ANNUAL PLAN FOR FISCAL YEAR 2012
(HUD LOCAL SUBMISSION)

HOUSING AUTHORITY OF THE CITY OF GEORGETOWN, SC

INDEX OF ATTACHMENTS

Attachment	Description
Attachment "A"	Section 8.1 and Section 11.0(h) - *Capital Fund Program Annual Statement/Performance and Evaluation Report,* form HUD-50075.1 • FY 2009 CFP Report • FY 2010 CFP Report • FY 2011 CFP Report • FY 2012 CFP Report
Attachment "B"	Section 8.2 and Section 11.0(i) - *Capital Fund Program Five-Year Action Plan,* form HUD-50075.2
Attachment "C"	Section 11.0 - *Required Certification Submissions to HUD Field Office* a) PHA Certifications of Compliance with the PHA Plans and Related Regulations, form HUD-50077 b) Certification for a Drug-Free Workplace, form HUD-50070 c) Disclosure of Lobbying Activities, form SF-LLL d) Certification of Payments to Influence Federal Transactions, form HUD-50071 e) Certification by State or Local Offical of PHA Plans Consistency with the Consolidated Plan, form HUD-50077-SL f) Civil Rights Certification, form HUD-50077-CR g) Resident Advisory Board ("RAB") comments h) Challenged Elements

ATTACHMENT "A"

Section 8.1 - Capital Fund Program Annual Statement/ Performance and Evaluation Reports, form HUD-50075.1

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

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant: 2009**
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-09** Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant Approval: 2009**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 2)**

☐ **Performance and Evaluation Report for Period Ending: 7/12/2011** ☐ **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]	100,344.00	100,344.00	100,344.00	100,344.00
3	1408 Management Improvements	54,997.96	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	50,815.00	0.00	0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	34,182.00	39,327.00	39,327.00	36,757.00
8	1440 Site Acquisition				
9	1450 Site Improvement	0.00	6,509.70	6,509.70	3,254.85
10	1460 Dwelling Structures	95,735.00	218,110.26	218,110.26	123,977.01
11	1465.1 Dwelling Equipment—Nonexpendable	28,217.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.

[4] RHF funds shall be included here.

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

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

form **HUD-50075.1** (4/2008)

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

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

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant: 2009**
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-09** Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant Approval: 2009**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 2)**

☐ **Performance and Evaluation Report for Period Ending: 7/12/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	143,861.04	143,861.04	143,861.04	143,861
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	508,152.00	508,152.00	508,152.00	408,193.90
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 related to Section 504 Activities				
23	Amount of line 20 related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 related to Energy Conservation				

Signature of Executive Director	**Date**	**Signature of Public Housing Director**	**Date**
[signature]	9-27-11		

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.

[4] RHF funds shall be included here.

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

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

Part II: Summary

PHA Name: **Georgetown Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: **SC16P028501-09** CFFP (Yes/No) Replacement Housing Factor Grant No:	**FFY of Grant: 2009**

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]	
PHA WIDE	Operations	1406		100,344.00	100,344.00	100,344.00	100,344.00	
	Afterschool Program							
	Tutor & Equipment							
	Resident & Community Services							
	Management Improvements							
	(SLED & Credit Checks)							
	Drug Elimination & Prevention	1408		54,997.96	0.00	0.00	0.00	
PHA WIDE	Administration	1410		50,815.00	0.00	0.00	0.00	
	Fees & Costs	1430		34,182.00	39,327.00	39,327.00	36,757.00	
	Site Improvements	1450		0.00	6,509.70	6,509.70	3,254.85	
	Dwelling Structures (remainder of contract #0914 which includes $53,050.97 to rebuild 311 Rosemary)	1460		95,735.00	218,100.26	218,110.26	123,977.01	
	Dwelling Equipment	1465.1		28,217.00	0.00	0.00	0.00	
Proj. 001 - AMP 1 Proj. 003, 005, 011, 012 - AMP 2	Bond Repayment -HVAC, Upgrade Electric, Ranges, Water Heaters	1501		143,861.04	143,861.04	143,861.04	143,861.04	

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Georgetown Housing Authority

Federal FFY of Grant:

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE	9/14/2011	3/11/2010			

[1] Obligation and expenditure end date can only be revised with HUD approval pursuant to Seciton 9j of the U.S. Housing Act of 1973, as amended.

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

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

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant: 2010**
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-10** Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant Approval: 2010**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 1)**

☐ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **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)	55,938.00	55,938.00	55,938.00	55,938.00
3	1408 Management Improvements	25,780.00			
4	1410 Administration (may not exceed 10% of line 21)	50,350.96	36,130.96	36,130.96	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,800.00	22,500.00	22,500.00	16,875.00
8	1440 Site Acquisition				
9	1450 Site Improvement	29,700.00	0.00		
10	1460 Dwelling Structures	159,000.00	170,900.00	170,900.00	
11	1465.1 Dwelling Equipment—Nonexpendable	0.00			
12	1470 Non-dwelling Structures	12,000.00	78,100.00	78,100.00	
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 the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.

[4] RHF funds shall be included here.

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

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

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant: 2010**
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-10** Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant Approval: 2010**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 2)**

☐ **Performance and Evaluation Report for Period Ending: 7/31/2011** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	143,861.04	143,861.04	143,861.04	
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	507,430.00	507,430.00	507,430.00	72,813.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 related to Section 504 Activities				
23	Amount of line 20 related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 related to Energy Conservation				

Signature of Executive Director	**Date**	**Signature of Public Housing Director**	**Date**
[signature]	8-22-11		

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

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

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

Part II: Summary

PHA Name: **Georgetown Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: **SC16P028501-10** CFFP (Yes/No) Replacement Housing Factor Grant No:	**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]	
PHA WIDE	Operations	1406		55,938.00	55,938.00	55,938.00	55,938.00	
PHA WIDE	Security Monitoring	1408		25,780.00	0.00			
PHA WIDE	Administration	1410		50,350.96	36,130.96	36,130.96		
PHA WIDE	Fees & Costs	1430		30,800.00	22,500.00	22,500.00	16,875.00	
PHA WIDE	Bond Repayment	9000		143,861.04	143,861.04	143,861.04		
Proj. 001 - AMP 1	Signage	1450		13,200.00	0.00			
Proj. 003 - AMP 2	Signage	1450		8,250.00	0.00			
Proj. 005 - AMP 2	Signage	1450		8,250.00	0.00			
Proj. 001 - AMP 1	Replace countertops	1460	180	108,000.00	0.00			
Proj. 003 - AMP 2	Replace countertops	1460	35	21,000.00	0.00			
Proj. 005 - AMP 2	Replace countertops	1460	50	30,000.00	0.00			
Proj. 011 - AMP 2	Replace roofs	1460	14	0.00	59,125.00	59,125.00		
Proj. 011 - AMP 2	Replace gas range	1460	1	0.00	5,825.00	5,825.00		
Proj. 011 - AMP 2	Replace HVAC	1460	13	0.00	94,125.00	94,125.00		
Proj. 011 - AMP 2	Replace siding	1460	1	0.00	11,825.00	11,825.00		
AMP 1 offices	Remove wall & add insulation	1470	1	0.00	7,600.00	7,600.00		
AMP 1 offices	Upgrade attic insulation	1470	3	0.00	6,200.00	6,200.00		
AMP 1 offices	Replace windows	1470	3	0.00	13,600.00	13,600.00		
AMP 1 offices	HVAC/Heater upgrades main office	1470	3	12,000.00	50,700.00	50,700.00		

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Georgetown Housing Authority

Federal FFY of Grant:

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE	9/30/2012		9/30/2014		

[1] Obligation and expenditure end date can only be revised with HUD approval pursuant to Seciton 9j of the U.S. Housing Act of 1973, as amended.

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

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

Part I: Summary

PHA Name: Georgetown Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: SC16P028501-11 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:** 2011 **FFY of Grant Approval:** 2011

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]	55,938.00			
3	1408 Management Improvements	10,830.96			
4	1410 Administration (may not exceed 10% of line 21)	34,899.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	23,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	31,450.00			
10	1460 Dwelling Structures	85,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	55,000.00			
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 the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluatoin 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.

form **HUD-50075.1** (4/2008)

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

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

Part I: Summary

PHA Name: Georgetown Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: **SC16P028501-11** Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2011** **FFY of Grant Approval: 2011**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no: 1)**
☐ **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
18a	1501 Collateralization or Debt Service paid by PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	143,861.04			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	143,861.04			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 related to Section 504 Activities				
23	Amount of line 20 related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 related to Energy Conservation				

Signature of Executive Director	**Date**	**Signature of Public Housing Director**	**Date**
[signature]	8-22-11		

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluatoin 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.

form **HUD-50075.1** (4/2008)

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

Part II: Summary

PHA Name:	Grant Type and Number	FFY of Grant:
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-11** CFFP (Yes/No) Replacement Housing Factor Grant No:	**2011**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Total Actual Cost			Status of Work
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA WIDE	Operations	1406		55,938.00				
PHA WIDE	Management Improvements	1408		10,830.96				
PHA WIDE	Administration	1410		34,899.00				
PHA WIDE	Fees & Costs	1430		23,000.00				
PHA WIDE	Bond Repayment	9000		143,861.04				
Proj. 001 - AMP 1	Signage	1450		13,200.00				
Proj. 003 - AMP 2	Signage	1450		8,250.00				
Proj. 005 - AMP 2	Signage	1450		10,000.00				
Proj. 011 - AMP 2	Replace flooring	1460	14	60,000.00				
Proj. 011 - AMP 2	Replace entry doors	1460	14	25,000.00				
Community center - AMP 1	Upgrade public restrooms	1470	1	55,000.00				

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Georgetown Housing Authority

Federal FFY of Grant: 2011

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE	8/3/2013		8/3/2015		

[1] Obligation and expenditure end date can only be revised with HUD approval pursuant to Seciton 9j of the U.S. Housing Act of 1973, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant:** 2012
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-12** Replacement Housing Factor Grant No: Date of CFFP:	**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)	51,938.00			
3	1408 Management Improvements	0.00			
4	1410 Administration (may not exceed 10% of line 21)	25,299.96			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	23,500.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	226,600.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	28,000.00			
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 the Performance and Evaluatoin Report or a Revised Annual Statement.

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[4] RHF funds shall be included here.

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Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

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

Part I: Summary

PHA Name:	**Grant Type and Number**	**FFY of Grant:** 2012
Georgetown Housing Authority	Capital Fund Program Grant No: **SC16P028501-12** Replacement Housing Factor Grant No: Date of CFFP:	**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
18a	1501 Collateralization or Debt Service paid by PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	143,861.04			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	499,199.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 related to Section 504 Activities				
23	Amount of line 20 related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 related to Energy Conservation Measures				

Signature of Executive Director	**Date**	**Signature of Public Housing Director**	**Date**
[signature]	8-22-11		

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.

[4] RHF funds shall be included here.

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

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

Part II: Summary

PHA Name: **Georgetown Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: **SC16P028501-12** CFFP (Yes/No) Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2012**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA WIDE	Operations	1406		51,938.00				
PHA WIDE	Management Improvements	1408		0.00				
PHA WIDE	Administration	1410		25,299.96				
PHA WIDE	Fees & Costs	1430		23,500.00				
PHA WIDE	Bond Repayment	9000		143,861.04				
Proj. 005 - AMP 2	Upgrade bathrooms	1460	50	132,000.00				
Proj. 011 - AMP 2	Upgrade plumbing	1460	14	40,000.00				
Proj. 011 - AMP 2	Bathroom renovations	1460	14	54,600.00				
Proj. 005 - AMP 2	Upgrade public rest rooms	1470	1	28,000.00				

[1] To be completed for the Performance and Evaluation Report.

[2] To be completed for the Performance and Evaluatoin Report or a Revised Annual Statement.

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Georgetown Housing Authority

Federal FFY of Grant: 2012

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA WIDE					

[1] Obligation and expenditure end date can only be revised with HUD approval pursuant to Seciton 9j of the U.S. Housing Act of 1973, as amended.

ATTACHMENT "B"

Section 8.2 - Capital Fund Program Five-Year Action Plan, form HUD-50075.2

Part I: Summary

PHA: Georgetown Housing Authority / SC028			Locality (Georgetown/Georgetown, SC)		☐ Original 5-Year Plan	☐ Revision No: 1
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	Physical Improvements Subtotal	Annual Statement	305,087.00	321,511.00	270,000.00	280,000.00
C.	Management Improvements		0.00	0.00	5,500.00	5,500.00
D.	PHA-Wide Non-dwelling					
E.	Administration		26,058.96	26,840.96	27,645.96	28,475.96
F.	Other		24,000.00	24,500.00	25,000.00	25,500.00
G.	Operations		15,938.00	0.00	55,938.00	55,938.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service		143,861.04	143,861.04	143,861.04	143,861.04
K.	Total CFP Funds		514,945.00	516,713.00	527,945.00	539,275.00
L.	Total Non-CFP Funds		0.00	0.00	0.00	0.00
M.	Grand Total		514,945.00	516,713.00	527,945.00	539,275.00

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

Work Statement for Year 1 FFY 2012	Work Statement for Year 2013 FFY 2013			Work Statement for Year 2014 FFY 2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	**001: Westside**	180		**001: Westside**	180	
	Replace countertops		10,000.00	Replace countertops		130,400.00
	003: North Street	35		**003: North Street**	35	
	Replace flooring		125,000.00	Replace countertops		35,000.00
	005: Maryville	50		**005: Maryville**	50	
	Replace flooring		170,087.00	Replace countertops		45,000.00
				Replace siding, et al		111,111.00
	011: Scattered, Old	15		**011: Scattered, Old**	15	
	012: Scattered, New	15		**012: Scattered, New**	15	
	Subtotal of Estimated Cost		305,087.00	Subtotal of Estimated Cost		321,511.00

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

Work Statement for Year 1 FFY 2012	Work Statement for Year 2015 FFY 2015			Work Statement for Year 2016 FFY 2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	**001: Westside**	180		**001: Westside**	180	
Annual	Replace siding		220,000.00	Replace siding		280,000.00
Statement						
	003: North Street	35		**003: North Street**	35	
	005: Maryville	50		**005: Maryville**	50	
	011: Scattered, Old	15		**011: Scattered, Old**	15	
	Replace siding		50,000.00			
	012: Scattered, New	15		**012: Scattered, New**	15	
	Subtotal of Estimated Cost		270,000.00	Subtotal of Estimated Cost		280,000.00

Part III: Supporting Pages - Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2012	Work Statement for Year 2013 FFY 2013		Work Statement for Year 2014 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	**PHA Wide**		**PHA Wide**	
Annual	Operations	15,938.00	Operatoins	0.00
Statement				
	Management Improvements	0.00	Management Improvements	0.00
	Administration	26,058.96	Administration	26,840.96
	Other-A&E fees	24,000.00	Other-A&E fees	24,500.00
	Bond Repayment - Debt Services	143,861.04	Bond Repayment - Debt Services	143,861.04
	001: Westside		**001: Westside**	
	003: North Street		**003: North Street**	
	005: Maryville		**005: Maryville**	
	011: Scattered, Old		**011: Scattered, Old**	
	012: Scattered, New		**012: Scattered, New**	
	Subtotal of Estimated Cost	209,858.00	Subtotal of Estimated Cost	195,202.00

Part III: Supporting Pages - Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2012	Work Statement for Year 2015 FFY 2015		Work Statement for Year 2016 FFY 2016	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	**PHA Wide**		**PHA Wide**	
Annual	Operations	55,938.00	Operations	55,938.00
Statement				
	Management Improvements	5,500.00	Management Improvements	5,500.00
	Administration	27,645.96	Administration	28,475.96
	Other-A&E fees	25,000.00	Other-A&E fees	25,500.00
	Bond Repayment - Debt Services	143,861.04	Bond Repayment - Debt Services	143,861.04
	001: Westside		**001: Westside**	
	003: North Street		**003: North Street**	
	005: Maryville		**005: Maryville**	
	011: Scattered, Old		**011: Scattered, Old**	
	012: Scattered, New		**012: Scattered, New**	
	Subtotal of Estimated Cost	257,945.00	Subtotal of Estimated Cost	259,275.00

ATTACHMENT "C"

Section 11.0(a-h) – Required Certification Submissions to HUD Field Office

PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 06/30/2011

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 **X** *Annual PHA Plan for the PHA fiscal year beginning,* **January 1, 2012** *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.

Housing Authority of the City of Georgetown	**SC028**
PHA Name	PHA Number/HA Code

_____5-Year PHA Plan for Fiscal Years 20 - 20

_X_ Annual PHA Plan for Fiscal Year 2012

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
Dorothy C. McKenzie	**Boad of Commissioners Chairperson**
Signature Dorothy C. McKenzie	Date **08/09/2011**

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the City of Georgetown

Program/Activity Receiving Federal Grant Funding

Low-Income Public and Other Affordable Housing

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.)

Place of performance are all public housing communities of the Housing Authority of the City of Georgetown, SC designated by HUD as SC028-1 and SC028-2. The Asset Managers for these communities are located at 1 Lincoln Street, Georgetown SC 29440

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	Title
Christina S. Woodruff	Executive Director
Signature X.	Date 08/09/2011

form **HUD-50070** (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

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

1. Type of Federal Action:
[b] a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

2. Status of Federal Action:
[b] a. bid/offer/application
b. initial award
c. post-award

3. Report Type:
[a] a. initial filing
b. material change
For Material Change Only:
year _____ quarter _____
date of last report _____

4. Name and Address of Reporting Entity:
☐ Prime ☐ Subawardee
Tier _____, *if known*:

Congressional District, *if known*: 4c

5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:

U.S. Department of Housing and Urban Development
Washington, D.C.

Congressional District, *if known*:

6. Federal Department/Agency:

U.S. Department of Housing and Urban Development

7. Federal Program Name/Description:

Low-Income Public Housing

CFDA Number, *if applicable*: _____

8. Federal Action Number, *if known*:

9. Award Amount, *if known*:
$

10. a. Name and Address of Lobbying Registrant
(*if individual, last name, first name, MI*):

NONE

b. Individuals Performing Services (*including address if different from No. 10a*)
(*last name, first name, MI*):

11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

Signature: Christina S. Woodruff
Print Name: Christina S. Woodruff
Title: Executive Director
Telephone No.: (843) 546-9621 ext. 27 Date: 08/09/2011

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

OMB Approval No. 2577-0157 (Exp. 01/31/2014)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Housing Authority of the City of Georgetown

Program/Activity Receiving Federal Grant Funding

Low-Income Public and Other Affordable Housing

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 sub recipients 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	Title
Christina S. Woodruff	Executive Director

Signature	Date (mm/dd/yyyy)
Christina S. Woodruff	08/09/2011

Previous edition is obsolete **form HUD 50071** (3/98)

ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

South Carolina State Housing Finance and Development Authority
300-C Outlet Pointe Blvd., Columbia, South Carolina 29210
Telephone: (803) 896-9001 TTY: (803) 896-8831
www.schousing.com

T. Scott Smith
Chairman

Valarie M. Williams
Executive Director

August 2, 2011

Attn: Connie Dennis,
Assistant to the Executive Director
Georgetown Housing Authority
P. O. Box 209
Georgetown, SC 29442

Re: Certification of Consistency form for the Georgetown Housing Authority for the Annual PHA Plan

Dear Ms. Dennis:

I have reviewed the above-referenced material that was sent by e-mail, dated August 1, 2011, and received by me August 1, 2011. As authorized signatory, I am sending the signed Certification by e-mail and the originals along with your documents by US mail.

Please let me know if I can be of further assistance.

Sincerely,

Ed Knight

Edwin R. Knight
Deputy Director and
Authorized Signatory

ERK/dgm

Enclosures

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

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

Housing Authority of the City of Georgetown	SC028
PHA Name	PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official Dorothy C. McKenzie	Title Board of Commissioners Chairperson
Signature Dorothy C. McKenzie	Date 08/09/2011

Section 11.0(g) – Resident Advisory Board ("RAB") Comments

On August 18, 2011, the Resident Advisory Board ("RAB") of the Housing Authority of the City of Georgetown (the "Agency") met to discuss the Agency's Five-Year Plan, including the activities completed and anticipated as part of the Agency's participation in the Capital Fund Program. The meeting commenced at 5:30 p.m. at the Drayton Community Center. The following RAB members were present:

Mr. Rufus Wilson, President
Mrs. Francina R. Newton, Vice President
Ms. Belinda Weaver, Treasurer

Mrs. Christina S. Woodruff, Executive Director, was also present and recorded the RAB comments.

Mrs. Woodruff provided the RAB and attendees with a summary of the 2012 Annual Plan which stated the GHA mission statement and changes from last year's plan. It also outlined current and proposed capital improvements by capital grants. She then thoroughly explained the contents of the proposed Annual Plan highlighting the following accomplishments:

1. Increased security
2. Enforcement of lease policy
3. Completed ARRA renovations
4. Current and proposed capital improvements

During the presentation, Mrs. Woodruff solicited comments from the RAB meeting participants.

Council members inquired as to the color of the new trim. Mrs. Woodruff informed them the color would be khaki with cream trim. Mr. Wilson asked about extra siding and getting his unit resided because of staining. Mrs. Woodruff informed him he could call in a work order to get it power washed since his was one of the newest constructions and wouldn't receive new siding.

A resident requested speed bumps be installed on her road as a deterrent to the continued speeding. Mrs. Woodruff informed her that speed bumps were not a viable option but she would inform the off-duty police patrol and have the set speed traps to catch the violators.

A resident inquired about the option for Plexiglas on the new glass storm doors. Mrs. Woodruff informed her that Plexiglas was not an option as it would be a safety hazard. Mrs. Newton asked if something could be done about the crack at the bottom of her screen door. Mrs. Woodruff informed her that it probably needed a new weather strip and encouraged her to call in a work order.

Overall the RAB was supportive of the annual plan and excited about the coming improvements.

Section 11.0(h) – Challenged Elements

There were no "challenged elements" to The Housing Authority of the City of Georgetown's 2012 Annual Plan.

2012 GHA Annual Plan

Thank you for reviewing our 2012 Annual Plan. Please sign and date the guest list below. Share your thoughts and opinions on the 2012 Annual Plan at our public hearing on:

Tuesday, September 13, 2011 at 6 p.m.
David H. Drayton Community Center, 1 Lincoln Street, Georgetown

Name	Date
1. Roberta Cambee	8-4-11
2. [illegible]	8-18-11
3. Belinda [illegible]	8-18-11
4. Francine R. Newton	08-18-11
5. Rufus Wilson	08-18-11
6. ~~[illegible]~~	
7 Regina R. Futch	8-25-11
8. Rudolph A Bradley	8-30-11
9 [illegible]	8-30-11
10. [illegible]	8-30-11
11. [illegible]	8-31-11
12.	
13.	
14.	
15.	
16.	
17.	
18.	
19.	
20.	

Attendance sheet

Annual Plan

Public Hearing

Tuesday, September 13, 2011

1. – NO ONE SHOWED UP –
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