

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: Hosung Authority of the City of Pawtucket, Rhode Island PHA Code: RI002 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): 04/01/20112																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 1087 Number of HCV units: 721																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																										
	<table border="1"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
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PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	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: <p style="text-align: center;">Provided safe, decent, and affordable housing and to establish programs that will educate, enhance and empower the lives of all the people in the community we serve.</p>																										
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. <p>Maximize the number of housing units by employing effective maintenance and management policies to minimize the number of public housing units off-line, reducing turn-over time for vacated public housing units, and by reducing the time needed to renovate public housing units.</p> <p>Increase the number of affordable housing units by applying for additional Section 8 units, should they become available and by pursuing housing resources, other than public housing or Section 8 tenant-based assistance.</p> <p>Target available assistance to families at or above 30% of AMI by adopting rent policies to support and encourage work.</p> <p>Target available assistance to families with disabilities by applying for special-purpose vouchers for families with disabilities if they become available. Will affirmatively market to local non-profit agencies that assist families with disabilities.</p> <p>Implement a Pilot program to assist the chronically homeless population.</p>																										

6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: See (A) below</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. A. Increase minimum rent to \$ 50 B. Central office of the Housing Authority, 214 Roosevelt Avenue, Pawtucket, RI</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>The Housing Authority has no Hope VI demolition or disposition plans , or conversion of Public Housing plans or activity in place at this time. The Authority does have a Public Housing homeownership program in place with two unit’ remaining.(RI00200007). The PHA seeks to dispose of one of the two remaining homeownership units outside of the homeownership program in its current physical conditions at market rate. The unit is (0014. The Section 8 Program also has a home ownership program with 4 current participants.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. See attached schedule</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See attached schedule</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input checked="" type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. See attached schedule</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. See attached schedule</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan. See attached schedule</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” Our definition of a “Significant amendment” or “substantial deviation” is 25% in our Capital Fund budget item or a amendment to our ACOP policy or Section 8 Administrative Plan</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

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

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

- (a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

HOUSING AUTHORITY OF THE CITY OF PAWUCKET, RHODE ISLAND

FIVE YEAR PLAN AND ANNUAL PLAN SUBMITTAL

FOR FISCAL YEARS 2012-2017

SECTION 9 SCHEDULE OF HOUSING NEEDS

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	2,782	5	5	4	4	4	City wide
Income >30% but <=50% of AMI	765	5	5	4	4	4	City wide
Income >50% but <80% of AMI	102	3	3	3	4	3	City wide
Elderly	2144	3	3	23	2	2	City wide
Families with Disabilities	250	5	5	4	4	4	City wide
Hispanic	300	5	5	4	4	4	City wide
Black	150	5	5	4	4	4	City wide
Asian	20	5	5	4	4	4	City wide
Other	20	5	5	4	4	4	City wide

HOUSING AUTHORITY OF THE CITY OF PAWTUCKET, RHODE ISLAND

FIVE YEAR PLAN AND ANNUAL PLAN SUBMITTAL

FOR FISCAL YEARS BEGINNING 2012-2017

HUD FORM 50075

SECTION 9.1 STRATEGIES TO ADDRESS HOUSING NEEDS

1. Reduce turnover time for vacated housing units
2. Maintain or increase Section 8 lease up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
3. Apply for special purpose vouchers targeted to families with disabilities should they become available
4. Maintain or increase Section 8 lease up rates by effectively screening Section 8 applicants to increase owners acceptance of the program
5. Maintain rent policies that support and encourage work.
6. Increase inventory of handicap accessible units. 12 units at Galego Court are to be converted into nine handicap units and three sensory.
7. Develop a pilot program to assist the chronically homeless.

HOUSING AUTHORITY OF THE CITY OF PAWTUCKET, RHODE ISLAND

FIVE YEAR PLAN AND ANNUAL PLAN SUBMITTAL

FOR FISCAL YEARS 2011-2015

HUD FORM 50075

SECTION 10 ADDITIONAL INFORMATION

PROGRESS IN MEETING MISSION AND GOALS

Section 10(A) Progress in Meeting Mission and Goals

1. During fiscal year April 1, 2010 to March 31,2011 the Authority maintained an average occupancy rate of 98.4%. During the nine months of the current fiscal year the Authority has maintained an occupancy percentage of 98.7 %.
2. **Section 10 (B) Significant Amendment and Substantial Deviation/Modification Definition**

The Housing Authority of the City of Pawtucket, Rhode Island will consider a change or modification to the Waiting List preferences and/or a 25% change or modification to the amount of Capital Fund work item as a significant amendment or substantial modification/deviation dollar to our PHA Plan.

Attachment A

NOTICE REQUIREMENTS

In compliance with federal statute regarding the development of the five-year plan, the agency conducted the following hearings.

Publication of proposed five-year and annual plans (Draft)	Date: 12/05/2011
Family development meetings Galego Court 560 Prospect Street	Date: December, 5, 2011 December 14, 2011
Senior/ handicapped development meetings Fogarty Manor Burns Manor Kennedy Manor St. Germain Manor	Date: November 28, 2011 December, 19, 2011 November 30, 2011 November 30, 2011
Public hearing at Fogarty Manor	Date: December 12, 2011
Board approval	Date: December 21, 2011

Attendance sheets and responses to comments received are contained in the "Attachments" at the end of the One Year Plan.

Attachment B

STATEMENT OF PROGRESS FOR MISSION AND GOALS

The Housing Authority of The City of Pawtucket has submitted its goals and objectives within the PHA Plan and certifies that it has submitted its progress report within the goals and objectives of the 5 year plan.

Signature on file

Stephen A. Vadnais, Executive Director
Pawtucket Housing Authority

Attachment C

NOTICE OF NO SIGNIFICANT DEVIATION, MODIFICATION OR ADDMENDMENT TO THE FIVE-YEAR PLAN

Please be advised that for this submittal of our annual plan the Pawtucket Housing Authority has not made any significant deviations, modifications, or amendments to our five- year plan. The PHA does not foresee any need in the future to make any changes to the plan, such as a change in our preferences for our wait list or eligibility requirements for housing.

Sincerely

Stephen A. Vadnais, Executive Director
Pawtucket Housing Authority

Attachment D

HOUSING AUTHORITY OF THE CITY OF PAWTUCKET. DECONCENTRATION POLICY

To deconcentrate poverty the Pawtucket Housing Authority in compliance with 24 CFR 903 will:

1. Determine average income of all families residing in all covered developments
 2. Determine average income of all families residing in each covered development
 3. Determine which developments are outside of the established income range. The established income range is defined as those covered developments where the average income is between 85 percent and 115 percent (inclusive of those percentages) of the PHA-wide average for covered developments.
-

Attachment E

PHA Certifications of Compliance with the PHA Plans and Related Regulations Form

This form has been completed and signed by Stella Carrera., Chairperson, and Board of Commissioners. Signed copy will be sent with the hard copy.

Attachment F

The Certification by State of Local Official of PHA Plans has been signed by Donald R. Grebien, Mayor of the City of Pawtucket.

Signed copy will be sent with the hard copy of the Plan.

Attachment G

The form, Certification for a Drug-Free Workplace has been signed by Stephen A. Vadnais, Executive Director of the Housing Authority of the City of Pawtucket.

Signed copy will be sent with the hard copy of the Plan.

Attachment H

The form, **Disclosure of Lobbying Activities**, has been completed and signed by **James J. Goff, Acting, Executive Director of the Housing Authority of the City of Pawtucket.**

A hard copy of this form will be enclosed with the Plan.

Attachment I

Resident Advisory Board

Members: -

- Lourdes Mosser, Burns Manor
 - Walter Lepucki, St. Germain Manor
 - Matt Hathor, Kennedy Manor
 - Nakeecha Roberts, Galego Court
 - Sandy Clarke, Fogarty Manor
 - Cynthia Pimental, 560 Prospect Street
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Attachment J

HOUSING AUTHORITY OF THE CITY OF PAWTUCKET BOARD OF COMMISSIONERS

Chairperson, Stella Carrera
Vice Chairperson, Kevin J. Rabbitt
Commissioner, Harvey E. Goulet, Jr.
Commissioner, Mr, Robert Ricci
Resident Commissioner, Diane Legrand

Ms. Diane Legrand is our current Resident Commissioner at the The Pawtucket Housing Authority.

Attachment K

PAWTUCKET HOUSING AUTHORITY COMMUNITY SERVICE AND SELF SUFFICIENCY POLICY

A. Background and Purpose

The Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes or other activities that help an individual toward self sufficiency and economic independence. This is a requirement of the Public Housing Lease.

B. Definitions

Community Service is volunteer work which includes:

- Work at the Authority to help improve physical conditions;
- Work at the Authority to help with children's programs;
- Work at the Authority to help with senior programs;
- Working through resident organization to help other residents with problems, serving as an Officer in a Resident organization, serving on the Resident Advisory Board; and
- Caring for the children of other residents so they may volunteer.
- Other non-profit community organizations as approved by the Pawtucket Housing Authority such as work at soup kitchens, churches, schools, and community centers.
- Attending classes or workshops that improve skills such as parenting classes, and workshops offered through the Housing Authority, local community organizations or your child's school or daycare.
- The Authority may consider other forms of volunteer work if special circumstances exist

NOTE: Political activity is excluded.

Self Sufficiency Activities - activities that include, but are not limited to:

- Job readiness programs;
- Job training programs;
- GED classes;
- Substance abuse or mental health counseling;
- English proficiency or literacy (reading) classes;
- Apprenticeships;
- Budgeting and credit counseling;
- Any kind of class that helps a person toward economic independence; and
- Full time student status at any school, college or vocational school.

Exempt Adult - an adult member of the family who

- Is 62 years of age or older;
- Has a disability that prevents him/her from being gainfully employed;
- Is the caretaker of a disabled person;
- Is working at least 30 hours per week, or
- is participating in welfare to work program.

Special Circumstances – mean

- specific facts and specific circumstances
- related to a particular individual
- that demonstrate to the reasonable satisfaction of the Authority
- hardship as related to that particular individual's compliance with the requirements of law and regulations related to this policy and
- considering such hardship, it would be manifestly unjust to take official action against that particular individual under the terms of this policy if a reasonable alternative exists
- The Authority may find – but is not required to find – that Special Circumstances exist on a case-by-case basis

C. Requirements of the Program

1. The eight (8) hours per month may be either volunteer work, as defined herein under Community Service, or self sufficiency program activity, or a combination of the two.
2. At least eight (8) hours of activity must be performed each month. An individual may not skip a month and then double up the following month, unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule.
3. Activities must be performed within the community and not outside the jurisdictional area of the Authority.
4. Noncompliance with the Requirements of the Program will result in a non-renewal of, or termination of a particular lease

5. Family obligations

- At lease execution or re-examination after January 1, 2006, all adult members (18 or older) of a public housing resident family must
 1. provide documentation that they are exempt from Community Service requirement if they qualify for an exemption, and
 2. sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in non-renewal or termination of their lease.
- On a monthly basis, non-exempt family members must present a completed documentation form (to be provided by the Authority) of activities performed over the previous month. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed.
- If a family member is found to be noncompliant, the Authority will issue a notice of noncompliance to the head of household allowing the head of household a right to cure the noncompliance unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule at a private conference. If the deviation is allowed, the head of household, and the noncompliant family member, if applicable, will sign an agreement to make up the deficient hours over the next month. If the head of household fails to show for a private conference, the Authority may proceed to send the head of household a notice of termination of tenancy that includes an option for the head of household to request a grievance hearing pursuant to the Authority's Grievance Procedure
- If the head of household does not request a Grievance Hearing, or if the matter remains unresolved after proceeding through the Grievance Procedure, the Authority may proceed to file an eviction action against the leaseholder/head of household and the entire family will have to vacate unless the noncompliant member agrees to move out of the unit.

6. Change in exempt status:

- If, during the year, a non-exempt person becomes exempt, it is his/her responsibility to report this to the Authority and provide written documentation of such.
- If, during the year, an exempt person becomes non-exempt, it is his/her responsibility to report this to the Authority. The Authority will provide the person with the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

D. Authority obligations

1. To the greatest extent possible and practicable, the Authority will:
 - provide in-house opportunities for volunteer work or self sufficiency programs.
2. The Authority will provide the family with exemption verification forms and Recording/Certification documentation forms and a copy of this policy at initial application and at lease execution.
3. The Authority will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Residents may use the Authority's Grievance Procedure if they disagree with the Authority's determination.
4. Noncompliance of family member:
 - On a monthly basis and/or at least thirty (30) days prior to annual re-examination and/or lease expiration, the Authority will begin reviewing the exempt or non-exempt status of family members;
 - If a family member is found to be noncompliant, the Authority will issue a notice of noncompliance to the head of household allowing the head of household a right to cure the noncompliance unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule at a private conference. If the deviation is allowed, the head of household, and the noncompliant family member, if applicable, will sign an agreement to make the deficient hours over the next month. If the head of household fails to show for a private conference, the Authority may proceed to send the head of household a notice of termination of tenancy that includes an option for the head of household to request a grievance hearing pursuant to the Authority's Grievance Procedure or the Authority may refuse to renew the lease.
 - If the head of household does not request a Grievance Hearing, or, if the matter remains unresolved after proceeding through the Grievance Procedure, or if the Authority refuses to renew the lease, the Authority may proceed to file an eviction action against the lease holder/head of household and the entire family will have to vacate unless the noncompliant member agrees to move out of the unit.

Attachment L

SECTION 8 HOMEOWNERSHIP PROGRAM

CAPACITY STATEMENT

The Housing Authority of the City of Pawtucket certifies to the following in its demonstration to administer a Homeownership Program under its Section 8 Housing Voucher Program:

1. The PHA will establish a minimum homeowner down payment requirement of at least three percent and require that at least one percent of the down payment come from the family's resources;

2. The PHA plans to require that financing for purchase of a home under its Section 8 Homeownership Program will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.

Part 1: Summary		
PHA Name: The Housing Authority of the City of Pawtucket	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2012 FFY of Grant Approval:

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	-			
3	1408 Management Improvements	-			
4	1410 Administration (may not exceed 10% of line 21)	141,419			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	101,252			
8	1440 Site Acquisition				
9	1450 Site Improvements	-			
10	1460 Dwelling Structures	618,886			
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	-			-
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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

Part 1: Summary						
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: 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 Period Ending <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1		
		Original	Revised 2	Obligated	Expended	
18a	1501 Collateralization of Debt Service paid by PHA					
18ba	9000 Collateralization of Debt Service paid via System of Direct Payment	508,888				
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum lines 2-19)	1,370,445				
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Security 504 Activities					
23	Amount of Line 20 Related to Security Soft Costs Activities					
24	Amount of Line 20 Related to Security Hard Costs Activities					
25	Amount of Line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date:		Signature of Public Housing Director		
				Date		

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000002								
Galego Court								
Operations	Operations	1406		-				
			TOTAL	-	-	-	-	
Management								
Improvements	Security Program	1408		-				
	Resident Service Programs	1408		-				
			TOTAL	-	-	-	-	
Administration	Management Fee	1410		21,336				
			TOTAL	21,336	-	-	-	
Fees and Costs	A & E Fees Front Porch Settlement Corr	1430		50,000				
			TOTAL	50,000	-	-	-	
Dwelling Structures	Front Porch Spawling Settlement Abatem	1460		318,886				
			TOTAL	318,886	-	-	-	
Debt Service	Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	9000		162,597				
			TOTAL	162,597	-	-	-	
Grand Total				552,819	-	-	-	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the			Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2012	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000003								
Kennedy Manor								
Administration	Management Fee	1410		22,247				
			TOTAL	22,247	-	-	-	
Fees and Costs	A & E Fees for Building Envelope	1430		20,000				
			TOTAL	20,000	-	-	-	
Dwelling Structures	Building Envelope	1460		100,000				
			TOTAL	100,000	-	-	-	
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		118,105				
			TOTAL	118,105	-	-	-	
Grand Total				260,352	-	-	-	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000004								
Fogarty Manor								
Administration	Management Fee	1410		32,525				
			TOTAL	32,525	-	-	-	
Fees and Costs		1430		12,500				
	Architectural & Engineering Fees							
			TOTAL	12,500	-	-	-	
Dwelling Structures	Building Exterior Spawling Remediation	1460		100,000				
			TOTAL	100,000	-	-	-	
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		173,995				
			TOTAL	173,995	-	-	-	
Grand Total				319,020	-	-	-	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000006								
Burns Manor								
Administration	Management Fee	1410		12,489				
			TOTAL	12,489	-	-	-	
Fees and Costs	Community Room Structural Review	1430		18,752	-			
			TOTAL	18,752	-	-	-	
Dwelling Structure	Storm Door replacement	1460		100,000				
	Community Room Structure Repair			50,000				
			TOTAL	150,000	-	-	-	
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		54,191				
			TOTAL	54,191	-	-	-	
Grand Total				235,432	-	-	-	

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

2 To be completed for Performance and Evaluation Report

CAPITAL FUND PROGRAM TABLES START HERE

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name: Housing Authority of the City of Pawtucket Housing Authority				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 12 PHA FY: 2013	Work Statement for Year 3 FFY Grant: 13 PHA FY: 2014	Work Statement for Year 4 FFY Grant: 14 PHA FY: 2015	Work Statement for Year 5 FFY Grant: 15 PHA FY: 2016
	Annual Statement				
HA Wide					
Operations		171,230	171,230	118,166	98,580
Management Improvements		252,567	252,568	252,568	252,568
Administration		171,230	171,230	171,230	171,230
Other Fees					
Non Dwelling Structures					
Non Dwelling Equipment					
Debt Services – Sprinkler Systems, Accessibility Improvement, etc		507,888	506,338	509,100	506,175
RI002000001 / 560 Prospect Street					
RI002000002 / Galego Court		42,750	48,000	86,875	219,500
RI002000003 / Kennedy Manor		170,625	12,813	235,000	144,825
RI002000004 / Fogarty Manor		112,500	143,666	147,500	242,500
RI002000005 / St. Germain		107,594	32,621	-	44,000
RI002000006 / Burns Manor		50,000	198,225	-	30,000
RI002000007 Scattered Sites					
Central Office Cost Center					
CFP Funds Listed for 5-year planning		1,586,383	1,536,689	1,520,439	1,709,378
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: 2 FFY Grant: 2013 PHA FY:			Activities for Year: 3 FFY Grant: 2014 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
<i>See Annual Statement</i>	RI002000001			RI002000001		
	Prospect Street			Prospect Street		
		1406 Operations	85,615		1406 Operations	85,615
		1408 Management Improvements			1408 Management Improvements	
		Resident Services Program.	46,284		Resident Services Program.	46,284
		Security Program	80,000		Security Program	80,000
		1410 Administration			1410 Administration	
		Management Fee	46,083		Management Fee	46,083
		RI002000002			RI002000002	
		Galego Court			Galego Court	
		1406 Operations	85,615		1406 Operations	85,615
		1408 Management Improvements			1408 Management Improvements	
		Resident Services Program.	46,283		Resident Services Program.	46,284
		Security Program	80,000		Security Program	80,000
	1410 Administration			1410 Administration		
	Management Fee	25,882		Management Fee	25,882	
	1430 Other Fees			1430 Other Fees		
	A & E Fees Resurface Parking	1,625		A & E Entryway Update	-	
	A& E Fees Storm Drains	3,125		Engineering review - imp bath vent	48,000	
	1450 Site Improvements			1450 Site Improvements		
	Resurface parking area @ maint garage	13,000				
	1460 Dwelling Structures			1460 Dwelling Structures		
	Storm drains	25,000				

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: 2 FFY Grant: 2013 PHA FY:			Activities for Year: 3 FFY Grant: 2014 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
<i>See</i>		9000 Debt Service			9000 Debt Service	
<i>Annual</i>		Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	162,277		Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	161,782
<i>Statement</i>						
	RI002000003			RI002000003		
	Kennedy			Kennedy		
		1410 Administration			1410 Administration	
		Management Fee	26,986		Management Fee	26,986
		1430 Other Fees - A&E			1430 Other Fees	
		A & E Parking Study	15,625		A & E Masonary Improvement	12,813
		A & E Mechanical System Review	30,000			
		1450 Site Improvements			1450 Site Improvements	
		Parking Area Improvements	125,000			
<i>See</i>		1460 Dwelling Structures			1460 Dwelling Structures	
<i>Annual</i>						
<i>Statement</i>						
		9000 Debt Service			9000 Debt Service	
		Debt Service (Furnish/Install Fire Suppression System)	117,873		Debt Service (Furnish/Install Fire Suppression System)	117,513
	RI002000004			RI002000004		
	Fogarty			Fogarty		
		1410 Administration			1410 Administration	
		Management Fee	39,454		Management Fee	39,454

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: 2 FFY Grant: 2013 PHA FY:			Activities for Year: 3 FFY Grant: 2014 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
		1430 Other Fees			1430 Other Fees	
		A & E Electrical Upgrade	12,500		A&E Fees Balcony and Door	15,963
<i>See Annual Statement</i>		1460 Dwelling Structures			1460 Dwelling Structures	
		Electric Upgrade	100,000		Balconies Update/Spauling	116,703
					Balcony Doors Replacement/Spauling	11,000
		9000 Debt Service			9000 Debt Service	
		Debt Service (Furnish/Install Fire Suppression System)	173,653.06		Debt Service (Furnish/Install Fire Suppression System)	173,123.10
	RI002000005			RI002000005		
	St. Germain			St. Germain		
		1410 Administration			1410 Administration	
		Management Fee	17,675		Management Fee	17,675
		1430 Other Fees - A&E			1430 Other Fees	
		A&E Fees Decking Review/Bathroom Update	11,955		A&E Fees Decking Review/Bathroom Update	3,625
		1460 Dwelling Structures			1460 Dwelling Structures	
		Unit Flooring Update	65,639		Unit Flooring Update	5,000
		Bathroom Updates	30,000		Bathroom Updates	23,996
	RI002000006			RI002000006		
	Burns			Burns		
		1410 Administration			1410 Administration	
		Management Fee	15,150		Management Fee	15,150

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: 2 FFY Grant: 2013 PHA FY:			Activities for Year: 3 FFY Grant: 2014 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
		1430 Other Fees			1430 Other Fees	
		Review Underground Electrical Wiring	50,000		Engineering review to increase parking	22,025
		A & E Fire Rated Door	-			
		1450 Site Improvements			1450 Site Improvements	
					Resurface and re-stripe parking area	43,000
		1460 Dwelling Structures			1460 Dwelling Structures	
<i>See Annual Statement</i>					Unit Flooring Repairs	73,200
					Bathroom shower/tub surrounds	60,000
		9000 Debt Service			9000 Debt Service	
		Debt Service (Furnish/Install Fire Suppression System)	54,084		Debt Service (Furnish/Install Fire Suppression System)	53,919
		Total CFP Estimated Cost	1,586,383		Total CFP Estimated Cost	1,536,689

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: <u>4</u> FFY Grant: 2015 PHA FY:			Activities for Year: <u>5</u> FFY Grant: 2016 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
<i>See</i>	RI002000001			RI002000001		
<i>Annual</i>	Prospect Street			Prospect Street		
<i>Statement</i>		1406 Operations	59,083		1406 Operations	49,290
		1408 Management Improvements			1408 Management Improvements	
		Resident Services Program.	46,284		Resident Services Program.	46,284
		Security Program	80,000		Security Program	80,000
		1410 Administration			1410 Administration	
		Management Fee	46,083		Management Fee	46,083
	RI002000002			RI002000002		
	Galego Court			Galego Court		
		1406 Operations	59,083		1406 Operations	49,290
		1408 Management Improvements			1408 Management Improvements	
		Resident Services Program.	46,284		Resident Services Program.	46,284
		Security Program	80,000		Security Program	80,000
		1410 Administration			1410 Administration	
		Management Fee	25,882		Management Fee	25,882
		1430 Other Fees			1430 Other Fees	
		A & E Retaining Walls	3,750		Review of heating systems	25,000
		A & E Window Well Improvements	3,125		A & E Walkway	7,500
<i>See</i>		1450 Site Improvements			1450 Site Improvements	
<i>Annual</i>		Retaining Wall Improvement	30,000		Walkways	60,000
<i>Statement</i>					Site Fencing Upgrade	24,000
					Site lighting upgrade	78,000
		1460 Dwelling Structures			1460 Dwelling Structures	
		Window Replacement	50,000		Modify or Remove Conctere Window Wells	25,000

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: <u>4</u> FFY Grant: 2015 PHA FY:			Activities for Year: <u>5</u> FFY Grant: 2016 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
		9000 Debt Service			9000 Debt Service	
		Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	162,665		Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	161,730
	RI002000003			RI002000003		
	Kennedy			Kennedy		
		1410 Administration			1410 Administration	
		Management Fee	26,986		Management Fee	26,986
		1430 Other Fees			1430 Other Fees	
		A&E Fees weather proofing	15,000		A&E Fees for window and doors	13,425
<i>See</i>		1450 Site Improvements			1450 Site Improvements	
<i>Annual</i>		Electric Wiring Update	100,000			
<i>Statement</i>						
		1460 Dwelling Structures			1460 Dwelling Structures	
		Masonry Improvement Weather Proofing	120,000		Replace windows and doors	107,400
					Trash compactor	24,000
		9000 Debt Service			9000 Debt Service	
		Debt Service (Furnish/Install Fire Suppression System)	118,154		Debt Service (Furnish/Install Fire Suppression System)	117,476
	RI002000004			RI002000004		
	Fogarty			Fogarty		
		1410 Administration			1410 Administration	
		Management Fee	39,454		Management Fee	39,454
		1430 Other Fees			1430 Other Fees	
		A & E Masonary/Weather-proofing	15,000		A & E Parking Lot Improvement	12,500
		A & E Vents	12,500			

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages - Work Activities

Activities for Year 1	Activities for Year: <u>4</u> FFY Grant: 2015 PHA FY:			Activities for Year: <u>5</u> FFY Grant: 2016 PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
<i>See</i>		1460 Dwelling Structures			1460 Dwelling Structures	
<i>Annual</i>		Masonry review, repair & repoint	120,000		replace kitchen stoves	30,000
<i>Statement</i>					Parking Lot Improvements	100,000
					Ventilation System	100,000
		9000 Debt Service			9000 Debt Service	
		Debt Service (Furnish/Install Fire Suppression System)	174,068		Debt Service (Furnish/Install Fire Suppression System)	173,068
	RI002000005			RI002000005		
	St. Germain			St. Germain		
		1410 Administration			1410 Administration	
		Management Fee	17,675		Management Fee	17,675
		1430 Other Fees			1430 Other Fees	
					Review of Kitchen / Bath Ventilation System	4,000
					A&E Fees	10,000
		1460 Dwelling Structures			1460 Dwelling Structures	
					Replace unit stoves	30,000
<i>See</i>	RI002000006			RI002000006		
<i>Annual</i>	Burns			Burns		
<i>Statement</i>		1410 Administration			1410 Administration	
		Management Fee	15,150		Management Fee	15,150
		1460 Dwelling Structures			1460 Dwelling Structures	
					Replace unit stoves	30,000
		9000 Debt Service			9000 Debt Service	
		Debt Service (Furnish/Install Fire Suppression System)	54,213		Debt Service (Furnish/Install Fire Suppression System)	53,902
		Total CFP Estimated Cost	1,520,439		Total CFP Estimated Cost	1,709,378

Part I: Summary		
PHA Name: The Housing Authority of the City of Pawtucket	Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2008 FFY of Grant Approval:

Type of Grant:
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending 09/30/2011 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	-	200,000	200,000	200,000
3	1408 Management Improvements	222,217	164,666	164,666	164,666
4	1410 Administration (may not exceed 10% of line 21)	161,000	161,000	161,000	161,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	120,000	120,000	120,000	120,000
8	1440 Site Acquisition				
9	1450 Site Improvements	358,000	-		-
10	1460 Dwelling Structures	750,000	942,514	942,514	856,622
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	-	23,037	23,037	23,037
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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

Part I: Summary						
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2008 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: 1		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 09/30/2011				<input type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1		
		Original	Revised 2	Obligated	Expended	
18a	1501 Collateralization of Debt Service paid by PHA					
18ba	9000 Collateralization of Debt Service paid via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum lines 2-19)	1,611,217	1,611,217	1,611,217	1,525,326	
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Security 504 Activities					
23	Amount of Line 20 Related to Security Soft Costs Activities	121,509	45,548	45,548	45,548	
24	Amount of Line 20 Related to Security Hard Costs Activities	-	11,187	11,187	11,187	
25	Amount of Line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date:		Signature of Public Housing Director		
				Date		

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 CFFP (Yes/No): Replacement Housing Grant No:				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000001								
560 Prospect Street								
Operations	Operations	1406		-	75,000	75,000	75,000	
			TOTAL	-	75,000	75,000	75,000	
Management								
Improvements	Security Program	1408		60,755	22,774	22,774	22,774	
	Computer Software and Training	1408		2,500	1,601	1,601	1,601	
	Resident Service Programs	1408		42,854	58,176	58,176	58,176	
			TOTAL	106,109	82,551	82,551	82,551	
Administration	Administrative Fees	1410		43,470	43,249	43,249	43,249	
			TOTAL	43,470	43,249	43,249	43,249	
Fees and Costs	Architectural Fees	1430		61,800	61,902	61,902	61,902	Complete
			TOTAL	61,800	61,902	61,902	61,902	
Site Work	Walkways and Tree Removal	1450		358,000	-			
			TOTAL	358,000	-	-	-	
Dwelling Structures	Lead Based Paint Abatement	1460		250,000	169,540	169,540	169,540	
	Crawl Space Ladders	1460		110,000	100,123	100,123	100,123	
	Handicap Accessible Entrance	1460			46,430	46,430	46,430	
	Re-Roofing, Painting, Fascia, Soffit Repa	1460		140,000	170,100	170,100	84,208	
			TOTAL	500,000	486,193	486,193	400,301	
Non-Dwelling Equip.	Security Camera	1475		-	4,399	4,399	4,399	
			TOTAL	-	4,399	4,399	4,399	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 CFFP (Yes/No): Replacement Housing Grant No:				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000002								
Galego Court								
Operations	Operations	1406		-	125,000	125,000	125,000	
			TOTAL	-	125,000	125,000	125,000	
Management								
Improvements	Security Program	1408		60,754	22,774	22,774	22,774	
	Computer Software and Training	1408		2,500	-	-	-	
	Resident Service Programs	1408		42,854	58,176	58,176	58,176	
			TOTAL	106,108	80,950	80,950	80,950	
Administration	Administrative Fees	1410		24,150	24,291	24,291	24,291	
			TOTAL	24,150	24,291	24,291	24,291	
Fees and Costs	Architectural Fees	1430		23,400	45,407.20	45,407	45,407	
			TOTAL	23,400	45,407	45,407	45,407	
Dwelling Structures	Lead Based Paint Abatement	1460		250,000	356,641	356,641	356,641	
			TOTAL	250,000	356,641	356,641	356,641	
Non-Dwelling Equipn	Lawn Mower Tractor	1475		-	11,850	11,850	11,850	
			TOTAL	-	11,850	11,850	11,850	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 CFFP (Yes/No): Replacement Housing Grant No:				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000003								
Kennedy Manor								
Operations	Operations	1406						
			TOTAL	-	-			
Management								
Improvements	Security Program	1408						
	Computer Software and Training	1408		2,500	-	-		
	Resident Service Programs	1408						
			TOTAL	2,500	-	-	-	
Administration	Administrative Salaries	1410		25,760	25,328	25,328	25,328	
			TOTAL	25,760	25,328	25,328	25,328	
Fees and Costs	Architectural Fees	1430		9,600	-	-		
			TOTAL	9,600	-	-	-	
Dwelling Structures		1460						
			TOTAL	-	-			
Non-Dwelling Equipm	Security Camera	1475		-	1,793	1,793	1,793	
			TOTAL	-	1,793	1,793	1,793	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 CFFP (Yes/No): Replacement Housing Grant No:				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000004								
Fogarty Manor								
Operations	Operations	1406						
			TOTAL	-	-			
Management								
Improvements	Security Program	1408						
	Computer Software and Training	1408		2,500	-	-		
	Physical Needs Assessment	1408			1,165	1,165	1,165	
			TOTAL	2,500	1,165	1,165	1,165	
Administration	Administrative Salaries	1410		37,073	37,029	37,029	37,029	
			TOTAL	37,073	37,029	37,029	37,029	
Fees and Costs	Architectural Fees	1430		13,800	12,691	12,691	12,691	
			TOTAL	13,800	12,691	12,691	12,691	
Dwelling Structures	Roof Stack Removal	1460			99,680	99,680	99,680	
			TOTAL	-	99,680	99,680	99,680	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 CFFP (Yes/No): Replacement Housing Grant No:				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000005								
St Germain Manor								
Operations	Operations	1406						
			TOTAL	-	-			
Management								
Improvements	Security Program	1408						
	Computer Software and Training	1408		2,500	-	-		
	Resident Service Programs	1408						
			TOTAL	2,500	-	-	-	
Administration	Administrative Salaries	1410		16,100	16,589	16,589	16,589	
			TOTAL	16,100	16,589	16,589	16,589	
Fees and Costs	Architectural Fees	1430		6,000	-	-		
			TOTAL	6,000	-	-	-	
Dwelling Structures		1460						
			TOTAL	-	-			
Non-Dwelling Equipm	Security Camera	1475		-	4,995	4,995	4,995	
			TOTAL	-	4,995	4,995	4,995	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 08 CFFP (Yes/No): Replacement Housing Grant No:				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000006								
Burns Manor								
Operations	Operations	1406						
			TOTAL	-	-			
Management								
Improvements	Security Program	1408						
	Computer Software and Training	1408		2,500	-	-		
	Resident Service Programs	1408						
			TOTAL	2,500	-	-	-	
Administration	Administrative Salaries	1410		14,447	14,219	14,219	14,219	
			TOTAL	14,447	14,219	14,219	14,219	
Fees and Costs	Architectural Fees	1430		5,400	-	-		
			TOTAL	5,400	-	-	-	
Dwelling Structures		1460		-	-			
			TOTAL	-	-	-	-	
RI002000007								
Scattered Sites								
Administration	Administrative Salaries	1410		-	296	296	296	
			TOTAL	-	296	296	296	

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

Part I: Summary						
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant:						
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 1)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 09/30/2010			<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1		
		Original	Revised 1	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) 3	345,132	345,132	345,132		
3	1408 Management Improvements	345,132	345,132	345,132	-	
4	1410 Administration (may not exceed 10% of line 21)	172,565	172,565	172,565		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	92,556	149,476	146,226	12,360	
8	1440 Site Acquisition					
9	1450 Site Improvements	400,969	174,890	174,890		
10	1460 Dwelling Structures	243,649	338,492	249,077		
11	1465.1 Dwelling Equipment-Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities 4					

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

Part I: Summary						
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: R143P002501 09 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant: <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1		
		Original	Revised 2	Obligated	Expended	
18a	1501 Collateralization of Debt Service paid by PHA					
18ba	9000 Collateralization of Debt Service paid via System of Direct Payment	125,656	199,513	199,513	199,513	
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum lines 2-19)	1,725,659	1,725,199	1,632,534	211,873	
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Security 504 Activities					
23	Amount of Line 20 Related to Security Soft Costs Activities	184,773	80,000	80,000		
24	Amount of Line 20 Related to Security Hard Costs Activities					
25	Amount of Line 20 Related to Energy Conservation Measures	105,850	-	-		
Signature of Executive Director		Date:		Signature of Public Housing Director		
				Date		

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 09 Replacement Housing Factor Grant No: CFFP (Yes/No):			Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000001	Operations	1406		230,096	230,096	230,096	230,096	Planning
560 Prospect Street	Management Improvements	1408						Planning
	Resident Service Program			102,630	102,271	102,271		Ongoing
	Master Site Plan				105,132	105,132		
	Security			117,385	40,000	40,000		Ongoing
	Admin Fees	1410		46,356	46,356	46,356		Planning
	A & E Fees							
	A & E Fees	1430			65,645	65,645	12,360	Planning
	Site Improvement	1450						
	Walkway Paving	1450			174,890	174,890		Planning
	Dwelling Structures							
	Crawl Space Ladder	1460			14,377	14,377		Ongoing
	Lead-Based Paint Mitigation	1460			90,000	90,000		Ongoing
			TOTAL	496,467	868,767	523,855		
RI002000002	Operations	1406		115,036	115,036	115,036	115,036	Planning
Galego Court	Management Improvements	1408						Planning
	Resident Service Program			57,729	57,729	57,729		Ongoing
	Security			67,388	40,000	40,000		Ongoing
	Admin Fees	1410		26,036	26,036	26,036		Planning
	A & E Fees	1430		47,203	30,298	30,298		Planning
	Site Improvement	1450						Planning
	Sewer Lines	1450		400,969	-			Planning
	CFFP Debt Service	9000		40,149	63,747	63,747	63,747	Ongoing
			TOTAL	754,510	332,846	332,846		
RI002000003	Admin Fees	1410		27,147	27,147	27,147		Planning
Kennedy Manor	A & E Fees	1430		11,869	3,250	3,250		Planning
	CFFP Debt Service	9000		29,163	46,304	46,304	46,304	Ongoing
			TOTAL	68,179	76,701	76,701		

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

Part II: Supporting Pages									
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 09 Replacement Housing Factor Grant No: CFFP (Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2		
RI002000004	Administration Fees	1410		39,688	39,688	39,688		Ongoing	
Fogarty Manor	Emergency Spawling Abatement A&E	1430		11,869	16,945	16,945		Ongoing	
	Dwelling Structures	1460						Ongoing	
	Fire Systems							Ongoing	
	Emergency Spawling Abatement	1460			89,415	89,415			
	CFFP Debt Service	9000		42,963	68,216	68,216	68,216	Ongoing	
			TOTAL	94,520	214,264	214,264			
RI002000005	Administration Fees	1410		17,780	17,780	17,780		Planning	
St Germain Manor	A & E Fees	1430		17,913	3,250			Planning	
	Dwelling Structures	1460						Planning	
	Fire Suppression System			137,799	-			Planning	
	Storm Doors	1460		105,850	-			Planning	
			TOTAL	279,342	21,030	17,780			
RI002000006	Administration Fees	1410		15,240	15,240	15,240		Planning	
Burns Manor	A & E Fees	1430		3,702	30,088	30,088		Planning	
	Accessibility Compliance & Common Area Fire Door Upgrade	1460			144,700	144,700		Planning	
	Fire Suppression System							Planning	
	CFFP Debt Service	9000		13,381	21,246	21,246	21,246	Ongoing	
			TOTAL	32,323	211,273	211,273			
RI002000007	Administration Fees	1410		318	318	318		Planning	
Scattered Sites			TOTAL	318	318	318			

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

Part I: Summary		
PHA Name: The Housing Authority of the City of Pawtucket	Grant Type and Number Capital Fund Program Grant No: RI43P002501 09R Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval: 20

Type of Grant:
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending x Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 1	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	-	-		
3	1408 Management Improvements	-	-		
4	1410 Administration (may not exceed 10% of line 21)	75,000	75,000	75,000	75,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	75,000	75,000	75,000	75,000
8	1440 Site Acquisition				
9	1450 Site Improvements	75,000	75,000	75,000	75,000
10	1460 Dwelling Structures	500,000	575,000	575,000	575,000
11	1465.1 Dwelling Equipment-Nonexpendable	-	-	-	-
12	1470 Non-dwelling Structures	200,000	200,000	200,000	200,000
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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

Part I: Summary						
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 09R Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant: <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1) Performance and Evaluation Report for Period Ending x Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1		
		Original	Revised 2	Obligated	Expended	
18a	1501 Collateralization of Debt Service paid by PHA					
18ba	9000 Collateralization of Debt Service paid via System of Direct Payment		-			
19	1502 Contingency (may not exceed 8% of line 20)	75,000				
20	Amount of Annual Grant:: (sum lines 2-19)	1,000,000	1,000,000	1,000,000	1,000,000	
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Security 504 Activities					
23	Amount of Line 20 Related to Security Soft Costs Activities	-	-			
24	Amount of Line 20 Related to Security Hard Costs Activities					
25	Amount of Line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date:		Signature of Public Housing Director		
				Date		

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

Part I: Summary		
PHA Name: The Housing Authority of the City of Pawtucket	Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 Replacement Housing Grant No: Date of CFFP:	FFY of Grant: 2010 FFY of Grant Approval: 2010

Type of Grant:
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending 09/30/2010 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	342,460	342,460		
3	1408 Management Improvements	290,567	342,460		
4	1410 Administration (may not exceed 10% of line 21)	171,230	171,230		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	150,001	32,984		
8	1440 Site Acquisition				
9	1450 Site Improvements	56,332	38,274		
10	1460 Dwelling Structures	162,475	275,657		
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non-dwelling Structures	30,000	-		
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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

Part I: Summary					
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 Replacement Housing Grant No: Date of CFFP:			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant: <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization of Debt Service paid by PHA				
18ba	9000 Collateralization of Debt Service paid via System of Direct Payment	509,238	509,238	509,238	
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum lines 2-19)	1,712,303	1,712,303		
21	Amount of Line 20 Related to LBP Activities				
22	Amount of Line 20 Related to Security 504 Activities				
23	Amount of Line 20 Related to Security Soft Costs Activities				
24	Amount of Line 20 Related to Security Hard Costs Activities				
25	Amount of Line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date:		Signature of Public Housing Director	
				Date	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:					Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000001	560 Prospect Street							
Operations	Operations	1406		171,230	171,230			
			TOTAL	171,230	171,230	-	-	
Management								
Improvements	Security Program	1408		46,283	19,333			
	Computer Upgrade & Training	1408		5,000	1,300			
	Resident Service Programs	1408		80,000	30,000			
	Master Site Plan	1408			239,893			
			TOTAL	131,283	290,526	-	-	
Administration	Management Fee	1410		45,998	45,998			
			TOTAL	45,998	45,998	-	-	
Fees and Costs	Architectural & Engineering Fees	1430		40,369				
			TOTAL	40,369	-	-	-	
Grand Total				388,880	507,754	-	-	

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

1,712,303

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000002								
Galego Court								
Operations	Operations	1406		171,230	171,230			
			TOTAL	171,230	171,230	-	-	
Management								
Improvements	Security Program	1408		46,284	19,334			
	Computer Upgrade & Training	1408		5,000	-			
	Resident Service Programs	1408		80,000	30,000			
			TOTAL	131,284	49,334	-	-	
Administration	Management Fee	1410		25,834	25,834			
			TOTAL	25,834	25,834	-	-	
Fees and Costs	Architectural & Engineering Fees	1430		22,673				
			TOTAL	22,673	-	-	-	
			TOTAL	-	-	-	-	
Dwelling Structures	Install CO Detectors	1460		8000	-			
			TOTAL	8,000	-	-	-	
Debt Service	Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	9000		162,709				
			TOTAL	162,709	162,709	162,709	-	
Grand Total				521,729.74	409,107	162,708.74	-	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000003								
Kennedy Manor								
Management								
Improvements	Computer Upgrade & Training	1408		2,000	1,300			
	Resident Service Program	1408		5,000	-			
			TOTAL	7,000	1,300	-	-	
Administration	Management Fee	1410		26,937	26,937			
			TOTAL	26,937	26,937	-	-	
Fees and Costs	A & E Fees Cast Iron Pipes	1430		23,641	1,796			
	A & E Fees Water Intrusion Abatement				6,960	6,960		
			TOTAL	23,641	1,796	-	-	
Site Improvement	Underground Generator Tank Replacement	1450			-			
			TOTAL	-	-	-	-	
Dwelling Structures	Replace Cast Iron pipes	1460		36,800	14,370			
	Water Intrusion Abatement				20,010			
			TOTAL	36,800	14,370	-	-	
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		118,186				
					118,186	118,186		
			TOTAL	118,186	118,186	118,186	-	
Grand Total				212,564	162,590	118,186	-	

- 1 To be completed for Performance and Evaluation Report or a Revised Annual Statement
- 2 To be completed for Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket			Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000004								
Fogarty Manor								
Management								
Improvements	Computer Upgrade & Training	1408		2,000	1,300			
	Resident Service Program	1408		5,000	-			
			TOTAL	7,000	1,300	-	-	
Administration	Management Fee	1410		39,381	39,381			
			TOTAL	39,381	39,381	-	-	
Fees and Costs	Architectural & Engineering Fees	1430		34,562	24,654			
			TOTAL	34,562	24,654	-	-	
Site Improvements	Underground Generator Tank Replacement	1450			-			
			TOTAL	-	-	-	-	
Dwelling Structures	Upgrade Copper Roof	1460		25,675	-			
	Building Envelope Update and Waterproofing	1460		92,000	77,887			
			TOTAL	117,675	77,887	-	-	
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		174,115				
			TOTAL	174,115	174,115	174,115	-	
Grand Total				372,733	317,337	174,115	-	

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

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000005								
St Germain Manor								
Management								
Improvements	Computer Upgrade & Training	1408		2,000	-			
	Resident Service Program	1408		5,000	-			
			TOTAL	7,000	-	-	-	
Administration	Management Fee	1410		17,643	17,643			
			TOTAL	17,643	17,643	-	-	
Fees and Costs	Architectural & Engineering Fees	1430		15,484	500			
			TOTAL	15,484	500	-	-	
Dwelling Structure	Emergency Repair to Community Room	1460			68,400			
	Storm Door Replacement				100,000			
	Community Room Roofing				15,000			
			TOTAL	-	183,400			
Grand Total				40,127	201,543	-	-	

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

2 To be completed for Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000006								
Burns Manor								
Management								
Improvements	Computer Upgrade & Training	1408		2,000	-			
	Resident Service Program	1408		5,000	-			
			TOTAL	7,000	-	-	-	
Administration	Management Fee	1410		15,122	15,122			
			TOTAL	15,122	15,122	-	-	
Fees and Costs	Architectural & Engineering Fees	1430		13,272	1,034			
	Underground Utility Study				5,000			
			TOTAL	13,272	6,034	-	-	
Site Work	Parking Lot Improvement	1450		56,332	8,274			
	Underground Utility Improvements				30,000			
			TOTAL	56,332	38,274	-	-	
Dwelling Structures	Automatic Door Openers at All Entrances	1460		14,000	-			
	Accessibility Compliance/Auto Door Opener/Fire Door Upgrade	1460		16,000	-			
			TOTAL	30,000	-	-	-	
Non-Dwelling Structure								
			TOTAL	-	-			
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		54,228				
					54,228	54,228		
			TOTAL	54,228	54,228	54,228	-	
Grand Total				175,954	113,658	54,228	-	

- 1 To be completed for Performance and Evaluation Report or a Revised Annual Statement
- 2 To be completed for Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P002501 10 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
RI002000007								
Scattered Sites	Administration	1410		315	315	315		
			TOTAL	315	315	315	-	
Grand Total				315	315	315	-	

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

Part 1: Summary					
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant: <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	135,428	135,428		
3	1408 Management Improvements	151,754	151,754		
4	1410 Administration (may not exceed 10% of line 21)	136,150	136,150		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	43,752	43,752		
8	1440 Site Acquisition				
9	1450 Site Improvements	38,137	38,137		
10	1460 Dwelling Structures	301,942	301,942		
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	45,000	45,000		-
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

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

Part 1: Summary						
PHA Name: The Housing Authority of the City of Pawtucket		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant: <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost 1		
		Original	Revised 2	Obligated	Expended	
18a	1501 Collateralization of Debt Service paid by PHA					
18ba	9000 Collateralization of Debt Service paid via System of Direct Payment	509,338	509,338			
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum lines 2-19)	1,361,500	1,361,500			
21	Amount of Line 20 Related to LBP Activities					
22	Amount of Line 20 Related to Security 504 Activities					
23	Amount of Line 20 Related to Security Soft Costs Activities					
24	Amount of Line 20 Related to Security Hard Costs Activities					
25	Amount of Line 20 Related to Energy Conservation Measures					
Signature of Executive Director		Date:		Signature of Public Housing Director		
				Date		

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

Part II: Supporting Pages							
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2
RI002000001							
560 Prospect Street							
Operations	Operations	1406		49,813	49,813		
			TOTAL	49,813	49,813	-	-
Management							
Improvements	Security Program	1408		15,877	15,877		
	Resident Service Programs	1408		60,000	60,000		
			TOTAL	75,877	75,877	-	-
Administration	Management Fee	1410		11,233	11,233		
			TOTAL	11,233	11,233	-	-
Fees and Costs	Master Site Plan	1430					
			TOTAL	-	-	-	-
Non Dwelling Equip.	Truck	1475		45,000	45,000		
			TOTAL	45,000	45,000	-	-
Grand Total				181,923	181,923	-	-

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

Part II: Supporting Pages							
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2
RI002000002							
Galego Court							
Operations	Operations	1406		85,615	85,615		
			TOTAL	85,615	85,615	-	-
Management							
Improvements	Security Program	1408		15,877	15,877		
	Resident Service Programs	1408		60,000	60,000		
			TOTAL	75,877	75,877	-	-
Administration	Management Fee	1410		25,834	25,834		
			TOTAL	25,834	25,834	-	-
Fees and Costs	A & E Fees Storm Drain and Entryway	1430		12,500	-		
			TOTAL	12,500	-	-	-
Dwelling Structures	Storm Drain Update	1460		100,000	-		
			TOTAL	100,000	-	-	-
Debt Service	Debt Service (Create 12 Accessible Units, Accessible Site Improvements, Stabilize Exterior Stairwells at 32 Locations)	9000		162,741	162,741		
			TOTAL	162,741	162,741	-	-
Grand Total				462,567	350,066.69	-	-

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

Part II: Supporting Pages							
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2
RI002000003							
Kennedy Manor							
Administration	Management Fee	1410		26,937	26,937		
			TOTAL	26,937	26,937	-	-
Fees and Costs	A & E Fees for Underground Tank Replace	1430		6,250	6,250		
			TOTAL	6,250	6,250	-	-
Dwelling Structures	Replace Cast Iron pipes	1460		50,000	50,000		
			TOTAL	50,000	50,000	-	-
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		118,210	118,210		
			TOTAL	118,210	118,210	-	-
Grand Total				201,397	201,397	-	-

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

Part II: Supporting Pages							
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2
RI002000004							
Fogarty Manor							
Administration	Management Fee	1410		39,381	39,381		
			TOTAL	39,381	39,381	-	-
Fees and Costs		1430		18,993			
	Architectural & Engineering Fees				18,993		
			TOTAL	18,993	18,993	-	-
Dwelling Structures	Replace Cast Iron pipes	1460		50,000	50,000		
	Upgrade Copper Roof	1460		25,000	25,000		
	Building Envelope Update and Waterproofing	1460		76,942	76,942		
			TOTAL	151,942	151,942	-	-
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		174,149			
					174,149		
			TOTAL	174,149	174,149	-	-
Grand Total				384,465	384,465	-	-

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

Part II: Supporting Pages							
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2
RI002000005							
St Germain Manor Administration	Management Fee	1410		17,643	17,643		
			TOTAL	17,643	17,643	-	-
Fees and Costs	A & E Fees Electric Circuit Update	1430		-	12,500		
			TOTAL	-	12,500	-	-
Dwelling Structures	Electric Circuit Update	1460		-	100,000	-	-
			TOTAL	-	100,000		
Grand Total				17,643	130,143		

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

Part II: Supporting Pages							
PHA Name: The Housing Authority of the		Grant Type and Number Capital Fund Program Grant No: RI43P00250111 CFFP (Yes/No): Yes Replacement Housing Grant No:				Federal FFY of	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost	
				Original	Revised 1	Funds Obligated 2	Funds Expended 2
RI002000006							
Burns Manor							
Administration	Management Fee	1410		15,122	15,122		
			TOTAL	15,122	15,122	-	-
Fees and Costs	Architectural & Engineering Fees	1430		6,009	6,009		
			TOTAL	6,009	6,009	-	-
Site Work	Parking Lot Improvement	1450		38,137	38,137		
			TOTAL	38,137	38,137	-	-
Debt Service	Debt Service (Furnish/Install Fire Suppression System)	9000		54,238			
			TOTAL	54,238	54,238	-	-
Grand Total				113,506	69,360	-	-

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

PILOT CHRONIC HOMESLESS PROGRAM

The Housing Authority of the City of Pawtucket, Rhode Island is participating in a pilot program to help the chronically homeless in participation with the Center for Supportive Housing and Access, Rhode Island. The Authority has established a separate waiting list for this pilot program and will allocate ten units in its Family Developments (560 Prospect Street, Galego Court) and Mixed Elderly/Disabled Developments (Kennedy Manor and St. Germain Manor) for this pilot program. Applicants will be assigned their placement on the Pilot Homeless Waiting List based on their application date, verification of being chronically homeless from a homeless shelter, placement on a homeless data base and preference category as listed below:

Local Preference – The following local preferences will be aggregated using the following system. Two preferences outweigh one. Three outweighs two, etc..

- 1 If any member of an applicant family is employed**
- 2 All disabled veterans and those who served prior to and including World War II**
- 3 Residents of the City of Pawtucket.**

In order to be eligible for this pilot homeless program applicants must be verified as being chronically homeless(Chronic homeless means a family of one or more persons experiencing 4 episodes of homelessness within three years or homeless for 12 continuous months.) The applicant must also be receiving supportive service from a licensed social services or mental health agency at the time of application or at the time of admission and to the assisted housing unit.

All applicants who are admitted under the Pilot Homeless Program will be tracked for their performance and must continue receiving supportive services while a participant under this Pilot Program.

One unit in every four unit turnovers will be used for this pilot program until ten units have been utilized. Once a unit has been utilized for this pilot program it will continue to be used to house chronic homeless family during the duration of this pilot program.

ARTICLE I
General Provisions
[Adopted November 20, 2001 as Resolution # 829]

A. There are to be eligible for admission to HUD-aided low rent housing projects operated by the Authority only those applicants:

1. Who qualifies as a family.

(a) Family. "Family" means:

[1] Two (2) or more persons sharing residency whose income and resources are available to meet the family's needs and who are either related by blood, marriage or operation of law or have evidenced to the satisfaction of the Housing Authority a stable family relationship.

[2] An elderly family or single person.

[3] The remaining member of a tenant family.

[4] A displaced person.

(b) Elderly family. "Elderly family" means a family whose head or spouse or whose sole member is at least sixty-two (62) years of age or disabled, as defined in this section, or handicapped, as defined in this section and may include two (2) or more elderly, disabled or handicapped persons living together or one (1) or more such persons living with another person who is determined to be essential to his/her care and well-being.

(c) Disabled person. "Disabled person" means a person who is under a disability as defined in Section 223 of the Social Security Act or in Section 102(5) of the Developmental Disabilities Services and Facilities Construction Amendments of 1970. For purposes of this Article, "disability" shall be defined as provided in Section 223 of the Social Security Act. No individual will be considered a person with disabilities solely on the basis of any drug or alcohol dependence.

(d) Handicapped person. "Handicapped persons" means a person having a physical or mental impairment that is expected to be of long-continued and indefinite duration and is of such a nature that such ability could be improved by more suitable housing conditions.

(e) Near Elderly. "Near elderly family means those whose head of household is under 62 but greater than 50 years of age.

(f) Displaced family. "Displaced family" means a person or a family as defined above.

(g) Lower income family. "Lower income family" means a family whose annual income does not exceed eighty percent (80%) of the median income for the area as determined by HUD with adjustments for smaller and larger families.

(h) Very-low income family. "Very low income family" means a family whose annual income does not exceed fifty percent (50%) of the median income for the area, with adjustments for smaller and larger families, as determined by HUD.

(i) **Chronically homeless family- means a family of one or more persons experiencing 4 episodes of homelessness within three years or homeless for 12 continuous months.**

(j) **National Service Program Provider-** means a family of one or more persons who has an adult family member working for an agency that is affiliated with the Corporation for National and Community Service(CNCS)..

H. Near elderly families.

- (1) Applicants will be assigned units according to the date of their application. For example, Applicant A would be assigned the oldest vacated unit, Applicant B the next, Applicant C the next and so on down the list. Also, the Pawtucket Housing Authority will establish a preference for elderly families for admission to public housing projects and will give preference to near elderly families when the Pawtucket Housing Authority determines that there are not enough eligible elderly families to fill all the units that are currently vacant.
- (2) "Near elderly family" means a family whose head or spouse (or soul member) is a least fifty (50) years of age but below the age of sixty-two (62) years.

5-5 Orders of preference in selection and assignment of tenants.

- A. Local Preference – The following local preferences will be aggregated using the following system. Two preferences outweigh one. Three outweighs two, etc..

1. If any member of an applicant family is employed
2. All disabled veterans and those who served prior to and including Worked War II
3. Residents of the City of Pawtucket.

4. National Services Provider

- A. Elderly, disabled or displaced families have a preference over single persons.
- B. In Compliance with CFP 513(B) of the Quality Housing and Work Responsibility act (QHWRA) "Income Targeting" each fiscal year not less than 40% of new admissions will be families whose income does not exceed 30% of the Area Median Income. All other admissions must be at or below 80% of the area median income.

To provide protection against discrimination of applicants, the PHA will provide an applicant family the benefit of a working preference if the head and spouse, or sole member is 62 years of age or older or are receiving social security disability supplemental security income disability benefits, or any other payments based on an individual's inability to work.

5-6. Verification of preference status.

- A. If an applicant qualifies under any of the above preference groups, he/she need only certify his/her status, in writing, to the Housing Authority at this time. The Pawtucket Housing Authority will take the applicant's word for it and adjust his/her name on the waiting list.
- B. However, it is the applicant's obligation to keep the Pawtucket Housing Authority informed if his/her status changes while he/she is waiting to be reached on the waiting list.
- C. If it is determined that the applicant has made false claims regarding his/her preference status or he/she willfully has not advised the Authority of a change in status, the applicant's application will be disqualified.
- D. Only when the applicant's name is reached on the waiting list will he/she be asked to verify his/her preference status.

- (1) Verification of priorities and ten-percent preference prerogative. This verification shall be obtained by the Authority through a third party source as required.

ATTACHMENT ON VIOLENCE AGAINST WOMEN ACT ACTIVITIES

HOUSING AUTHORITY OF THE CITY OF PAWTUCKET, RHODE ISLAND

The PHA in the Public Housing Program will inform new residents of their rights as domestic violence or stalking victims during the orientation process by providing a brochure on VAWA. For current residents the brochure will be provided during the annual recertification process. The residents will sign a form that will be included in their file to verify receipt of the VWA brochure. The PHA lease has been amended to explicitly include the information that an incident of domestic violence or stalking does not qualify as a serious or repeated violation of the lease; and the criminal activity directly relating to domestic violence, dating violence, or stalking does not constitute grounds for termination of a tenant; and that new confidentiality provisions govern the disclosure of information under the law. The ACOP has also been amended to not deny admission to any of its developments to any applicant on the basis the applicant is or has been a victim of domestic violence, dating violence, or stalking.

The PHA when it is made aware of an incident of domestic violence, dating violence or stalking will refer at the resident or applicant's request to the Blackstone Valley Advocacy Center.

**FIVE YEAR PLAN MEETING
PUBLIC MEETING
December 15, 2011
PUBLIC COMMENTS**

No questions from the public on the five year plan. The residents who attended from Fogarty were satisfied with the work items for their development, especially the proposed waterproofing of the building, parking lot study and new stoves.

FIVE YEAR PLAN MEETING

**Meeting at 560 PROSPECT STREET
DECEMBER 14, 2011 AT 5:00 PM
RESIDENT COMMENTS**

Question: Can exhaust fans being installed in the kitchens?

Answer: This work item is not be included in the current 5 year plan due to other capital items but the Authority will consider adding the fans in the future.

Question: When will new washers and dryers be installed in the community room?

Response: The Authority is currently in litigation on the washers and dryers and is trying to work out a settlement with the current vendor.

FIVE YEAR PLAN MEETING
BURNS MANOR
DECEMBER 19, 2011

RESIDENT COMMENTS

Q. What is the current status of the installation of the sprinklers?

A. Bids have been received and approval of the low bidder is on the Board of Commissioners' meeting agenda this week. The work should be in late winter or early spring.

Q. When are the gas stoves being replaced? The oven does not work properly and food is always getting burnt.

A. Replacement of the gas stoves is in the third year of the 5 year plan.

Q. The fire doors at the end of each building are closed rather than being left open like the interior hallway doors.

A. The doors will be left open by a magnet and tied into the fire alarm system. This work is in process and will be completed soon.

Q. The laundry room doors do not swing open like the entrance doors for handicap accessibility?

A. The doors currently have handicap approved handles. The Authority will look into the feasibility of having the doors swing open by a push button.

Q. My apartment has not been repainted for since I moved in several years ago. When will it be repainted?

A. The Authority has already repainted 20 apartments at St. Germain Manor. Over the next year apartments on the average of 20 per development will be repainted at the three other elderly or mixed elderly/disabled developments. The condition and the date of the apartment

**FIVE YEAR PLAN MEETING
FOGARTY MANOR
November 28, 2011**

RESIDENT COMMENTS

Request made to have better lighting in the back parking lot area that borders our parking lot. Cars have been broken into. The light has been out for several months. Also not enough lighting at the parking lot entrance

Request to have security all the time. Residents also claimed visitors know when the security guards come off duty.

Residents mentioned the water leaking into the stair towers and the need for new windows.

FIVE YEAR PLAN MEETING

KENNEDY MANOR

November 30, 2011

RESIDENT COMMENTS

Question:

Where will the sprinklers be located in the apartment and how much water damage will be caused if the sprinklers go off.

Question:

When are we going to get new washers/dryers? Dyers do not work properly and the vents not being cleaned enough to remove the lint which is blowing back into the building. On the C floor vent was not attached to the outside.

Residents mentioned problems with the security guard company. The guards do not do any patrolling after ten o'clock. The guards also do not check on visitors coming in. One resident complained visitors using the new photo cards to gain access.

One resident complained about the poor wall condition on the C floor. Walls have still not been painted. Also one area where the wall was patched but not sanded smooth and you can see the outline of the hole.

Residents complained about the parking lines not being painted especially the fire lane area.

One resident complained about the apartments not being painted every five years. He has been living here over twelve years.

Several residents who smoke against the nonsmoking policy.

Maat Hathor requesting having four flea markets during year and having entrance door unlocked. The request will be looked into based on City of Pawtucket's Policy.

FIVE YEAR PLAN MEETING

MEETING AT GALEGO COURT DECEMBER 14, 2011 AT 5:00 PM RESIDENT COMMENTS

Question: When will the work on the community room be completed?

Response: The work has already started to make the room wheelchair accessibl.

Additional work will be done in the mail room and also inside the community room. The work should be completed in a couple of months.

Question: When will new washers and dryers be installed in the community room?

Response: The Authority is currently in litigation on the washers and dryers and is trying to work out a settlement with the current vendor.

FIVE YEAR PLAN MEETING

St. Germain Manor Meeting at Kennedy Manor November 30, 2011at 1:00 PM

RESIDENT COMMENTS

Question:

What are the hours of the security guards and are the guards required to patrol the buildings and grounds several times a night

Responses:

The security guards at present 5 days a week from 8 PM to 12 AM and they are required to patrol the buildings and grounds on an hourly basis.

Question:

One resident requested that the building entrance doors swing open room when you use the keri disc rather than have to be pulled open to gain entrance into the building.

Response: The Authority will look into putting a device near the door for residents with mob

**Certification of Payments
to Influence Federal Transactions**

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

Applicant Name

The Housing Authority of the City of Pawtucket, Rhode Island

Program/Activity Receiving Federal Grant Funding

Public Housing / Modernization

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 Stephen A. Vadnais	Title Executive Director
Signature 	Date (mm/dd/yyyy) 1/17/2012

Certification by State or Local Official of PHA Plan Consistency with
The Consolidated Plan

I, Donald R. Grebien the Mayor certify

That the Five Year and Annual PHA Plan of the Housing Authority of The City of Pawtucket
is consistent with the Consolidated Plan of The City of Pawtucket prepared
pursuant to 24 CFR Part 91.

 1/18/12
Signed / Dated by Appropriate State or Local Official

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Housing Authority of the City of Pawtucket P.O. Box 1303, Pawtucket, RI 02862 Congressional District, if known: ^{4c}	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U.S. Department of Housing and Urban Development	7. Federal Program Name/Description: CFDA Number, if applicable: <u>CFP</u>	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>Stephen A. Vadnais</u> Title: <u>Executive Director</u> Telephone No.: <u>(401) 721-6010</u> Date: <u>01/17/2012</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

The Housing Authority of the City of Pawtucket, Rhode Island

Program/Activity Receiving Federal Grant Funding

Public Housing / Modernization

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.)

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

Stephen A. Vadnais

Title

Executive Director

Signature



Date

01/17/2012

X

**PHA Certifications of Compliance
with PHA Plans and Related
R e g u l a t i o n s**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/30/2011

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

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

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

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

PHA Name

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 2012- 2016

Annual PHA Plan for Fiscal Years 2012- 2013

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

Name of Authorized Official

Title

Signature

Date

Stella Cameron

1-19-12

Public Meeting Notice

The Housing Authority of the City of Pawtucket's Fiscal Year Beginning 2012 Annual Plan and Five Year Plan Beginning 2012-2016 is now available for Public Review and Comment.

The Plan is available at the Authority's following offices:

- Administrative Office, 214 Roosevelt Avenue
- 560 Prospect Street Development Office, 560 Prospect Street, Pawtucket, RI
- Galego Court Development Office, 483 Weeden Street, Pawtucket, RI
- Burns Manor Development Office, 95 Park Street, Pawtucket, RI
- Kennedy Manor Development Office, 175 Broad Street, Pawtucket, RI

The Public Meeting to review comments and changes will be held on Monday, December 12, 2011 at 10:00 A. M. at the Community Room at Fogarty Manor, which is also located at 214 Roosevelt Avenue, Pawtucket, RI.

If there are any questions, please call (401) 725-9113, ext. 6012.

Stephen A, Vadnais
Executive Director



**FIVE YEAR PLAN MEETING
PUBLIC MEETING
December 15, 2011
PUBLIC COMMENTS**

No questions from the public on the five year plan. The residents who attended from Fogarty were satisfied with the work items for their development, especially the proposed waterproofing of the building, parking lot study and new stoves.

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**Meeting at 560 PROSPECT STREET
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