Non-Emergency work items with an estimated cost greater than 50% of the Authority's annual Comprehensive</li> </ul> <p><b>Grant (items not included in the current Annual Statement or 5-Year Action Plan.</b></p> <p><b>Changes made to the Plan, or any component thereof, which do not relate to the above-mentioned issues will not be considered substantial or significant and will not require public notice and comment.</b></p>
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11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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# Attachment A

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b>  Tioga County Housing Authority		<b>Grant Type and Number:</b> Capital Fund Program Grant No.: <b>PA26P05050109</b> Replacement Housing Factor Grant No: Date of CFFP: _____			<b>FFY of Grant:</b> 2009 <b>FFY of Grant Approval:</b> _____
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	8,908.00	25,855.00	25,855.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	62,945.00	62,945.00	62,945.00	62,945.00
5	1411 Audit	1,000.00	1,000.00	1,000.00	1,000.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	40,000.00	29,046.00	29,046.00	27,972.58
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	20,000.00	33,362.00	33,362.00	33,361.55
10	1460 Dwelling Structures	429,600.00	458,647.00	458,647.00	354,389.24
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	45,000.00	3,458.00	3,458.00	3,458.45
13	1475 Non-dwelling Equipment	22,000.00	15,140.00	15,140.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	629,453.00	629,453.00	629,453.00	483,126.82
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	15,000.00	136,698.00	136,698.00	136,698.00
25	Amount of line 20 Related to Energy Conservation Measures	173,630.00	96,479.00	96,479.00	96,479.00

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

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

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

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

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

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

<b>Part I: Summary</b>			
PHA Name:  Tioga County Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: PA26P05050109      Replacement Housing Factor Grant No: Date of CFFP: _____	
		FFY of Grant: 2009 FFY of Grant Approval: _____	
Type of Grant			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual statement (revision no: _____)	
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011		<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	
		Original	Revised <sup>2</sup>
		Total Actual Cost <sup>1</sup>	
		Obligated	Expended
Signature of Executive Director <i>Kelley Cewitte</i>		Signature of Public Housing Director	
Date 12/31/2011		Date	

**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  
Expires 4/30/2011

<b>Part II: Supporting Pages</b>									
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: PA26P05050109 Replacement Housing Factor Grant No.:				CFPP (Yes/No): No		Federal FY of Grant: 2009
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised 2	Funds Obligated	Funds Expended		
<b>AMP 1</b>									
PA 50-1	Generator	1460	1	16,000.00	12,500.00	12,500.00	12,500.00	A: 7/10 - C: 9/11	
PA 50-2	Security System	1460	1	10,000.00	36,662.26	36,662.26	36,662.26	A: 7/10 - C: 12/10	
PA 50-4	Security System	1460	1	5,000.00	31,732.98	31,732.98	31,732.98	A: 7/10 - C: 12/10	
PA 50-4	Roof Replacement A & B Buildings	1460	11320 sq ft	96,630.00	81,339.00	81,339.00	81,339.00	A: 7/10 - C: 2/11	
<b>AMP 1 Total</b>				<b>127,630.00</b>	<b>162,234.24</b>	<b>162,234.24</b>	<b>162,234.24</b>		
<b>AMP 2</b>									
PA 50-3	Hallway Flooring Replacement	1460	5000 sq ft	50,000.00	32,034.00	32,034.00	32,034.00	A: 7/10 - C: 2/11	
PA 50-3	Kitchen Upgrades Phase I	1460	64 Units	80,000.00	104,928.00	104,928.00	104,928.00	A: 7/10 - C: 2/11	
PA 50-3	Lighting Upgrades	1460	150	10,000.00	31,950.00	31,950.00	31,950.00	A: 7/10 - C: 9/11	
<b>AMP 2 Total</b>				<b>140,000.00</b>	<b>168,912.00</b>	<b>168,912.00</b>	<b>168,912.00</b>		
<b>AMP 3</b>									
PA 50-6	Fire Alarm System Replacement	1460	1	55,000.00	73,800.00	73,800.00	73,800.00	A: 7/10 - C: 9/11	
PA 50-6	Efficiency Conversion	1460	2	30,970.00	0.00	0.00	0.00	Deleted	
PA 50-6	Flooring in Office Building	1470	1200 sq ft	5,000.00	3,458.45	3,458.45	3,458.45	A: 7/10 - C: 2/11	
PA 50-6	Tenant Storage / Garage	1470	1	40,000.00	0.00	0.00	0.00	Moved to 2012	
PA 50-7	Flooring in Bathrooms	1460	600 sq ft	6,000.00	6,402.00	6,402.00	6,402.00	A: 7/10 - C: 2/11	
PA 50-7	Concrete Pads	1450	1500 sq ft	15,000.00	10,930.70	10,930.70	10,930.70	A: 7/10 - C: 2/11	
PA 50-7	Fence in Ball Field, Private for Tenant Use Authority Owned - On Family Project Property	1475	1	15,000.00	0.00	0.00	0.00	Deleted	

\* To be completed for the Performance and Evaluation Report or a revised Annual Statement  
 † To be completed for the Performance and Evaluation Report.

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>PA26P05050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant: 2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised 2	Funds Obligated	Funds Expended	
<b>AMP 3 Cont.</b>								
PA 50-9	Air Make Up System	1460	1	60,000.00	0.00	0.00	0.00	Moved to 2012
PA 50-10	Cable TV Service Upgrade	1460	20	10,000.00	6,100.00	6,100.00	6,100.00	A: 7/10 - C: 9/11
PA 50-10	Siding Replacement	1460		0.00	42,296.00	42,296.00	42,296.00	From FYE 2013
PA 50-11	Site Work - Repair Sidewalk & Concrete Pads	1450	500 sq ft	5,000.00	22,430.85	22,430.85	22,430.85	A: 7/10 - C: 2/11
PA 50-12	Furnace Upgrades & Add A/C in Common Area	1475	1	7,000.00	14,590.00	14,590.00	14,590.00	A: 7/10 - C: 5/11
	HVAC Electric	1475		550.00	550.00	550.00	550.00	A: 7/10 - C: 9/11
	<b>AMP 3 Total</b>			<b>249,520.00</b>	<b>180,558.00</b>	<b>180,558.00</b>	<b>180,558.00</b>	
PHA Wide	Operations	1406		8,358.00	24,895.18	24,895.18		
PHA Wide	Administration	1410		62,945.00	62,945.00	62,945.00	62,945.00	C: 6/10
	1410 Salaries: Executive Director, Dep. Director Controller, Physical Development Coordinator 3 Accounting Clerks, 3 Maintenance Foreman.							
PHA Wide	Audit	1411		1,000.00	1,000.00	1,000.00	1,000.00	
PHA Wide	Fees & Costs	1430		40,000.00	28,908.58	28,908.58	28,908.58	A: 11/09 - C: 3/11
	<b>PHA Wide Total</b>			<b>112,303.00</b>	<b>117,748.76</b>	<b>117,748.76</b>	<b>92,853.58</b>	
	<b>Capital Grant Total</b>			<b>629,453.00</b>	<b>629,453.00</b>	<b>629,453.00</b>	<b>604,557.82</b>	

<sup>7</sup> To be completed for the Performance and Evaluation Report or a revised Annual Statement  
<sup>8</sup> To be completed for the Performance and Evaluation Report.

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Tioga County Housing Authority					Federal FFY of Grant: 2009
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide Activities					
PA 50-1	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-2	9/14/2011	9/30/2010	9/14/2013	12/2/2010	
PA 50-3	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-4	9/14/2011	9/30/2010	9/14/2013	2/16/2011	
PA 50-5					No Work Items
PA 50-6	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-7	9/14/2011	9/30/2010	9/14/2013	2/16/2011	
PA 50-8					No Work Items
PA 50-9					No Work Items
PA 50-10	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-11	9/14/2011	9/30/2010	9/14/2013	2/16/2011	
PA 50-12	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PHA WIDE	9/14/2011	12/31/2010	9/14/2013		

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

## Attachment B

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

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

<b>Part I: Summary</b>		<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	
<b>PHA Name:</b>  Tioga County Housing Authority		Capital Fund Program Grant No.: PA26P05050110		Replacement Housing Factor Grant No:	
		Date of CFFP: _____		FFY of Grant Approval: _____	
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual statement (revision no: _____)	
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	14,139.00	75,055.00	75,055.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	62,900.00	62,458.00	62,458.00	62,458.00
5	1411 Audit	1,000.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	30,800.00	32,847.00	32,847.00	30,007.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	65,000.00	105,569.00	105,569.00	60,768.00
10	1460 Dwelling Structures	415,750.00	341,234.00	341,234.00	211,015.00
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	35,000.00	7,426.00	7,426.00	6,683.00
13	1475 Non-dwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	624,589.00	624,589.00	624,589.00	370,931.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	103,750.00	91,386.00	91,386.00	64,310.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	50,000.00	0.00	0.00	0.00

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

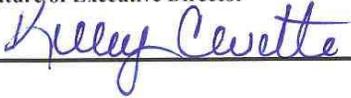
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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

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

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

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

<b>Part I: Summary</b>					
PHA Name:  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: PA26P05050110      Replacement Housing Factor Grant No: Date of CFFP: _____	<b>FFY of Grant:</b> 2010  <b>FFY of Grant Approval:</b> _____			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost <sup>1</sup></b>		
		Original	Revised <sup>2</sup>	Obligated	Expended
<b>Signature of Executive Director</b> 		<b>Signature of Public Housing Director</b>		<b>Date</b> 12/31/2011	

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: PA26P05050110 CFFP (Yes/No): No Replacement Housing Factor Grant No.:				Federal FY of Grant: 2010	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>AMP 1</b>								
PA 50-1	Replace Exterior Siding	1460	16 Bldgs	115,000.00	137,456.00	137,456.00	111,339.36	A:5/1/11
	Handicap Accessibility Improvements	1460	1	12,000.00	11,908.00	11,908.00	0.00	
PA 50-2	Remove Trees & Fix Sidewalks	1450	5	5,000.00	5,854.00	5,854.00	5,268.60	A:5/1/11
	Install Fence	1450	300 LF	10,000.00	9,418.00	9,418.00	8,476.20	A:5/1/11
	Lighting Upgrades Occ. Sensors	1460	1	10,000.00	0.00	0.00	0.00	Deleted
PA 50-4	Replace Gas Service (Del. Gas co recommendation)	1450	1	0.00	0.00	0.00	0.00	Deleted
	Tub Safeway Steps	1460	19	14,250.00	11,238.00	11,238.00	11,238.00	A:5/1/11 C:9/11
	Replace Sidewalks	1450	600 SF	5,000.00	13,312.00	13,312.00	11,980.80	A:5/1/11
	<b>AMP 1 Total</b>			<b>171,250.00</b>	<b>189,186.00</b>	<b>189,186.00</b>	<b>148,302.96</b>	
<b>AMP 2</b>								
PA 50-3	Sidewalk & Drainage	1450	500 SQ FT	15,000.00	0.00	0.00	0.00	Deleted
	Gutter and Downspout Replacement	1460	15	4,000.00	2,140.00	2,140.00		
	Kitchen Upgrades Phase II	1460	40 Units	20,000.00	26,950.00	26,950.00	2,425.50	A:5/1/11
	Tub Safeway Steps	1460	50	30,000.00	25,272.00	25,272.00	25,272.00	A:5/1/11 C:9/11
PA 50-8	Landscaping	1450	500 SQ FT	10,000.00	9,978.00	9,978.00	8,980.20	A:5/1/11
	Maintenance Garage / Storage	1450	1	35,000.00	32,175.00	32,175.00	26,061.75	A:5/1/11
	Exterior Restoration / Re-Caulking	1460	1	50,000.00	38,112.00	38,112.00	0.00	
	Tub Safeway Steps	1460	30	20,000.00	15,163.00	15,163.00	15,163.00	A:5/1/11 C:9/11
	Lighting Upgrades Occ. Sensors	1460	2	20,000.00	0.00	0.00	0.00	Deleted
	<b>AMP 2 Total</b>			<b>204,000.00</b>	<b>149,790.00</b>	<b>149,790.00</b>	<b>77,902.45</b>	
<b>AMP 3</b>								
50-6	Repave Parking South Side Lot	1450	1200 SF	10,000.00	34,832.00	34,832.00	0.00	
	Lighting Upgrades Occ. Sensors	1460	2	10,000.00	0.00	0.00	0.00	Deleted
	Front Door Replacement / Panic Hardware	1460	8	12,000.00	36,600.00	36,600.00	32,940.00	A:5/1/11
	Apartment Handicap Upgrades	1460	1	15,000.00	15,168.00	15,168.00	0.00	
50-7	Landscaping	1470	500 SQ FT	10,000.00	7,426.00	7,426.00	6,683.40	A:5/1/11

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

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





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

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

<b>Part I: Summary</b>			
<b>PHA Name:</b>  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: <b>PA26P05050111</b> Replacement Housing Factor Grant No: Date of CFFP: _____	<b>FFY of Grant:</b> 2011  <b>FFY of Grant Approval:</b> _____	

<b>Type of Grant</b>			
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual statement (revision no: _____)	
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011		<input type="checkbox"/> Final Performance and Evaluation Report	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds		0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	17,378.00	16,378.00	5,903.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	55,297.00	55,297.00	55,297.00	55,297.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	29,800.00	30,800.00	30,800.00	5,054.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	50,000.00	50,000.00	25,000.00	0.00
10	1460 Dwelling Structures	245,000.00	245,000.00	25,000.00	0.00
11	1465.1 Dwelling Equipment - Nonexpendable	38,000.00	38,000.00	0.00	0.00
12	1470 Non-dwelling Structures	47,500.00	47,500.00	8,000.00	0.00
13	1475 Non-dwelling Equipment	70,000.00	70,000.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	552,975.00	552,975.00	150,000.00	60,351.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	24,500.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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

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

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

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

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

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

<b>Part I: Summary</b>			
PHA Name:  Tioga County Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: PA26P05050111      Replacement Housing Factor Grant No: Date of CFFP: _____	
		FFY of Grant: 2011 FFY of Grant Approval: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	
		Original	Revised <sup>2</sup>
		<b>Total Actual Cost <sup>1</sup></b>	
		Obligated	Expended
Signature of Executive Director  <i>Kelley Cwette</i>		Signature of Public Housing Director	
Date  6/26/2012		Date	

**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  
**Expires 4/30/2011**

<b>Part II: Supporting Pages</b>									
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>PA26P05050111</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.:					Federal FY of Grant: 2011	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>AMP1</b>									
PA 50-1	Resurface Back Parking & Add Spaces	1450	300 SqFt	5,000.00	5,000.00	5,000.00	0.00		
PA 50-2	Storage Room Upgrades	1470	1	8,000.00	8,000.00	8,000.00	0.00		
PA 50-4	Additional Outside Lights	1450	6	5,000.00	5,000.00	0.00	0.00		
	New Project Sign	1450	1	3,000.00	3,000.00	0.00	0.00		
	New Flagpole w/ Lights	1450	1	2,000.00	2,000.00	0.00	0.00		
PA 50-5	Re Pave Parking Lot	1450	12720 SF	20,000.00	20,000.00	20,000.00	0.00		
	Replace Roofs	1460	15000 SF	40,000.00	40,000.00	0.00	0.00		
<b>AMP 1 Total</b>				<b>83,000.00</b>	<b>83,000.00</b>	<b>33,000.00</b>	<b>0.00</b>		
<b>AMP2</b>									
PA 50-3	Replace Stoves	1465	82	30,000.00	30,000.00	0.00	0.00		
	Replace Heaterline Valves (40) & Pumps (40)	1460	30LF & 40	25,000.00	25,000.00	25,000.00	0.00		
	Sewer Line Repair Courtyard & D Bldg	1460	30 LF	10,000.00	10,000.00	0.00	0.00		
PA 50-8	Replace 10 Refrigerators & Stoves	1465	20	8,000.00	8,000.00	0.00	0.00		
	Install Emergency Call Restrooms	1470	2	2,000.00	2,000.00	0.00	0.00		
<b>AMP 2 Total</b>				<b>75,000.00</b>	<b>75,000.00</b>	<b>25,000.00</b>	<b>0.00</b>		
PA 50-6	Convert old Elevator room to Storage	1470	1	4,000.00	4,000.00	0.00	0.00		
	Tub Safeway Steps	1460	30	20,000.00	20,000.00	0.00	0.00		
PA 50-7	Install Shut offson washing maxhines	1470	20	3,000.00	3,000.00	0.00	0.00		
	Replace gate valves and water heaters	1475	20	10,000.00	10,000.00	0.00	0.00		
	Replace back doors and handsets	1470	20	15,000.00	15,000.00	0.00	0.00		

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

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

**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  
**Expires 4/30/2011**

<b>Part II: Supporting Pages</b>								
PHA Name:			Grant Type and Number:					Federal FY of Grant:
Tioga County Housing Authority			Capital Fund Program Grant No.:		PA26P05050111		CFFP (Yes/No): No	2011
			Replacement Housing Factor Grant No.:					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP 3</b>								
PA 50-9	Replace Domestic Water Heaters	1475	3	20,000.00	20,000.00	0.00	0.00	
	Replace Unit Plumbing Valves	1460	20	8,000.00	8,000.00	0.00	0.00	
	Install New Cable TV lines to units	1460	50 Units	10,000.00	10,000.00	0.00	0.00	
	Install Winter Enclosure on Pavilion	1470	400 Sq Ft	3,500.00	3,500.00	0.00	0.00	
	Replace Concrete Floor Pavilion	1470	800 Sq Ft	5,000.00	5,000.00	0.00	0.00	
	Replace Common Room Exit Doors	1470	4	7,000.00	7,000.00	0.00	0.00	
PA 50-10	Upgrade Unit Plumbing Valves and Pipes	1460	20 Units	4,000.00	4,000.00	0.00	0.00	
	Install new Carbon Monoxide / Smoke Detector:	1460	20 Units	5,000.00	5,000.00	0.00	0.00	
	Replace Water Heaters in units	1460	20	12,000.00	12,000.00	0.00	0.00	
PA 50-11	Upgrade Unit Plumbing Valves and Pipes	1460	30 Units	6,000.00	6,000.00	0.00	0.00	
	Install new Carbon Monoxide / Smoke Detector:	1460	30 Units	7,000.00	7,000.00	0.00	0.00	
	Install Porch Roofs & Concrete Slabs	1460	12 Units	48,000.00	48,000.00	0.00	0.00	
	Replace Water Heaters & Valves in units:	1475	30	20,000.00	20,000.00	0.00	0.00	
PA 50-12	Replace Water Heaters & Valves	1475	30	20,000.00	20,000.00	0.00	0.00	
	Resurface Elderly Parking Lot	1450	8000 sq ft	15,000.00	15,000.00	0.00	0.00	
	Siding Replacements	1460	11 Bldgs	50,000.00	50,000.00	0.00	0.00	
	<b>AMP 3 Total</b>			<b>292,500.00</b>	<b>292,500.00</b>	<b>0.00</b>	<b>0.00</b>	
	Operations	1406		17,378.00	16,378.00	5,903.00	0.00	
	Administrative Fees	1410		55,297.00	55,297.00	55,297.00	55,297.00	C: 11/11
	1410 Salaries: Executive Director, Dep. Director Controller, Capital Improvement Manager 3 Accounting Clerks, 3 Maintenance Foreman							
	Architect Fees	1430		29,800.00	30,800.00	30,800.00	5,054.00	A: 11/11 -
	<b>PHA Wide Total</b>			<b>102,475.00</b>	<b>102,475.00</b>	<b>92,000.00</b>	<b>60,351.00</b>	
	<b>Grand Total</b>			<b>552,975.00</b>	<b>552,975.00</b>	<b>150,000.00</b>	<b>60,351.00</b>	

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

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

**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  
**Expires 4/30/2011**

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Tioga County Housing Authority				Federal FFY of Grant: 2011	
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PA 50-1	6/1/2013		6/1/2015		
PA 50-2	6/1/2013		6/1/2015		
PA 50-3	6/1/2013		6/1/2015		
PA 50-4	6/1/2013		6/1/2015		
PA 50-5	6/1/2013		6/1/2015		
PA 50-6	6/1/2013		6/1/2015		
PA 50-7	6/1/2013		6/1/2015		
PA 50-8	6/1/2013		6/1/2015		
PA 50-9	6/1/2013		6/1/2015		
PA 50-10	6/1/2013		6/1/2015		
PA 50-11	6/1/2013		6/1/2015		
PA 50-12	6/1/2013		6/1/2015		
PHA WIDE	6/1/2013		6/1/2015		

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

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

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

<b>Part I: Summary</b>		
<b>PHA Name:</b>  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: <b>PA26P05050112</b> Replacement Housing Factor Grant No: Date of CFFP: _____	<b>FFY of Grant:</b> 2012  <b>FFY of Grant Approval:</b> _____

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual statement (revision no: \_\_\_\_\_ )  
 Performance and Evaluation report for Program Year Ending \_\_\_\_\_       Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	37,814.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 20)	48,390.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	22,000.00			
10	1460 Dwelling Structures	270,700.00			
11	1465.1 Dwelling Equipment - Nonexpendable	45,000.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	25,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (sum of lines 2 - 19)	483,904.00			
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				

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

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

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

<b>Part I: Summary</b>				
PHA Name:  Tioga County Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: PA26P05050112      Replacement Housing Factor Grant No: Date of CFFP: _____		FFY of Grant: 2012  FFY of Grant Approval: _____
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input type="checkbox"/> Performance and Evaluation report for Program Year Ending _____ <input type="checkbox"/> Final Performance and Evaluation Report				
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>
		Original	Revised <sup>2</sup>	Obligated      Expended
Signature of Executive Director  		Date  12/31/2011		Signature of Public Housing Director  Date

**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  
**Expires**

<b>Part II: Supporting Pages</b>								
PHA Name: <b>Tioga County Housing Authority</b>			Grant Type and Number: Capital Fund Program Grant No.: <u>PA26P05050112</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.:				Federal FY of Grant:  2012	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>AMP 1</b>								
PA 50-1	Resurface back parking lot add 2 spaces	1450	800 sf	15,000.00				
PA 50-2	Replace Medicine cabinets	1460	48 Units	10,000.00				
PA 50-5	Replace roofing shingles & Sheeting as needed	1460	12000 sf	60,000.00				
				<b>85,000.00</b>				
<b>AMP-2</b>								
PA 50-3	Replace sidewalk	1450	500 sf	7,000.00				
	Replace closet doors	1460	100	10,000.00				
	Replace old panel boxes	1460	2	4,000.00				
	Replace Boiler units	1460	2	60,000.00				
PA 50-8				0.00				
				<b>81,000.00</b>				

<sup>1</sup> To be completed for the Performance and Evaluation Report or a revised Annual Statement  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

**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  
**Expires**

<b>Part II: Supporting Pages</b>								
PHA Name:			Grant Type and Number: Capital Fund Program Grant No.: _____ CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant:  2012	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>AMP 3</b>								
PA 50-6	Replace electrical outlets, switches and fans	1460	50 units	20,000.00				
	Replace system Boilers	1460	2	45,700.00				
PA 50-7	Replace water Heaters, valves and vents	1465	10 units	5,000.00				
	Replace back doors and hardware	1460	10 units	5,000.00				
PA 50-9	Replace make-up air unit on roof	1465	1	40,000.00				
PA 50-11	Replace Vinyl siding	1460	1	56,000.00				
PA 50-12	Replace Maintenance truck	1475	1	25,000.00				
				<b>196,700.00</b>				
	<b>Total</b>			<b>362,700.00</b>				
PHA WIDE	Operations	1406		37,814.00				
	Administrative	1410		48,390.00				
	1410 Salaries: Executive Director, Dep. Director Controller, Capital Improvement Manager Accounting Clerks, Maintenance Foreman.							
	Architech & Engineering	1430		35,000.00				
	<b>PHA Wide Total</b>			<b>121,204.00</b>				
	<b>Grant Total</b>			<b>483,904.00</b>				

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

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

**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  
**Expires 4/30/2011**

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Tioga County Housing Authority				Federal FFY of Grant: 2012	
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PA 50-1	3/1/2014		3/1/2016		
PA 50-2	3/1/2014		3/1/2016		
PA 50-3	3/1/2014		3/1/2016		
PA 50-4	3/1/2014		3/1/2016		
PA 50-5	3/1/2014		3/1/2016		
PA 50-6	3/1/2014		3/1/2016		
PA 50-7	3/1/2014		3/1/2016		
PA 50-8	3/1/2014		3/1/2016		
PA 50-9	3/1/2014		3/1/2016		
PA 50-10	3/1/2014		3/1/2016		
PA 50-11	3/1/2014		3/1/2016		
PA 50-12	3/1/2014		3/1/2016		
PHA WIDE	3/1/2014		3/1/2016		

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

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

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						<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No.: _____
Tioga County Housing Authority						
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	AMP-1 1450 Site Improvement	Annual Statement	0.00	13,000.00	19,000.00	10,000.00
C.	AMP-1 1460 Dwelling Structures		80,000.00	72,000.00	99,500.00	251,000.00
	AMP-1 1465.1 Dwelling Equipment		0.00	92,000.00	0.00	0.00
D.	AMP-1 1470 Non-Dwelling Structures		0.00	1,000.00	0.00	0.00
	AMP-1 1475 Non-Dwelling Equipment		39,000.00	0.00	0.00	0.00
	AMP-2 1450 Site Improvement		0.00	40,000.00	0.00	12,000.00
	AMP-2 1460 Dwelling Structures		0.00	277,000.00	98,000.00	73,000.00
	AMP-2 1465.1 Dwelling Equipment		55,000.00	12,000.00	26,000.00	0.00
	AMP-2 1470 Non-Dwelling Structure		0.00	0.00	0.00	0.00
	AMP-2 1475 Non-Dwelling Equipment		0.00	0.00	0.00	16,000.00
	AMP-3 1450 Site Improvement		35,000.00	0.00	44,000.00	47,000.00
	AMP-3 1460 Dwelling Structures		240,000.00	138,000.00	314,000.00	310,000.00
	AMP-3 1465.1 Dwelling Equipment		0.00	6,000.00	0.00	48,000.00
	AMP-3 1470 Non-Dwelling Structure		0.00	5,000.00	3,500.00	0.00
	AMP-3 1475 Non-Dwelling Equipment		0.00	0.00	0.00	12,000.00
	PHA Wide 1406 Operations		32,677.50	65,000.00	60,000.00	75,000.00
	PHA Wide 1410 MGT Fees		55,297.50	65,000.00	60,000.00	75,000.00
	PHA Wide 1411 Audit		0.00	0.00	0.00	0.00
	PHA Wide 1430 Fees & Costs Architech & Engineering		31,000.00	45,000.00	45,000.00	45,000.00
	Grand Total		567,975.00	831,000.00	769,000.00	974,000.00

















# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Tioga County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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)

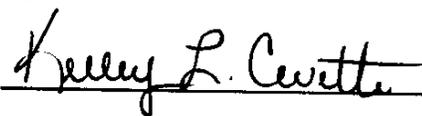
Name of Authorized Official

Kelley L. Cevette

Title

Executive Director

Signature



Date (mm/dd/yyyy)

4-4-2012

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Tioga County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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 Federalagency 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.)

Forestview Manor, Forestview Dr., Elkland, Tioga County, PA 16920

Wapiti Apts, Pattison Ext, Elkland, Tioga County, PA 16920

Riverside Manor, Race St., Westfield, Tioga County, PA 16950

Hillview Apts, North St., Lincoln St., Westfield, Tioga County, PA 16950

Nelson Apts., Capital Dr., Pease Hill, Beechers Square, Nelson, Tioga County, PA 16940

Lawrenceville Apts., Main St., Center St., Mechanic St., State St., Lawrenceville, Tioga County, PA 16929

Sherwood Manor, Novelty Place, Mansfield, Tioga County, PA 16933

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

Kelley L. Cevette

Title

Executive Director

Signature

x *Kelley L. Cevette*

Date

4-4-2012

**DISCLOSURE OF LOBBYING ACTIVITIES**  
 Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
 (See reverse for public burden disclosure.)

Approved by OMB

0348-0046

<b>1. Type of Federal Action:</b> Grant	<b>2. Status of Federal Action:</b> Initial Award	<b>3. Report Type:</b> Initial Award
<b>4. Name and Address of Reporting Entity</b> Tioga County Housing Authority 4 Riverside Plaza Blossburg, PA 16912  Congressional District, if known: 4C		<b>5. If Reporting Entity in No. 4 is a Sub-Awardee, Enter Name and Address of Prime:</b> N/A  Congressional District, if known:
<b>6. Federal Department/Agency:</b> US Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b> Capital Fund Program  CFDA Number, if applicable:	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI): N/A no Lobbying Activities Proposed	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI): N/A	
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 of entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and 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 that \$10,000 and not more than \$100,000 for each such failure.	Signature: <i>Kelley Cevette</i> Print Name: Kelley L. Cevette Title: Executive Director Telephone No: 570-638-2151      Date: 4-4-2012	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev 4-2012)

**Tioga County Housing Authority  
Advisory Board Meeting**

**Wednesday, February 1, 2012 Noon  
Pinnacle Towers Wellsboro, Pa.**

**Present:** Ira Sherman – Pinnacle Towers  
Dale Sherman – Pinnacle Towers  
Frances Gillen – Pinnacle Towers  
Charles Keyser – Riverside Manor  
Theodore Roy – Park Hill Manor  
Maxine Roy – Park Hill Manor  
Margaret Rice – Park Hill Manor  
Josephine Miller – Riverside Park  
Tammy Brown – Taber Townhouses  
Nell Bergstresser – Riverside Park  
Virginia Case – Sherwood Manor  
James Herron – Beecher Square  
Gary Bradford - Nelson Family Housing  
Marilyn Wodarski – Forestview Manor  
Jim McIntosh – Van Driver TCHA  
Cindy Roupp – TCHA  
Nancy Smith – TCHA  
Kelley Cevette – TCHA  
Sean Sember- TCHA  
Amy Walters – TCHA  
Jason Sawyer – TCHA  
Dan Styborski – TCHA

Executive Director, Kelley Cevette, welcomed everyone to the annual Advisory Board Meeting and had everyone introduce themselves with their name and where they resided.

Minutes from the February 4, 2011 meeting were reviewed. On motion by Ted Roy and seconded by Nell Bergstresser the minutes were accepted. All members were in favor.

Ms. Cevette reviewed the purposed of the Tenant Advisory Board, its background and history of the preparation of the Annual Plan. She commented on the continued High Performance Standard the Authority has maintained, the continued subsidy to EMTA and maintaining the Homemakers Assistance Program. Nell Bergstresser inquired whether the Housing Authority always had to take the lowest bidder. Ms Cevette explained the bidding process and our requirements under HUD.

Ms. Cevette reviewed the Smoke-Free policy of the Housing Authority. She explained that the policy was being enforced and if someone was found to be in violation of the policy on three separate occasions they would be requested to leave and the eviction process would begin.

The Resident Services Coordinator, Sean Sember, was introduced by Ms. Cevette. She stated that she has been very pleased with Sean's involvement with some tenants who were in violation of their leases and how successful he has been in assisting these tenants in remaining in their apartments. There was consensus that Sean has been an asset to the Authority.

Ms. Cevette stated that there were no changes to the current Admission and Occupancy Policy, but there was concern expressed by some residents and staff about safe management of scooters in the facilities. Tenants questioned the liabilities that went along with the operation of scooters and how some tenants lost their driver's license but could still operate the scooters. Ms. Cevette stated that she had been in contact with our local HUD representative to inquire of appropriate ways to manage the safe operation of these scooters in our buildings.

Board Members were presented with items that are to be included in the 2012 Capital Grant application. The members were informed that any additional suggestions to improvements will be taken into consideration before the final Agency Plan is submitted.

#### Resident Suggestions:

James Herron stated the porch roofs for his building was a great idea, but wondered about making them translucent so that sun would be able to shine through. He was concerned about the lack of light into the building. Jason Sawyer explained that there would be lights placed outside the doors to allow for better lighting and emphasized the appearance and how the roofs would provide a place to sit outside.

Nell Bergstresser complimented the Authority on how wonderful the new siding looks on Riverside Manor, but questioned the selection of some of the colors for the shutters. She requested awnings to be installed above the exterior doors. Jason indicated that he did not think that they would be feasible because of the height of the doors but he would look into it.

Theodore Roy commented on how wonderful the new handrails look out front of Park Hill Manor and also how wonderful it was to have them in place. He asked if a similar handrail could be installed between the building and the lower parking lot. He states that it appears that some people have fallen moving from the building to the parking area. Jason also stated that he would review the area that is being discussed.

Virginia Case asked about sparks being created when she turns the lights on in her apartment. It was determined that the spark is actually just static electricity and is only a problem for her during the winter. It was recommended that she review her foot wear in her apartment. She also stated some tenants have asked for a larger change machine in the laundry room, but personally believes they just need to get more change during the week.

Francis Gillen asked about cameras being placed on each floor in Pinnacle Towers. There was concern of things coming up missing in the collection of rummage sale items. Ms. Cevette stated that this would be reviewed to see if it how it could be added to our list.

Marilyn Wodarski asked about putting peep hole lower in the doors for people in wheel chairs and those on scooters. This issue will be reviewed by Jason with maintenance to determine the possibility. Also Marilyn asked about the amount of lights that are on in front of elevators 24 hours a day. She thought that there ought to be a way to lessen to save electricity and also so make a more pleasant environment for the apartments located around the elevators. This issue will also be reviewed by Jason and our maintenance staff.

Hearing no further comments Ms. Cevette informed the Board members as to the Public Hearing scheduled for March 13, 2012 at Pinnacle Towers in Wellsboro. Members were thanked for their participation and the meeting was adjourned.

## Minutes

### Tioga County Housing Authority

March 28, 2012

The regular meeting of the Tioga County Housing Authority was held in the conference area of the Lambs Creek Inn, Mansfield, Pa. The following Board members were present; Jody Thomas, Peter Lupkowski, and Leo Parchesky. Also present were Kelley Cevette, Dan Styborski, Pricilla Walrath, solicitor, Jason Sawyer, Cheryl Clark from the Williamsport Gazette and Rebecca Hazen from the Wellsboro Gazette.

The meeting was called to order by Chair person Jody Thomas. At her direction the minutes of the February 27, 2012 meeting were reviewed with no noted changes or recommendations from the board. A motion was made by Peter Lupkowski to accept the minutes as presented and it was seconded by Leo Parchesky. The minutes were unanimously accepted.

#### EXHIBIT TH 3-12-1

The report on the bills for February 2012 were presented and reviewed by the Board. Questions presented by Peter Lupkowski were addressed by Kelley Cevette. It was moved by Leo Parchesky and seconded by Peter Lupkowski to accept the report as presented. This unanimously approved by the Board. Further the Board discussed and agreed to a streamlined version of this report which will be implemented next month.

#### EXHIBIT TH 3-12-2

The Occupancy Report for Public Housing and the status of the Section 8 voucher program were distributed for the Board's review. There were no vacancies to report for the month. The Board applauded the work of staff. In the Section 8 voucher program the Board questioned the amount we were spending each month to meet our goals and the amount that remained in reserves. They were pleased with the report and no action was needed or taken by the Board.

The financial report for January 2012 was reviewed. Peter Lupkowski questioned the wording in the report concerning HUD's funding levels. Kelley clarified the report and the Board was pleased with the explanation. Leo Parchesky moved to accept the report as written. It was seconded by Peter Lupkowski and approved by the overall Board.

#### EXHIBIT TH 3-12-3

The Resolution to approve the Annual Public Housing Agency Plan and the 5 Year Plan was presented by Kelley Cevette and Jason Sawyer. Kelley Cevette explained that there are no administrative changes to the plan for this year, but the funding for the capital grant program has been reduced by HUD for the second year in a row. The reduction this year was \$70,000 as it was the year before, thus totaling \$140,000 fewer dollars for improvements over the past two years. Jason Sawyer explained our emphasis was on major mechanical repairs and purchases, in order to keep our buildings in good operating condition. A brief discussion ensued of prioritizing our spending with a motion to adopt the resolution made by Peter Lupkowski and seconded by Leo Parchesky. The Board approved the resolution unanimously.

EXHIBIT TH 3-12-4

Kelley Cevette also presented the contract renewal with United Christian Ministries for the Single Room Occupancy Grant. There a few questions about the overall operation of this program and it was reported that it appears to be professional, and documents have been submitted timely and accurately. Leo Parchesky moved to approve the resolution certifying the contract renewal. The motion was seconded by Peter Lupkowski and approved by the board.

EXHIBIT TH 2-12-5

In other board information Kelley Cevette gave an overview of the recent PAHRA conference in Harrisburg and the workshop she attended with Senator Yaw. Pricilla Walrath reported that the transfer of the property in Nelson has been offered to the Nelson community with them assuming the transfer costs and she has not heard back from them. Kelley Cevette also gave a quick review of the progress on the Liberty Cottages.

On motion duly made by Leo Parchesky and seconded by Peter Lupkowski the meeting of the Housing Authority was adjourned.

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Chairperson

# Attachment A

**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:  Tioga County Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: PA26P05050109      Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009  FFY of Grant Approval: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	8,908.00	25,855.00	25,855.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	62,945.00	62,945.00	62,945.00	62,945.00
5	1411 Audit	1,000.00	1,000.00	1,000.00	1,000.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	40,000.00	29,046.00	29,046.00	27,972.58
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	20,000.00	33,362.00	33,362.00	33,361.55
10	1460 Dwelling Structures	429,600.00	458,647.00	458,647.00	354,389.24
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	45,000.00	3,458.00	3,458.00	3,458.45
13	1475 Non-dwelling Equipment	22,000.00	15,140.00	15,140.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	629,453.00	629,453.00	629,453.00	483,126.82
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	15,000.00	136,698.00	136,698.00	136,698.00
25	Amount of line 20 Related to Energy Conservation Measures	173,630.00	96,479.00	96,479.00	96,479.00

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

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

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

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

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

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

<b>Part I: Summary</b>			
PHA Name:  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: PA26P05050109 Date of CFFP: _____ Replacement Housing Factor Grant No: _____	FFY of Grant: 2009 FFY of Grant Approval: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost<sup>1</sup></b>
		Original	Revised <sup>2</sup>
		Obligated	Expended
Signature of Executive Director 	Date 12/31/2011	Signature of Public Housing Director	Date

**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  
Expires 4/30/2011

<b>Part II: Supporting Pages</b>									
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: PA26P05050109 Replacement Housing Factor Grant No.: _____				CFPP (Yes/No): No		Federal FY of Grant: 2009
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised 2	Funds Obligated	Funds Expended		
<b>AMP 1</b>									
PA 50-1	Generator	1460	1	16,000.00	12,500.00	12,500.00	12,500.00	A: 7/10 - C: 9/11	
PA 50-2	Security System	1460	1	10,000.00	36,662.26	36,662.26	36,662.26	A: 7/10 - C: 12/10	
PA 50-4	Security System	1460	1	5,000.00	31,732.98	31,732.98	31,732.98	A: 7/10 - C: 12/10	
PA 50-4	Roof Replacement A & B Buildings	1460	11320 sq ft	96,630.00	81,339.00	81,339.00	81,339.00	A: 7/10 - C: 2/11	
<b>AMP 1 Total</b>				<b>127,630.00</b>	<b>162,234.24</b>	<b>162,234.24</b>	<b>162,234.24</b>		
<b>AMP 2</b>									
PA 50-3	Hallway Flooring Replacement	1460	5000 sq ft	50,000.00	32,034.00	32,034.00	32,034.00	A: 7/10 - C: 2/11	
PA 50-3	Kitchen Upgrades Phase I	1460	64 Units	80,000.00	104,928.00	104,928.00	104,928.00	A: 7/10 - C: 2/11	
PA 50-3	Lighting Upgrades	1460	150	10,000.00	31,950.00	31,950.00	31,950.00	A: 7/10 - C: 9/11	
<b>AMP 2 Total</b>				<b>140,000.00</b>	<b>168,912.00</b>	<b>168,912.00</b>	<b>168,912.00</b>		
<b>AMP 3</b>									
PA 50-6	Fire Alarm System Replacement	1460	1	55,000.00	73,800.00	73,800.00	73,800.00	A: 7/10 - C: 9/11	
PA 50-6	Efficiency Conversion	1460	2	30,970.00	0.00	0.00	0.00	Deleted	
PA 50-6	Flooring in Office Building	1470	1200 sq ft	5,000.00	3,458.45	3,458.45	3,458.45	A: 7/10 - C: 2/11	
PA 50-6	Tenant Storage / Garage	1470	1	40,000.00	0.00	0.00	0.00	Moved to 2012	
PA 50-7	Flooring in Bathrooms	1460	600 sq ft	6,000.00	6,402.00	6,402.00	6,402.00	A: 7/10 - C: 2/11	
PA 50-7	Concrete Pads	1450	1500 sq ft	15,000.00	10,930.70	10,930.70	10,930.70	A: 7/10 - C: 2/11	
PA 50-7	Fence in Ball Field, Private for Tenant Use Authority Owned - On Family Project Property	1475	1	15,000.00	0.00	0.00	0.00	Deleted	

\* To be completed for the Performance and Evaluation Report or a revised Annual Statement  
 † To be completed for the Performance and Evaluation Report.

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

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

<b>Part II: Supporting Pages</b>								
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: PA26P05050109 CFFP (Yes/No): No Replacement Housing Factor Grant No.:				Federal FY of Grant: 2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised 2	Funds Obligated	Funds Expended	
<b>AMP 3 Cont.</b>								
PA 50-9	Air Make Up System	1460	1	60,000.00	0.00	0.00	0.00	Moved to 2012
PA 50-10	Cable TV Service Upgrade	1460	20	10,000.00	6,100.00	6,100.00	6,100.00	A: 7/10 - C: 9/11
PA 50-10	Siding Replacement	1460		0.00	42,296.00	42,296.00	42,296.00	From FYE 2013
PA 50-11	Site Work - Repair Sidewalk & Concrete Pads	1450	500 sq ft	5,000.00	22,430.85	22,430.85	22,430.85	A: 7/10 - C: 2/11
PA 50-12	Furnace Upgrades & Add A/C in Common Area	1475	1	7,000.00	14,590.00	14,590.00	14,590.00	A: 7/10 - C: 5/11
	HVAC Electric	1475		550.00	550.00	550.00	550.00	A: 7/10 - C: 9/11
	<b>AMP 3 Total</b>			<b>249,520.00</b>	<b>180,558.00</b>	<b>180,558.00</b>	<b>180,558.00</b>	
PHA Wide	Operations	1406		8,358.00	24,895.18	24,895.18		
PHA Wide	Administration	1410		62,945.00	62,945.00	62,945.00	62,945.00	C: 6/10
	1410 Salaries: Executive Director, Dep. Director Controller, Physical Development Coordinator 3 Accounting Clerks, 3 Maintenance Foreman.							
PHA Wide	Audit	1411		1,000.00	1,000.00	1,000.00	1,000.00	
PHA Wide	Fees & Costs	1430		40,000.00	28,908.58	28,908.58	28,908.58	A: 11/09 - C: 3/11
	<b>PHA Wide Total</b>			<b>112,303.00</b>	<b>117,748.76</b>	<b>117,748.76</b>	<b>92,853.58</b>	
	<b>Capital Grant Total</b>			<b>629,453.00</b>	<b>629,453.00</b>	<b>629,453.00</b>	<b>604,557.82</b>	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a revised Annual Statement  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

**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  
 Expires 4/30/2011

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Tioga County Housing Authority					Federal FFY of Grant: 2009
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide Activities					
PA 50-1	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-2	9/14/2011	9/30/2010	9/14/2013	12/2/2010	
PA 50-3	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-4	9/14/2011	9/30/2010	9/14/2013	2/16/2011	
PA 50-5					No Work Items
PA 50-6	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-7	9/14/2011	9/30/2010	9/14/2013	2/16/2011	
PA 50-8					No Work Items
PA 50-9					No Work Items
PA 50-10	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PA 50-11	9/14/2011	9/30/2010	9/14/2013	2/16/2011	
PA 50-12	9/14/2011	9/30/2010	9/14/2013	9/30/2011	
PHA WIDE	9/14/2011	12/31/2010	9/14/2013		

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

## Attachment B

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

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

<b>Part I: Summary</b>		<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	
<b>PHA Name:</b>  Tioga County Housing Authority		Capital Fund Program Grant No.: PA26P05050110		2010	
		Replacement Housing Factor Grant No:		<b>FFY of Grant Approval:</b>	
		Date of CFFP: _____			
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual statement (revision no: _____)	
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	14,139.00	75,055.00	75,055.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	62,900.00	62,458.00	62,458.00	62,458.00
5	1411 Audit	1,000.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	30,800.00	32,847.00	32,847.00	30,007.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	65,000.00	105,569.00	105,569.00	60,768.00
10	1460 Dwelling Structures	415,750.00	341,234.00	341,234.00	211,015.00
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	35,000.00	7,426.00	7,426.00	6,683.00
13	1475 Non-dwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	624,589.00	624,589.00	624,589.00	370,931.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	103,750.00	91,386.00	91,386.00	64,310.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	50,000.00	0.00	0.00	0.00

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

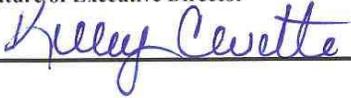
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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

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

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

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

<b>Part I: Summary</b>		
PHA Name:  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: PA26P05050110      Replacement Housing Factor Grant No: Date of CFFP: _____	<b>FFY of Grant:</b> 2010  <b>FFY of Grant Approval:</b> _____
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report		
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>
		Original      Revised <sup>2</sup>
		<b>Total Actual Cost <sup>1</sup></b>
		Obligated      Expended
Signature of Executive Director  	Date  12/31/2011	Signature of Public Housing Director   Date

**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  
Expires 4/30/2011

<b>Part II: Supporting Pages</b>									
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: PA26P05050110 Replacement Housing Factor Grant No.: _____				CFFP (Yes/No): No		Federal FY of Grant: 2010
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>AMP 1</b>									
PA 50-1	Replace Exterior Siding	1460	16 Bldgs	115,000.00	137,456.00	137,456.00	111,339.36	A:5/1/11	
	Handicap Accessibility Improvements	1460	1	12,000.00	11,908.00	11,908.00	0.00		
PA 50-2	Remove Trees & Fix Sidewalks	1450	5	5,000.00	5,854.00	5,854.00	5,268.60	A:5/1/11	
	Install Fence	1450	300 LF	10,000.00	9,418.00	9,418.00	8,476.20	A:5/1/11	
	Lighting Upgrades Occ. Sensors	1460	1	10,000.00	0.00	0.00	0.00	Deleted	
PA 50-4	Replace Gas Service (Del. Gas co recommendation)	1450	1	0.00	0.00	0.00	0.00	Deleted	
	Tub Safeway Steps	1460	19	14,250.00	11,238.00	11,238.00	11,238.00	A:5/1/11 C:9/11	
	Replace Sidewalks	1450	600 SF	5,000.00	13,312.00	13,312.00	11,980.80	A:5/1/11	
	<b>AMP 1 Total</b>			<b>171,250.00</b>	<b>189,186.00</b>	<b>189,186.00</b>	<b>148,302.96</b>		
<b>AMP 2</b>									
PA 50-3	Sidewalk & Drainage	1450	500 SQ FT	15,000.00	0.00	0.00	0.00	Deleted	
	Gutter and Downspout Replacement	1460	15	4,000.00	2,140.00	2,140.00			
	Kitchen Upgrades Phase II	1460	40 Units	20,000.00	26,950.00	26,950.00	2,425.50	A:5/1/11	
	Tub Safeway Steps	1460	50	30,000.00	25,272.00	25,272.00	25,272.00	A:5/1/11 C:9/11	
PA 50-8	Landscaping	1450	500 SQ FT	10,000.00	9,978.00	9,978.00	8,980.20	A:5/1/11	
	Maintenance Garage / Storage	1450	1	35,000.00	32,175.00	32,175.00	26,061.75	A:5/1/11	
	Exterior Restoration / Re-Caulking	1460	1	50,000.00	38,112.00	38,112.00	0.00		
	Tub Safeway Steps	1460	30	20,000.00	15,163.00	15,163.00	15,163.00	A:5/1/11 C:9/11	
	Lighting Upgrades Occ. Sensors	1460	2	20,000.00	0.00	0.00	0.00	Deleted	
	<b>AMP 2 Total</b>			<b>204,000.00</b>	<b>149,790.00</b>	<b>149,790.00</b>	<b>77,902.45</b>		
<b>AMP 3</b>									
50-6	Repave Parking South Side Lot	1450	1200 SF	10,000.00	34,832.00	34,832.00	0.00		
	Lighting Upgrades Occ. Sensors	1460	2	10,000.00	0.00	0.00	0.00	Deleted	
	Front Door Replacement / Panic Hardware	1460	8	12,000.00	36,600.00	36,600.00	32,940.00	A:5/1/11	
	Apartment Handicap Upgrades	1460	1	15,000.00	15,168.00	15,168.00	0.00		
50-7	Landscaping	1470	500 SQ FT	10,000.00	7,426.00	7,426.00	6,683.40	A:5/1/11	

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

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





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

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

<b>Part I: Summary</b>			
<b>PHA Name:</b>  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: <b>PA26P05050111</b> Replacement Housing Factor Grant No: Date of CFFP: _____	<b>FFY of Grant:</b> 2011  <b>FFY of Grant Approval:</b> _____	

<b>Type of Grant</b>			
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual statement (revision no: _____)	
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending     12/31/2011		<input type="checkbox"/> Final Performance and Evaluation Report	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds		0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	17,378.00	16,378.00	5,903.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 20)	55,297.00	55,297.00	55,297.00	55,297.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	29,800.00	30,800.00	30,800.00	5,054.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	50,000.00	50,000.00	25,000.00	0.00
10	1460 Dwelling Structures	245,000.00	245,000.00	25,000.00	0.00
11	1465.1 Dwelling Equipment - Nonexpendable	38,000.00	38,000.00	0.00	0.00
12	1470 Non-dwelling Structures	47,500.00	47,500.00	8,000.00	0.00
13	1475 Non-dwelling Equipment	70,000.00	70,000.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	552,975.00	552,975.00	150,000.00	60,351.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	24,500.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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

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

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

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

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

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

<b>Part I: Summary</b>			
PHA Name:  Tioga County Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: PA26P05050111      Replacement Housing Factor Grant No: Date of CFFP: _____	
		FFY of Grant: 2011 FFY of Grant Approval: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 12/31/2011 <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	
		Original	Revised <sup>2</sup>
		<b>Total Actual Cost <sup>1</sup></b>	
		Obligated	Expended
Signature of Executive Director  <i>Kelley Cwette</i>		Signature of Public Housing Director	
Date  6/26/2012		Date	

**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  
**Expires 4/30/2011**

<b>Part II: Supporting Pages</b>									
PHA Name: Tioga County Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>PA26P05050111</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.:					Federal FY of Grant: 2011	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>AMP1</b>									
PA 50-1	Resurface Back Parking & Add Spaces	1450	300 SqFt	5,000.00	5,000.00	5,000.00	0.00		
PA 50-2	Storage Room Upgrades	1470	1	8,000.00	8,000.00	8,000.00	0.00		
PA 50-4	Additional Outside Lights	1450	6	5,000.00	5,000.00	0.00	0.00		
	New Project Sign	1450	1	3,000.00	3,000.00	0.00	0.00		
	New Flagpole w/ Lights	1450	1	2,000.00	2,000.00	0.00	0.00		
PA 50-5	Re Pave Parking Lot	1450	12720 SF	20,000.00	20,000.00	20,000.00	0.00		
	Replace Roofs	1460	15000 SF	40,000.00	40,000.00	0.00	0.00		
<b>AMP 1 Total</b>				<b>83,000.00</b>	<b>83,000.00</b>	<b>33,000.00</b>	<b>0.00</b>		
<b>AMP2</b>									
PA 50-3	Replace Stoves	1465	82	30,000.00	30,000.00	0.00	0.00		
	Replace Heaterline Valves (40) & Pumps (40)	1460	30LF & 40	25,000.00	25,000.00	25,000.00	0.00		
	Sewer Line Repair Courtyard & D Bldg	1460	30 LF	10,000.00	10,000.00	0.00	0.00		
PA 50-8	Replace 10 Refrigerators & Stoves	1465	20	8,000.00	8,000.00	0.00	0.00		
	Install Emergency Call Restrooms	1470	2	2,000.00	2,000.00	0.00	0.00		
<b>AMP 2 Total</b>				<b>75,000.00</b>	<b>75,000.00</b>	<b>25,000.00</b>	<b>0.00</b>		
PA 50-6	Convert old Elevator room to Storage	1470	1	4,000.00	4,000.00	0.00	0.00		
	Tub Safeway Steps	1460	30	20,000.00	20,000.00	0.00	0.00		
PA 50-7	Install Shut offson washing maxhines	1470	20	3,000.00	3,000.00	0.00	0.00		
	Replace gate valves and water heaters	1475	20	10,000.00	10,000.00	0.00	0.00		
	Replace back doors and handsets	1470	20	15,000.00	15,000.00	0.00	0.00		

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

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

**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  
**Expires 4/30/2011**

<b>Part II: Supporting Pages</b>								
PHA Name:			Grant Type and Number:					Federal FY of Grant:
Tioga County Housing Authority			Capital Fund Program Grant No.:		PA26P05050111		CFFP (Yes/No): No	2011
			Replacement Housing Factor Grant No.:					
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP 3</b>								
PA 50-9	Replace Domestic Water Heaters	1475	3	20,000.00	20,000.00	0.00	0.00	
	Replace Unit Plumbing Valves	1460	20	8,000.00	8,000.00	0.00	0.00	
	Install New Cable TV lines to units	1460	50 Units	10,000.00	10,000.00	0.00	0.00	
	Install Winter Enclosure on Pavilion	1470	400 Sq Ft	3,500.00	3,500.00	0.00	0.00	
	Replace Concrete Floor Pavilion	1470	800 Sq Ft	5,000.00	5,000.00	0.00	0.00	
	Replace Common Room Exit Doors	1470	4	7,000.00	7,000.00	0.00	0.00	
PA 50-10	Upgrade Unit Plumbing Valves and Pipes	1460	20 Units	4,000.00	4,000.00	0.00	0.00	
	Install new Carbon Monoxide / Smoke Detector:	1460	20 Units	5,000.00	5,000.00	0.00	0.00	
	Replace Water Heaters in units	1460	20	12,000.00	12,000.00	0.00	0.00	
PA 50-11	Upgrade Unit Plumbing Valves and Pipes	1460	30 Units	6,000.00	6,000.00	0.00	0.00	
	Install new Carbon Monoxide / Smoke Detector:	1460	30 Units	7,000.00	7,000.00	0.00	0.00	
	Install Porch Roofs & Concrete Slabs	1460	12 Units	48,000.00	48,000.00	0.00	0.00	
	Replace Water Heaters & Valves in units:	1475	30	20,000.00	20,000.00	0.00	0.00	
PA 50-12	Replace Water Heaters & Valves	1475	30	20,000.00	20,000.00	0.00	0.00	
	Resurface Elderly Parking Lot	1450	8000 sq ft	15,000.00	15,000.00	0.00	0.00	
	Siding Replacements	1460	11 Bldgs	50,000.00	50,000.00	0.00	0.00	
	<b>AMP 3 Total</b>			<b>292,500.00</b>	<b>292,500.00</b>	<b>0.00</b>	<b>0.00</b>	
	Operations	1406		17,378.00	16,378.00	5,903.00	0.00	
	Administrative Fees	1410		55,297.00	55,297.00	55,297.00	55,297.00	C: 11/11
	1410 Salaries: Executive Director, Dep. Director Controller, Capital Improvement Manager 3 Accounting Clerks, 3 Maintenance Foreman							
	Architect Fees	1430		29,800.00	30,800.00	30,800.00	5,054.00	A: 11/11 -
	<b>PHA Wide Total</b>			<b>102,475.00</b>	<b>102,475.00</b>	<b>92,000.00</b>	<b>60,351.00</b>	
	<b>Grand Total</b>			<b>552,975.00</b>	<b>552,975.00</b>	<b>150,000.00</b>	<b>60,351.00</b>	

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

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

**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  
**Expires 4/30/2011**

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Tioga County Housing Authority					Federal FFY of Grant: 2011
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PA 50-1	6/1/2013		6/1/2015		
PA 50-2	6/1/2013		6/1/2015		
PA 50-3	6/1/2013		6/1/2015		
PA 50-4	6/1/2013		6/1/2015		
PA 50-5	6/1/2013		6/1/2015		
PA 50-6	6/1/2013		6/1/2015		
PA 50-7	6/1/2013		6/1/2015		
PA 50-8	6/1/2013		6/1/2015		
PA 50-9	6/1/2013		6/1/2015		
PA 50-10	6/1/2013		6/1/2015		
PA 50-11	6/1/2013		6/1/2015		
PA 50-12	6/1/2013		6/1/2015		
PHA WIDE	6/1/2013		6/1/2015		

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

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

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

<b>Part I: Summary</b>		
<b>PHA Name:</b>  Tioga County Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: <b>PA26P05050112</b> Replacement Housing Factor Grant No: Date of CFFP: _____	<b>FFY of Grant:</b> 2012  <b>FFY of Grant Approval:</b> _____

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual statement (revision no: \_\_\_\_\_)  
 Performance and Evaluation report for Program Year Ending \_\_\_\_\_       Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) <sup>3</sup>	37,814.00			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 20)	48,390.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	35,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	22,000.00			
10	1460 Dwelling Structures	270,700.00			
11	1465.1 Dwelling Equipment - Nonexpendable	45,000.00			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	25,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant (sum of lines 2 - 19)	483,904.00			
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				

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

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

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

<b>Part I: Summary</b>				
<b>PHA Name:</b>  Tioga County Housing Authority		<b>Grant Type and Number:</b> Capital Fund Program Grant No.: PA26P05050112      Replacement Housing Factor Grant No: Date of CFFP: _____		<b>FFY of Grant:</b> 2012 <b>FFY of Grant Approval:</b> _____
<b>Type of Grant</b>				
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual statement (revision no: _____)
<input type="checkbox"/> Performance and Evaluation report for Program Year Ending _____		<input type="checkbox"/> Final Performance and Evaluation Report		
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost <sup>1</sup></b>
		Original	Revised <sup>2</sup>	Obligated
				Expended
<b>Signature of Executive Director</b>  <i>Kelley Cwette</i>		<b>Date</b>  12/31/2011		<b>Signature of Public Housing Director</b>   <b>Date</b>

**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  
**Expires**

<b>Part II: Supporting Pages</b>								
PHA Name: <b>Tioga County Housing Authority</b>			Grant Type and Number: Capital Fund Program Grant No.: <u>PA26P05050112</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.:				Federal FY of Grant:  2012	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>AMP 1</b>								
PA 50-1	Resurface back parking lot add 2 spaces	1450	800 sf	15,000.00				
PA 50-2	Replace Medicine cabinets	1460	48 Units	10,000.00				
PA 50-5	Replace roofing shingles & Sheeting as needed	1460	12000 sf	60,000.00				
				<b>85,000.00</b>				
<b>AMP-2</b>								
PA 50-3	Replace sidewalk	1450	500 sf	7,000.00				
	Replace closet doors	1460	100	10,000.00				
	Replace old panel boxes	1460	2	4,000.00				
	Replace Boiler units	1460	2	60,000.00				
PA 50-8				0.00				
				<b>81,000.00</b>				

<sup>1</sup> To be completed for the Performance and Evaluation Report or a revised Annual Statement  
<sup>2</sup> To be completed for the Performance and Evaluation Report.

**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  
**Expires**

<b>Part II: Supporting Pages</b>								
PHA Name:			Grant Type and Number: Capital Fund Program Grant No.: _____ CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant:  2012	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
<b>AMP 3</b>								
PA 50-6	Replace electrical outlets, switches and fans	1460	50 units	20,000.00				
	Replace system Boilers	1460	2	45,700.00				
PA 50-7	Replace water Heaters, valves and vents	1465	10 units	5,000.00				
	Replace back doors and hardware	1460	10 units	5,000.00				
PA 50-9	Replace make-up air unit on roof	1465	1	40,000.00				
PA 50-11	Replace Vinyl siding	1460	1	56,000.00				
PA 50-12	Replace Maintenance truck	1475	1	25,000.00				
				<b>196,700.00</b>				
	<b>Total</b>			<b>362,700.00</b>				
PHA WIDE	Operations	1406		37,814.00				
	Administrative	1410		48,390.00				
	1410 Salaries: Executive Director, Dep. Director Controller, Capital Improvement Manager Accounting Clerks, Maintenance Foreman.							
	Architech & Engineering	1430		35,000.00				
	<b>PHA Wide Total</b>			<b>121,204.00</b>				
	<b>Grant Total</b>			<b>483,904.00</b>				

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

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

**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  
**Expires 4/30/2011**

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Tioga County Housing Authority				Federal FFY of Grant: 2012	
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PA 50-1	3/1/2014		3/1/2016		
PA 50-2	3/1/2014		3/1/2016		
PA 50-3	3/1/2014		3/1/2016		
PA 50-4	3/1/2014		3/1/2016		
PA 50-5	3/1/2014		3/1/2016		
PA 50-6	3/1/2014		3/1/2016		
PA 50-7	3/1/2014		3/1/2016		
PA 50-8	3/1/2014		3/1/2016		
PA 50-9	3/1/2014		3/1/2016		
PA 50-10	3/1/2014		3/1/2016		
PA 50-11	3/1/2014		3/1/2016		
PA 50-12	3/1/2014		3/1/2016		
PHA WIDE	3/1/2014		3/1/2016		

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

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

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						<input checked="" type="checkbox"/> Original 5-Year Plan
Tioga County Housing Authority						<input type="checkbox"/> Revision No.: _____
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	AMP-1 1450 Site Improvement	Annual Statement	0.00	13,000.00	19,000.00	10,000.00
C.	AMP-1 1460 Dwelling Structures		80,000.00	72,000.00	99,500.00	251,000.00
	AMP-1 1465.1 Dwelling Equipment		0.00	92,000.00	0.00	0.00
D.	AMP-1 1470 Non-Dwelling Structures		0.00	1,000.00	0.00	0.00
	AMP-1 1475 Non-Dwelling Equipment		39,000.00	0.00	0.00	0.00
	AMP-2 1450 Site Improvement		0.00	40,000.00	0.00	12,000.00
	AMP-2 1460 Dwelling Structures		0.00	277,000.00	98,000.00	73,000.00
	AMP-2 1465.1 Dwelling Equipment		55,000.00	12,000.00	26,000.00	0.00
	AMP-2 1470 Non-Dwelling Structure		0.00	0.00	0.00	0.00
	AMP-2 1475 Non-Dwelling Equipment		0.00	0.00	0.00	16,000.00
	AMP-3 1450 Site Improvement		35,000.00	0.00	44,000.00	47,000.00
	AMP-3 1460 Dwelling Structures		240,000.00	138,000.00	314,000.00	310,000.00
	AMP-3 1465.1 Dwelling Equipment		0.00	6,000.00	0.00	48,000.00
	AMP-3 1470 Non-Dwelling Structure		0.00	5,000.00	3,500.00	0.00
	AMP-3 1475 Non-Dwelling Equipment		0.00	0.00	0.00	12,000.00
	PHA Wide 1406 Operations		32,677.50	65,000.00	60,000.00	75,000.00
	PHA Wide 1410 MGT Fees		55,297.50	65,000.00	60,000.00	75,000.00
	PHA Wide 1411 Audit		0.00	0.00	0.00	0.00
	PHA Wide 1430 Fees & Costs Architech & Engineering		31,000.00	45,000.00	45,000.00	45,000.00
	Grand Total		567,975.00	831,000.00	769,000.00	974,000.00











Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: 4 FFY Grant: 2015 PHA FY: 2016				Activities for Year: 5 FFY Grant: 2016 PHA FY: 2017			
	Development Name/Number	Major Work Categories	Qty	Estimated Cost	Development Name/Number	Major Work Categories	Qty	Estimated Cost
See Annual Statement	<b>AMP 3</b>				<b>AMP 3</b>			
	PA 50-6	1460			PA 50-6	1460		
		Replace Air Make Up Units	2	50,000.00		Replace exterior steel doors	8 Dr	10,000.00
		Replace Generator	1	65,000.00		Install new water valves & Pressure regul.	4 Valves	3,000.00
		Replace Range Hood add fire supression	48	15,000.00				
		<b>PA 50-6 TOTAL</b>		<b>130,000.00</b>				
	PA 50-7	1460				1475		
		Replace elec. Outlets, fans, lights	20	5,000.00		New zero turn mower	1	12,000.00
		Upgrade smoke detectors add CO2 sensor	20	10,000.00		<b>PA 50-6 TOTAL</b>		<b>25,000.00</b>
		<b>PA 50-7 TOTAL</b>		<b>15,000.00</b>	PA 50-7	1450		
						Install exterior lighting around Bld	12	12,000.00
	PA 50-9	1460				1465		
		Replace Emerg Call System	1	5,000.00		Replace 20 refrigerators	20	8,000.00
		Exterior Restoration	1	30,000.00				
		Concrete replacement walks and entry	800sf	15,000.00		<b>PA 50-7 TOTAL</b>		<b>20,000.00</b>
		<b>PA 50-9 TOTAL</b>		<b>50,000.00</b>	PA 50-9	1460		
						Replace generator	1	60,000.00
	PA 50-10	1450				Replace water riser	1	45,000.00
		Install exterior lighting fixtures	6	5,000.00		1465		
		1460				Replace refrigerators	50	20,000.00
		Replace Lighting	60	5,000.00		<b>PA 50-9 TOTAL</b>		<b>125,000.00</b>
		Replace roofing on 6 buildings	6 Bld	60,000.00	PA 50-10	1450		
		Replace all washer boxes	20 Un	5,000.00		Landscaping improvements	6 Bld	5,000.00
		<b>PA 50-10 TOTAL</b>		<b>75,000.00</b>		Install concrete patio's	20	15,000.00
	PA 50-11	1450				1460		
		Resurface Elderly Parking Lot	1	15,000.00		Replace front & Rear doors	20	40,000.00
		Install exterior lighting around building:	10	4,000.00		Replace boilers & Circulating pumps	20	40,000.00
		1460			PA 50-11	1450		
		Replace Range Hood add fire supression	30	9,000.00		Install concrete patio's	20	15,000.00
		Replace Lighting	90	5,000.00		1460		
		<b>PA 50-11 TOTAL</b>		<b>33,000.00</b>		Replace boilers & Circulating pumps	30	60,000.00
						1465		
	PA 50-12	1450				Replace refrigerators	20	8,000.00
	Remove Trees & Landscaping	1	10,000.00		<b>PA 50-11 TOTAL</b>		<b>83,000.00</b>	
	Replace Sidewalks	100lf	10,000.00	PA 50-12	1460			
					Upgrade washer machine boxes	20 units	6,000.00	
	1460				Replace boilers & Circulating pumps	20	40,000.00	
	Install Auto Door	1	8,000.00		Upgrade plumbing valves and pipes	10	6,000.00	
	CO2 and Smoke Detectors	50	20,000.00		1465			
	Replace Lighting	90	7,000.00		replace refrigerators	30	12,000.00	
	1470							
	Replace Overhead Door on Garage	1	3,500.00					
	<b>PHA 50-12 TOTAL</b>		<b>58,500.00</b>		<b>PHA 50-12 TOTAL</b>		<b>64,000.00</b>	
	AMP 3 CFP Year Total			361,500.00	AMP 3 CFP Year Total			417,000.00





# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Tioga County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

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)

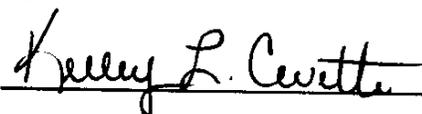
Name of Authorized Official

Kelley L. Cevette

Title

Executive Director

Signature



Date (mm/dd/yyyy)

4-4-2012

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Tioga County Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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 Federalagency 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.)

Forestview Manor, Forestview Dr., Elkland, Tioga County, PA 16920

Wapiti Apts, Pattison Ext, Elkland, Tioga County, PA 16920

Riverside Manor, Race St., Westfield, Tioga County, PA 16950

Hillview Apts, North St., Lincoln St., Westfield, Tioga County, PA 16950

Nelson Apts., Capital Dr., Pease Hill, Beechers Square, Nelson, Tioga County, PA 16940

Lawrenceville Apts., Main St., Center St., Mechanic St., State St., Lawrenceville, Tioga County, PA 16929

Sherwood Manor, Novelty Place, Mansfield, Tioga County, PA 16933

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

Kelley L. Cevette

Title

Executive Director

Signature

x *Kelley L. Cevette*

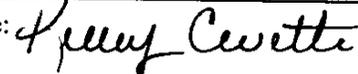
Date

4-4-2012

**DISCLOSURE OF LOBBYING ACTIVITIES**  
 Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
 (See reverse for public burden disclosure.)

Approved by OMB

0348-0046

<b>1. Type of Federal Action:</b> Grant	<b>2. Status of Federal Action:</b> Initial Award	<b>3. Report Type:</b> Initial Award
<b>4. Name and Address of Reporting Entity</b> Tioga County Housing Authority 4 Riverside Plaza Blossburg, PA 16912  Congressional District, if known: 4C		<b>5. If Reporting Entity in No. 4 is a Sub-Awardee, Enter Name and Address of Prime:</b> N/A  Congressional District, if known:
<b>6. Federal Department/Agency:</b> US Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b> Capital Fund Program  CFDA Number, if applicable:	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI): N/A no Lobbying Activities Proposed	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI): N/A	
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 of entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and 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 that \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: Kelley L. Cevette Title: Executive Director Telephone No: 570-638-2151      Date: 4-4-2012	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev 4-2012)

**Tioga County Housing Authority  
Advisory Board Meeting**

**Wednesday, February 1, 2012 Noon  
Pinnacle Towers Wellsboro, Pa.**

**Present:** Ira Sherman – Pinnacle Towers  
Dale Sherman – Pinnacle Towers  
Frances Gillen – Pinnacle Towers  
Charles Keyser – Riverside Manor  
Theodore Roy – Park Hill Manor  
Maxine Roy – Park Hill Manor  
Margaret Rice – Park Hill Manor  
Josephine Miller – Riverside Park  
Tammy Brown – Taber Townhouses  
Nell Bergstresser – Riverside Park  
Virginia Case – Sherwood Manor  
James Herron – Beecher Square  
Gary Bradford - Nelson Family Housing  
Marilyn Wodarski – Forestview Manor  
Jim McIntosh – Van Driver TCHA  
Cindy Roupp – TCHA  
Nancy Smith – TCHA  
Kelley Cevette – TCHA  
Sean Sember- TCHA  
Amy Walters – TCHA  
Jason Sawyer – TCHA  
Dan Styborski – TCHA

Executive Director, Kelley Cevette, welcomed everyone to the annual Advisory Board Meeting and had everyone introduce themselves with their name and where they resided.

Minutes from the February 4, 2011 meeting were reviewed. On motion by Ted Roy and seconded by Nell Bergstresser the minutes were accepted. All members were in favor.

Ms. Cevette reviewed the purposed of the Tenant Advisory Board, its background and history of the preparation of the Annual Plan. She commented on the continued High Performance Standard the Authority has maintained, the continued subsidy to EMTA and maintaining the Homemakers Assistance Program. Nell Bergstresser inquired whether the Housing Authority always had to take the lowest bidder. Ms Cevette explained the bidding process and our requirements under HUD.

Ms. Cevette reviewed the Smoke-Free policy of the Housing Authority. She explained that the policy was being enforced and if someone was found to be in violation of the policy on three separate occasions they would be requested to leave and the eviction process would begin.

The Resident Services Coordinator, Sean Sember, was introduced by Ms. Cevette. She stated that she has been very pleased with Sean's involvement with some tenants who were in violation of their leases and how successful he has been in assisting these tenants in remaining in their apartments. There was consensus that Sean has been an asset to the Authority.

Ms. Cevette stated that there were no changes to the current Admission and Occupancy Policy, but there was concern expressed by some residents and staff about safe management of scooters in the facilities. Tenants questioned the liabilities that went along with the operation of scooters and how some tenants lost their driver's license but could still operate the scooters. Ms. Cevette stated that she had been in contact with our local HUD representative to inquire of appropriate ways to manage the safe operation of these scooters in our buildings.

Board Members were presented with items that are to be included in the 2012 Capital Grant application. The members were informed that any additional suggestions to improvements will be taken into consideration before the final Agency Plan is submitted.

#### Resident Suggestions:

James Herron stated the porch roofs for his building was a great idea, but wondered about making them translucent so that sun would be able to shine through. He was concerned about the lack of light into the building. Jason Sawyer explained that there would be lights placed outside the doors to allow for better lighting and emphasized the appearance and how the roofs would provide a place to sit outside.

Nell Bergstresser complimented the Authority on how wonderful the new siding looks on Riverside Manor, but questioned the selection of some of the colors for the shutters. She requested awnings to be installed above the exterior doors. Jason indicated that he did not think that they would be feasible because of the height of the doors but he would look into it.

Theodore Roy commented on how wonderful the new handrails look out front of Park Hill Manor and also how wonderful it was to have them in place. He asked if a similar handrail could be installed between the building and the lower parking lot. He states that it appears that some people have fallen moving from the building to the parking area. Jason also stated that he would review the area that is being discussed.

Virginia Case asked about sparks being created when she turns the lights on in her apartment. It was determined that the spark is actually just static electricity and is only a problem for her during the winter. It was recommended that she review her foot wear in her apartment. She also stated some tenants have asked for a larger change machine in the laundry room, but personally believes they just need to get more change during the week.

Francis Gillen asked about cameras being placed on each floor in Pinnacle Towers. There was concern of things coming up missing in the collection of rummage sale items. Ms. Cevette stated that this would be reviewed to see if it how it could be added to our list.

Marilyn Wodarski asked about putting peep hole lower in the doors for people in wheel chairs and those on scooters. This issue will be reviewed by Jason with maintenance to determine the possibility. Also Marilyn asked about the amount of lights that are on in front of elevators 24 hours a day. She thought that there ought to be a way to lessen to save electricity and also so make a more pleasant environment for the apartments located around the elevators. This issue will also be reviewed by Jason and our maintenance staff.

Hearing no further comments Ms. Cevette informed the Board members as to the Public Hearing scheduled for March 13, 2012 at Pinnacle Towers in Wellsboro. Members were thanked for their participation and the meeting was adjourned.

## Minutes

### Tioga County Housing Authority

March 28, 2012

The regular meeting of the Tioga County Housing Authority was held in the conference area of the Lambs Creek Inn, Mansfield, Pa. The following Board members were present; Jody Thomas, Peter Lupkowski, and Leo Parchesky. Also present were Kelley Cevette, Dan Styborski, Pricilla Walrath, solicitor, Jason Sawyer, Cheryl Clark from the Williamsport Gazette and Rebecca Hazen from the Wellsboro Gazette.

The meeting was called to order by Chair person Jody Thomas. At her direction the minutes of the February 27, 2012 meeting were reviewed with no noted changes or recommendations from the board. A motion was made by Peter Lupkowski to accept the minutes as presented and it was seconded by Leo Parchesky. The minutes were unanimously accepted.

#### EXHIBIT TH 3-12-1

The report on the bills for February 2012 were presented and reviewed by the Board. Questions presented by Peter Lupkowski were addressed by Kelley Cevette. It was moved by Leo Parchesky and seconded by Peter Lupkowski to accept the report as presented. This unanimously approved by the Board. Further the Board discussed and agreed to a streamlined version of this report which will be implemented next month.

#### EXHIBIT TH 3-12-2

The Occupancy Report for Public Housing and the status of the Section 8 voucher program were distributed for the Board's review. There were no vacancies to report for the month. The Board applauded the work of staff. In the Section 8 voucher program the Board questioned the amount we were spending each month to meet our goals and the amount that remained in reserves. They were pleased with the report and no action was needed or taken by the Board.

The financial report for January 2012 was reviewed. Peter Lupkowski questioned the wording in the report concerning HUD's funding levels. Kelley clarified the report and the Board was pleased with the explanation. Leo Parchesky moved to accept the report as written. It was seconded by Peter Lupkowski and approved by the overall Board.

#### EXHIBIT TH 3-12-3

The Resolution to approve the Annual Public Housing Agency Plan and the 5 Year Plan was presented by Kelley Cevette and Jason Sawyer. Kelley Cevette explained that there are no administrative changes to the plan for this year, but the funding for the capital grant program has been reduced by HUD for the second year in a row. The reduction this year was \$70,000 as it was the year before, thus totaling \$140,000 fewer dollars for improvements over the past two years. Jason Sawyer explained our emphasis was on major mechanical repairs and purchases, in order to keep our buildings in good operating condition. A brief discussion ensued of prioritizing our spending with a motion to adopt the resolution made by Peter Lupkowski and seconded by Leo Parchesky. The Board approved the resolution unanimously.

EXHIBIT TH 3-12-4

Kelley Cevette also presented the contract renewal with United Christian Ministries for the Single Room Occupancy Grant. There a few questions about the overall operation of this program and it was reported that it appears to be professional, and documents have been submitted timely and accurately. Leo Parchesky moved to approve the resolution certifying the contract renewal. The motion was seconded by Peter Lupkowski and approved by the board.

EXHIBIT TH 2-12-5

In other board information Kelley Cevette gave an overview of the recent PAHRA conference in Harrisburg and the workshop she attended with Senator Yaw. Pricilla Walrath reported that the transfer of the property in Nelson has been offered to the Nelson community with them assuming the transfer costs and she has not heard back from them. Kelley Cevette also gave a quick review of the progress on the Liberty Cottages.

On motion duly made by Leo Parchesky and seconded by Peter Lupkowski the meeting of the Housing Authority was adjourned.

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Chairperson