

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
-----------------------------------	---	--

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>ELMIRA HOUSING AUTHORITY</u> PHA Code: <u>NY030</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>479</u> Number of HCV units: _____					
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
PHA 1:						
PHA 2:						
	PHA 3:					
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<p><b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:</p> <p><b>The Primary Mission of the Elmira Housing Authority is to provide Low-Income Families with decent, safe and sanitary shelter at a price they can afford. The Elmira Housing Authority will work diligently to provide its residents a quality, cost effective maintenance operation. We will investigate new opportunities to modernize the Authority's Buildings, and Grounds through the Capital Fund Modernization Programs and other grants. We will actively seek out new housing developments opportunities in the community with emphasis on a series of initiatives aimed at facilitating resident homeownership. We will provide our employees with fair wages and benefits and good working conditions. We will present our performance in a professional manner and will conform to those rules and regulations that are necessary to provide a beneficial relationship between the people we serve and public at large.</b></p>					

5.2	<p><b>Goals and Objectives.</b> Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p><b>EHA Goal: Enhance the marketability of the Elmira Housing Authority’s existing Public Housing Program</b>  Objective: The Elmira Housing Authority finalized on leveraging (collateralized) its Capital Funds Program on January 31, 2007 and received \$2,250,624.40 in Bonds. The bonds payable are in yearly installments to investors over a twenty-year period. The Elmira Housing Authority is using the proceeds from the bonds to perform the following improvements to its housing developments to be completed by December 31, 2008: Reside all buildings (54) at Hoffman Plaza; Rehab all apartment storage shed buildings (15 at Hoffman Plaza; Install new storm doors (224) to all Hoffman Plaza Apartments; Reseal the exterior of George Bragg Tower Building; Install Sprinkler System throughout Bragg Tower Building; Install Sprinkler System throughout Flannery Towers Building; Provide Emergency Lighting at Bragg and Flannery Apartments:  The Elmira Housing Authority will expand its Hoffman Plaza maintenance Garage Building to provide better access and storage of Housing Authority maintenance and apartment materials to be completed by December 31, 2008:  The Elmira Housing Authority will expand its Central office Storage into the adjacent former daycare building to centralize the storage of the Central Office records to be completed by December 31, 2008:  The Elmira Housing Authority will make itself ready by utilizing its financial resources to acquire properties near its developments for possible long term expansion of housing needs in the community by December 31, 2010:  The Elmira Housing Authority will make itself ready to accommodate area housing agencies by administering Section * Tenant project Based Assistance Vouchers should the Section * vouchers become available through a supplemental allocation from HUD by December 31, 2010:  <b>EHA Goal: Provide a safe and secure environment in the Elmira Housing Authority’s Public Housing Developments</b>  Objective: The Elmira Housing shall refine the Law Enforcement Plan with the Elmira Police Department. The purpose of this is to better define any future crime that occurs near the developments and to develop strategies for identifying and reducing the problem:  Involve the tenants and tenant associations to cooperate with the Police Officers to institute neighborhood watch programs and develop other crime prevention programs:  <b>EHA Goal: Improve access of Elmira Housing Authority residents to services that support economic opportunity and quality of life</b>  Objective: The Elmira Housing Authority will continue to partner with the Chemung County Office for the Aging to assist the elderly residents of Flannery and Bragg Towers to implement recreational and social activities by contracting for an on site Elderly Social Service Coordinator:  The Elmira Housing Authority will continue to have effective and full functioning tenant organizations at its three developments:  <b>EHA Goal: Manage the Elmira Housing Authority’s existing public housing programs in an efficient and effective manner thereby qualifying as a standard performer</b>  Objective: The United States Department of Housing and Urban Development shall recognize the Elmira Housing Authority as a High Performer by December 31, 2010:  The Elmira Housing Authority will make their public housing apartments more marketable to the community by increasing its waiting list to one that requires a six-month wait for housing by December 31, 2010:  The Elmira Housing Authority shall provide a motivating work environment with a capable and efficient team of employees to operate as a customer friendly and fiscally prudent leader in the affordable housing industry:  <b>EHA Goal: Implement Project Based Budgeting and Accounting Funding System to monitor performance at each development by December 31, 2006:</b>  Objective: Make individual developments (Bragg, Hoffman &amp; Flannery)) more accountable on spending, rent collection and occupancy problems:  Focus on strategies, cost benefits analysis and financial reporting on the developments:  <b>EHA Goal: Implement Project Based Asset management as a means of overseeing the property and asset management functions to ensure that strategic and performance goals set by the Board of Commissioners are achieved by December 31, 2010:</b>  Objective: Set operational long term capital planning and allocation property replacements. Reposition strategies to ensure the long-term viability of the Authority’s properties provide appropriate mechanisms for monitoring performance at the development level:  <b>EHA Goal: Continue with energy coast cutting measures to make housing more affordable and energy efficient:</b>  Objective: Obligate the 2009 Capital Fund Recovery “Stimulus” monies received from HUD before march 17, 2010 and implement the following:  Install Sprinkler System at Flannery Apartments; Replace Trash Room Equipment at Flannery Apartments; Replace Bathroom Exhaust System at Bragg Towers; Upgrade Kitchens at Bragg Towers; Upgrade Site Lighting at Hoffman Plaza; install Security Camera’s throughout Hoffman Plaza:  Make Application through 2009 Capital Fund Recovery “Stimulus Competition Grant to provide the following: Remodel all elevators at Bragg Towers; Remodel all elevators at Flannery Apartments; Replace all windows at Flannery Apartments:</p>
6.0	<p><b>PHA Plan Update</b></p> <ul style="list-style-type: none"> <li>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</li> <li>(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.</li> <li>(1) PHA Plans are available for public inspection at the following: Main Administrative Office, All PHA Development Offices, and the Housing Authority website (www.elmirahousing.org).</li> </ul>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>

8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input 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><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p><b>The Consolidated Plan of the City of Elmira for the year 2005 shows no impact for affordability, location and supply of housing. However, accessible housing is a major issue for the disabled and elderly. The quality and size of housing varies throughout jurisdiction of the City of Elmira.</b></p>

9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>Presently, the Elmira Housing Authority (a/o 9/1/2009) has 21 apartment vacancies or 4.4% of its inventory. Consequently, there is little or no waiting list except for single bedroom apartments in the family (Hoffman Plaza) development. The Housing Authority carries out modification's as needed to apartments with special emphasis towards section 504 needs. The Housing Authority has effectively marketed local non-profit agencies that assists families in need of housing, however, The quality of the applicant remains an issue as the Elmira Housing Authority will not detract away from its admission standards.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p><b>The Elmira Housing Authority closed on its Capital Fund Financing Program in January 2007, and all work has been completed before the expiration date of January 2010, and completed its garage expansion through the Capital Fund Program.. Also, the Housing Authority completed all of its modernization needs under its energy performance contract agreement with the Siemens Building Technologies Corporation.</b></p> <p><b>The Housing Authority renewed its agreement with the Chemung County Office for the Aging for the 15<sup>th</sup> consecutive year to provided services to the elderly at Bragg and Flannery Towers and renewed its agreement with the City of Elmira Police Department for the 10<sup>th</sup> consecutive year to provide a safe and secure environment around the development.</b></p> <p><b>The Housing Authority's major goal is regaining it's status as a "High Performer" again. The extensive amount of modernization work performed over the past two years should enable the housing authority to accomplish the "High Performer" status. The only hindrance is the large vacancy percentage, but over the past nine months the percentage has improved.</b></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>The Elmira Housing Authority defines significant amendment and substantial deviation/modification as a condition in which the original design needed to be altered by Board Approval to improve conditions within applicable requirements and regulations.</b></p>

11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <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>
------	--

**11.0(f) Per Elmira Housing Authority 2009.083 – Receiving Correspondence from Executive Director in regards to public hearing from September 18, 2009: No comments were received at the public hearing and no comments were received from the Resident Advisory Board.**

## **6(b) 13 Violence Against Women Act (VAWA) Policy**

### **ELMIRA HOUSING AUTHORITY**

#### **VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY**

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

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

This Policy shall be applicable to the administration by EHA of all federally subsidized public housing and Section 8 rental assistance under the United States Housing Act of 1937 (42 U.S.C. §1437 et seq.). Notwithstanding its title, this policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

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

This Policy has the following principal goals and objectives:

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

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

This Policy shall be referenced in and attached to EHA's Five-Year Public Housing Agency Plan and shall be incorporated in and made a part of EHA's Admissions and Continued Occupancy Policy. EHA's annual public housing agency plan shall also contain information concerning EHA's activities, services or programs relating to domestic violence, dating violence, and stalking.

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

##### **IV. Definitions**

As used in this Policy:

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

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

- (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- (B) where the existence of such a relationship shall be determined based on a consideration of the following factors:

- (i) The length of the relationship.
- (ii) The type of relationship.
- (iii) The frequency of interaction between the persons involved in the relationship.

C. Stalking – means –

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

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

- (i) that person;
- (ii) a member of the immediate family of that person; or
- (iii) the spouse or intimate partner of that person;

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

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

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

##### **V. Admissions and Screening**

A. Non-Denial of Assistance. EHA will not deny admission to public housing or to the Section 8 rental assistance program to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

B. Admissions Preference. Applicants for housing assistance from EHA will receive a preference in admissions by virtue of their status as victims of domestic violence [dating violence, stalking]. This preference is particularly described as follows: [Graduates of transitional housing programs: for homeless/victims of domestic abuse]

C. Mitigation of Disqualifying Information. When so requested in writing by an applicant for assistance whose history includes incidents in which the applicant was a victim of domestic violence, EHA, may but shall not be obligated to, take such information into account in mitigation of potentially disqualifying information, such as poor credit history or previous damage to a dwelling. If requested by an applicant to take such mitigating information into account, EHA shall be entitled to conduct such inquiries as are reasonably necessary to verify the claimed history of domestic violence and its probable relevance to the potentially disqualifying information. EHA will not disregard or mitigate potentially disqualifying information if the applicant household includes a perpetrator of a previous incident or incidents of domestic violence.

#### VI. Termination of Tenancy or Assistance

A. VAWA Protections. Under VAWA, public housing residents and persons assisted under the Section 8 rental assistance program have the following specific protections, which will be observed by EHA:

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be a "serious or repeated" violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of or assistance to the victim of that violence.

2. In addition to the foregoing, tenancy or assistance will not be terminated by EHA as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant's control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance described in this paragraph is subject to the following limitations:

(a) Nothing contained in this paragraph shall limit any otherwise available authority of EHA' or a Section 8 owner or manager to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant's household. However, in taking any such action, neither EHA nor a Section 8 manager or owner may apply a more demanding standard to the victim of domestic violence dating violence or stalking than that applied to other tenants.

(b) Nothing contained in this paragraph shall be construed to limit the authority of EHA or a Section 8 owner or manager to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or EHA, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance.

B. Removal of Perpetrator. Further, notwithstanding anything in paragraph VI.A.2. or Federal, State or local law to the contrary, EHA or a Section 8 owner or manager, as the case may be, may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to a lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the tenant or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by EHA. Leases used for all public housing operated by EHA and, at the option of Section 8 owners or managers, leases for dwelling units occupied by families assisted with Section 8 rental assistance administered by EHA, shall contain provisions setting forth the substance of this paragraph.

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

A. Requirement for Verification. The law allows, but does not require, EHA or a section 8 owner or manager to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this policy. Subject only to waiver as provided in paragraph VII. C., EHA shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by EHA. Section 8 owners or managers receiving rental assistance administered by EHA may elect to require verification, or not to require it as permitted under applicable law.

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

1. HUD-approved form - by providing to EHA or to the requesting Section 8 owner or manager a written certification, on a form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.

2. Other documentation - by providing to EHA or to the requesting Section 8 owner or manager documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The

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

3. Police or court record – by providing to EHA or to the requesting Section 8 owner or manager a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.

B. Time allowed to provide verification/ failure to provide. An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by EHA, or a Section 8 owner or manager to provide verification, must provide such verification within 14 business days (i.e., 14 calendar days, excluding Saturdays, Sundays, and federally-recognized holidays) after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action.

C. Waiver of verification requirement. The Executive Director of EHA, or a Section 8 owner or manager, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this policy based on the victim's statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director, owner or manager. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

#### VIII. Confidentiality

A. Right of confidentiality. All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to EHA or to a Section 8 owner or manager in connection with a verification required under section VII of this policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:

1. requested or consented to by the individual in writing, or

2. required for use in a public housing eviction proceeding or in connection with termination of Section 8 assistance, as permitted in VAWA, or

3. otherwise required by applicable law.

B. Notification of rights. All tenants of public housing and tenants participating in the Section 8 rental assistance program administered by EHA shall be notified in writing concerning their right to confidentiality and the limits on such rights to confidentiality.

#### VIII. Transfer to New Residence

A. No right to transfer. EHA will make every effort to accommodate requests for transfer when suitable alternative vacant units are available and the circumstances warrant such action. However, except with respect to portability of Section 8 assistance as provided in paragraph IX. E. below the decision to grant or refuse to grant a transfer shall lie within the sole discretion of EHA, and this policy does not create any right on the part of any applicant to be granted a transfer.

B. Family rent obligations. If a family occupying EHA public housing moves before the expiration of the lease term in order to protect the health or safety of a household member, the family will remain liable for the rent during the remainder of the lease term unless released by EHA. In cases where EHA determines that the family's decision to move was reasonable under the circumstances, EHA may wholly or partially waive rent payments and any rent owed shall be reduced by the amounts of rent collected for the remaining lease term from a tenant subsequently occupying the unit.

C. Portability. Notwithstanding the foregoing, a Section 8-assisted tenant will not be denied portability to a unit located in another jurisdiction (notwithstanding the term of the tenant's existing lease has not expired, or the family has not occupied the unit for 12 months) so long as the tenant has complied with all other requirements of the Section 8 program and has moved from the unit in order to protect a health or safety of an individual member of the household who is or has been the victim of domestic violence dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.

#### X. Court Orders/Family Break-up

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

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

#### XI. Relationships with Service Providers

It is the policy of EHA to cooperate with organizations and entities, both private and governmental, that provide shelter and/or services to victims of domestic violence. If EHA staff become aware that an individual assisted by EHA is a victim of domestic violence, dating violence or stalking, EHA will refer the victim to such providers of shelter or services as appropriate. Notwithstanding the foregoing, this Policy does not create any legal obligation requiring EHA either to maintain a relationship with any particular provider of shelter or

services to victims or domestic violence or to make a referral in any particular case. EHA's annual public housing agency plan shall describe providers of shelter or services to victims of domestic violence with which EHA has referral or other cooperative relationships.

XII. Notification

EHA shall provide written notification to applicants, tenants, and Section 8 owners and managers, concerning the rights and obligations created under VAWA relating to confidentiality, denial of assistance and, termination of tenancy or assistance.

XIII. Relationship with Other Applicable Laws

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

XIV. Amendment

This policy may be amended from time to time by EHA as approved by the EHA Board of Commissioners.  
Adopted as resolution number 2007.062, at EHA Board Meeting of May 31, 2007.

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](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.

**Component 7**  
**Capital Fund Program Annual Statement**  
**Parts I, II, and II**

Existing Programs:

1. NY06P03050107\_Rev4
2. NY06P03050108\_Rev5
3. NY06P03050109

Capital Fund Financing Program

Capital Fund Recovery Act Grant

Annual Statement & Five-Year Plan (new application):

1. NY06P03050110

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

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

<b>Part I: Summary</b>																
<b>PHA Name:</b> Elmira Housing Authority	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>Grant Type and Number:</b></td> <td><b>FFY of Grant:</b></td> </tr> <tr> <td>Capital Fund Program Grant No.:</td> <td>NY06P03050107</td> <td>2007</td> </tr> <tr> <td>Replacement Housing Factor Grant No:</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Date of CFFP: _____</td> <td><b>FFY of Grant Approval:</b></td> </tr> <tr> <td colspan="2"></td> <td>_____</td> </tr> </table>	<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	Capital Fund Program Grant No.:	NY06P03050107	2007	Replacement Housing Factor Grant No:			Date of CFFP: _____		<b>FFY of Grant Approval:</b>			_____
<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>														
Capital Fund Program Grant No.:	NY06P03050107	2007														
Replacement Housing Factor Grant No:																
Date of CFFP: _____		<b>FFY of Grant Approval:</b>														
		_____														

<b>Type of Grant</b>	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009	<input type="checkbox"/> Revised Annual statement (revision no: 4 )
	<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	63,033.00	63,033.00	63,033.00	63,033.00
3	1408 Management Improvements	56,500.00	54,500.00	54,500.00	54,500.00
4	1410 Administration (may not exceed 10% of line 21)	63,033.00	59,827.36	59,827.36	59,827.36
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	25,000.00	6,220.19	6,220.19	6,220.19
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	68,755.00	66,955.00	66,955.00	66,955.00
10	1460 Dwelling Structures	73,000.00	85,573.78	85,573.78	85,573.78
11	1465.1 Dwelling Equipment - Nonexpendable	5,000.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	70,000.00	111,409.89	111,409.89	111,409.89
13	1475 Non-dwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	182,810.78	182,810.78	182,810.78	46,384.38
19	1502 Contingency (may not exceed 8% of line 20)	23,198.22	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	630,330.00	630,330.00	630,330.00	493,903.60
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	54,500.00	54,500.00	54,500.00	54,500.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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

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

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

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

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

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

<b>Part I: Summary</b>			
PHA Name:  Elmira Housing Authority		Grant Type and Number: Capital Fund Program Grant No : NY06P03050107      Replacement Housing Factor Grant No: Date of CFFP: _____	
		FFY of Grant: 2007 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: 4 ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009 <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	
		Original	Revised <sup>2</sup>
		Total Actual Cost <sup>1</sup>	
		Obligated	Expended
Signature of Executive Director <i>José M. Nuñez</i>		Date 10/15/2009	Signature of Public Housing Director  Date

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

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

<b>Part II: Supporting Pages</b>									
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050107</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant:  2007	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>Operations</b>		<b>1406</b>							
A11	Operations			29,940.68	29,940.68	29,940.68	29,940.68		
A12	Operations			33,092.32	33,092.32	33,092.32	33,092.32		
Total for Operations				63,033.00	63,033.00	63,033.00	63,033.00		
<b>Management Improvements</b>		<b>1408</b>							
A11	Drug Enforcement Personnel			25,887.49	25,887.49	25,887.49	25,887.49		
A12	Drug Enforcement Personnel			28,612.51	28,612.51	28,612.51	28,612.51		
A11	Staff Training			950.00	0.00	0.00	0.00		
A12	Staff Training			1,050.00	0.00	0.00	0.00		
A11	Security Improvements			0.00	0.00	0.00	0.00		
A12	Security Improvements			0.00	0.00	0.00	0.00		
Total for Management Improvements				56,500.00	54,500.00	54,500.00	54,500.00		
<b>Administration</b>		<b>1410</b>							
A11	Modernization Coordinator	1410.1		18,810.00	18,810.00	18,810.00	18,810.00		
A12	Modernization Coordinator	1410.1		36,190.00	36,190.00	36,190.00	36,190.00		
A11	Printing & Advertising	1410.12		2,375.00	410.82	410.82	410.82		
A12	Printing & Advertising	1410.12		2,625.00	1,383.54	1,383.54	1,383.54		
A11	Admin. Sundry	1410.19		1,037.29	1,037.29	1,037.29	1,037.29		
A12	Admin. Sundry	1410.19		1,995.71	1,995.71	1,995.71	1,995.71		
Total for Administration				63,033.00	59,827.36	59,827.36	59,827.36		
<b>Fees &amp; Costs</b>		<b>1430</b>							
A11	Architectural & Engineering Fees			11,875.00	287.04	287.04	287.04		
A11	Asbestos Abatement			0.00	2,422.84	2,422.84	2,422.84		
A11	Asbestos Survey			0.00	1,200.00	1,200.00	1,200.00		
A11	Asbestos Air Monitoring			0.00	1,677.35	1,677.35	1,677.35		
A12	Architectural & Engineering Fees			13,125.00	632.96	632.96	632.96		
Total for Fees & Costs				25,000.00	6,220.19	6,220.19	6,220.19		
<b>Collateralization or Debt Service</b>		<b>1501</b>		182,810.78	182,810.78	182,810.78	46,384.38		
<b>Contingency</b>		<b>1502</b>							
A11	Contingency			11,019.15	0.00	0.00	0.00		
A12	Contingency			12,179.07	0.00	0.00	0.00		
Total for Contingency				23,198.22	0.00	0.00	0.00		

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name:  Elmira Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050107</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant:  2007	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP 11</b>	<b>Site Improvement</b>	<b>1450</b>						
Hoffman Plaza	Paving & Resealing			18,995.00	18,995.00	18,995.00	18,995.00	
	Total for Site Improvement			18,995.00	18,995.00	18,995.00	18,995.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Apt. modifications			52,072.62	52,072.62	52,072.62	52,072.62	
	Repl. Closet doors			0.00	0.00	0.00	0.00	
	Repl. BR & Bath doors			0.00	0.00	0.00	0.00	
	Kitchen vent fans			0.00	5,573.78	5,573.78	5,573.78	
	Total for Dwelling Structures			52,072.62	57,646.40	57,646.40	57,646.40	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Hot water tanks			5,000.00	0.00	0.00	0.00	
	Total for Dwelling Equipment - Nonexp.			5,000.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Mod. Office renovations			0.00	0.00	0.00	0.00	
	Garage addition			70,000.00	111,409.89	111,409.89	111,409.89	
	Total for Nondwelling Structures			70,000.00	111,409.89	111,409.89	111,409.89	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Computers			0.00	0.00	0.00	0.00	
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00	

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

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

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

<b>Part II: Supporting Pages</b>									
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050107</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant:  2007	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
AMP 12	<b>Site Improvement</b>	<b>1450</b>							
George E. Bragg Towers	Exterior Lighting			10,000.00	0.00	0.00	0.00		
	Paving & Resealing			0.00	8,200.00	8,200.00	8,200.00		
	Total for Site Improvement			10,000.00	8,200.00	8,200.00	8,200.00		
	<b>Dwelling Structures</b>	<b>1460</b>							
	Restroom renovations			0.00	0.00	0.00	0.00		
	Lobby & first floor renovations			16,003.81	16,003.81	16,003.81	16,003.81		
	Total for Dwelling Structures			16,003.81	16,003.81	16,003.81	16,003.81		
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>							
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00		
	<b>Nondwelling Structures</b>	<b>1470</b>							
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00		
	<b>Nondwelling Equipment</b>	<b>1475</b>							
	Trashroom equipment			0.00	0.00	0.00	0.00		
	Computers			0.00	0.00	0.00	0.00		
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00		

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

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



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund program Replacment Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

<b>Part II: Supporting Pages</b>								
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050107</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant: 2007	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP T2</b>	<b>Site Improvement</b>	<b>1450</b>						
Edward Flannery Apartments	Paving & Resealing			39,760.00	39,760.00	39,760.00	39,760.00	
	Total for Site Improvement			39,760.00	39,760.00	39,760.00	39,760.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Kitchen cabinets & flooring			0.00	0.00	0.00	0.00	
	Apt. modifications			4,923.57	11,923.57	11,923.57	11,923.57	
	Total for Dwelling Structures			4,923.57	11,923.57	11,923.57	11,923.57	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Computers			0.00	0.00	0.00	0.00	
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00	

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

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Elmira Housing Authority					Federal FFY of Grant: 2007
Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 11					
Hoffman Pl.	9/12/2009		9/12/2010		
AMP 12					
Bragg Towers	9/12/2009		9/12/2010		
AMP 12					
Flannery Apts.	9/12/2009		9/12/2010		

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

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

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

<b>Part I: Summary</b>																
<b>PHA Name:</b> Elmira Housing Authority	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>Grant Type and Number:</b></td> <td><b>FFY of Grant:</b></td> </tr> <tr> <td>Capital Fund Program Grant No.:</td> <td>NY06P03050108</td> <td>2008</td> </tr> <tr> <td>Replacement Housing Factor Grant No:</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Date of CFFP: _____</td> <td><b>FFY of Grant Approval:</b></td> </tr> <tr> <td colspan="2"></td> <td>_____</td> </tr> </table>	<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	Capital Fund Program Grant No.:	NY06P03050108	2008	Replacement Housing Factor Grant No:			Date of CFFP: _____		<b>FFY of Grant Approval:</b>			_____
<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>														
Capital Fund Program Grant No.:	NY06P03050108	2008														
Replacement Housing Factor Grant No:																
Date of CFFP: _____		<b>FFY of Grant Approval:</b>														
		_____														

<b>Type of Grant</b>	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009	<input type="checkbox"/> Revised Annual statement (revision no: 5 )
	<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	68,195.00	68,195.00	68,195.00	34,097.48
3	1408 Management Improvements	56,500.00	56,500.00	54,250.00	43,386.03
4	1410 Administration (may not exceed 10% of line 21)	68,195.00	68,195.00	64,142.06	64,142.06
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	41,765.00	16,765.00	16,765.00	16,765.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	65,000.00	37,838.35	30,338.35	20,500.00
10	1460 Dwelling Structures	71,775.00	147,114.00	131,114.00	20,433.16
11	1465.1 Dwelling Equipment - Nonexpendable	15,000.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	89,590.11	89,590.11	89,590.11	60,940.11
13	1475 Non-dwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	182,810.78	182,810.78	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	23,127.11	14,949.76	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	681,958.00	681,958.00	454,394.52	260,263.84
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	54,250.00	54,250.00	54,250.00	43,386.03
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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


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

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

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

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

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

<b>Part I: Summary</b>		<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>
<b>PHA Name:</b> Elmira Housing Authority		Capital Fund Program Grant No.: NY06P03050108	Replacement Housing Factor Grant No:	2008
		Date of CFFP: _____		<b>FFY of Grant Approval:</b> _____
<b>Type of Grant</b>				
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual statement (revision no: <u>5</u> )
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending <u>6/30/2009</u>		<input type="checkbox"/> Final Performance and Evaluation Report		
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>
		<b>Original</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b> <b>Expended</b>
<b>Signature of Executive Director</b>	James A. Mirando	<b>Date</b>	<b>Signature of Public Housing Director</b>	<b>Date</b>
x		10/15/2009		

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

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

<b>Part II: Supporting Pages</b>									
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050108</u> Replacement Housing Factor Grant No.: _____				Rev. #5 CFPP (Yes/No): No		Federal FY of Grant: 2008
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>Operations</b>		<b>1406</b>							
A11	Operations			20,526.70	20,526.70	20,526.70	10,263.34		
A12	Operations			47,668.30	47,668.30	47,668.30	23,834.14		
Total for Operations				68,195.00	68,195.00	68,195.00	34,097.48		
<b>Management Improvements</b>		<b>1408</b>							
A11	Drug Enforcement Personnel			23,750.00	23,750.00	23,750.00	18,589.58		
A12	Drug Enforcement Personnel			26,250.00	26,250.00	26,250.00	20,546.45		
A11	Staff Training			950.00	950.00	0.00	0.00		
A12	Staff Training			1,050.00	1,050.00	0.00	0.00		
A11	Security Improvements			2,087.50	2,087.50	2,087.50	2,087.50		
A12	Security Improvements			2,162.50	2,162.50	2,162.50	2,162.50		
A11	Resident Training for Self-Sufficiency			50.00	50.00	0.00	0.00		
A12	Resident Training for Self-Sufficiency			200.00	200.00	0.00	0.00		
Total for Management Improvements				56,500.00	56,500.00	54,250.00	43,386.03		
<b>Administration</b>		<b>1410</b>							
A11	Modernization Coordinator	1410.1		28,951.25	28,951.25	28,951.25	28,951.25		
A12	Modernization Coordinator	1410.1		31,998.75	31,998.75	31,998.75	31,998.75		
A11	Printing & Advertising	1410.12		2,147.75	2,147.75	51.30	51.30		
A12	Printing & Advertising	1410.12		2,097.25	2,097.25	140.76	140.76		
A11	Admin. Sundry	1410.19		1,425.00	1,425.00	1,425.00	1,425.00		
A12	Admin. Sundry	1410.19		1,575.00	1,575.00	1,575.00	1,575.00		
Total for Administration				68,195.00	68,195.00	64,142.06	64,142.06		
<b>Fees &amp; Costs</b>		<b>1430</b>							
A11	Architectural & Engineering Fees			11,875.00	0.00	0.00	0.00		
A12	Architectural & Engineering Fees			13,125.00	0.00	0.00	0.00		
A11	Needs Assessment			7,963.38	7,963.38	7,963.38	7,963.38	contract completed	
A12	Needs Assessment			8,801.62	8,801.62	8,801.62	8,801.62	contract completed	
Total for Fees & Costs				41,765.00	16,765.00	16,765.00	16,765.00		
<b>Collateralization or Debt Service</b>		<b>1501</b>		182,810.78	182,810.78	0.00	0.00		
<b>Contingency</b>		<b>1502</b>							
A11	Contingency			227.25	1,888.25	0.00	0.00		
A12	Contingency			22,899.86	13,061.51	0.00	0.00		
Total for Contingency				23,127.11	14,949.76	0.00	0.00		

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name:  Elmira Housing Authority		Grant Type and Number: Rev. #5 Capital Fund Program Grant No.: <u>NY06P03050108</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant:  2008		
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP 11</b>	<b>Site Improvement</b>	<b>1450</b>						
Hoffman Plaza	Paving & Resealing			25,000.00	0.00	0.00	0.00	
	Site Lighting			8,000.00	0.00	0.00	0.00	
	Walkway Repairs			4,000.00	0.00	0.00	0.00	
	Total for Site Improvement			37,000.00	0.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Bldg. Siding			0.00	75,339.00	75,339.00	0.00	
	Apt. Modifications			23,000.00	23,000.00	23,000.00	12,133.16	
	Foundations & Crawlspace			8,000.00	8,000.00	0.00	0.00	
	Repl. Closet Doors			4,000.00	4,000.00	0.00	0.00	
	Repl. BR & Bath Doors			4,000.00	4,000.00	0.00	0.00	
	Chimney Repairs			24,475.00	24,475.00	24,475.00	0.00	
	Total for Dwelling Structures			63,475.00	138,814.00	122,814.00	12,133.16	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Hot Water Tanks			5,000.00	0.00	0.00	0.00	
	Total for Dwelling Equipment - Nonexp.			5,000.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Garage Addition			89,590.11	89,590.11	89,590.11	60,940.11	
	Total for Nondwelling Structures			89,590.11	89,590.11	89,590.11	60,940.11	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00	

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name:  Elmira Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050108</u> Replacement Housing Factor Grant No.: _____				Rev. #5 CFFP (Yes/No): No		Federal FY of Grant:  2008
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AMP 12	<b>Site Improvement</b>	<b>1450</b>						
George E.	Bldg. Seal			0.00	9,838.35	9,838.35	0.00	
Bragg	Walkway Repairs			2,500.00	2,500.00	0.00	0.00	
Towers	Paving & Resealing			20,500.00	20,500.00	20,500.00	20,500.00	contract completed
	Total for Site Improvement			23,000.00	32,838.35	30,338.35	20,500.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Restroom Renovations			0.00	0.00	0.00	0.00	
	First Floor Renovations			0.00	0.00	0.00	0.00	
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	

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

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund program Replacment Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

Part II: Supporting Pages		Grant Type and Number: Rev. #5						Federal FY of Grant:
PHA Name: Elmira Housing Authority		Capital Fund Program Grant No.: NY06P03050108				CFPP (Yes/No): No		2008
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AMP T2	<b>Site Improvement</b>	<b>1450</b>						
Edward Flannery Apartments	Walkway Repairs			5,000.00	5,000.00	0.00	0.00	
	Total for Site Improvement			5,000.00	5,000.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Kitchen Cabinets			0.00	0.00	0.00	0.00	
	First Floor Renovations			8,300.00	8,300.00	8,300.00	8,300.00	contract completed
	Total for Dwelling Structures			8,300.00	8,300.00	8,300.00	8,300.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Ranges			10,000.00	0.00	0.00	0.00	
	Hot Water Tanks			0.00	0.00	0.00	0.00	
	Total for Dwelling Equipment - Nonexp.			10,000.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Additional Storage			0.00	0.00	0.00	0.00	
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00	

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



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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:		Capital Fund Program Grant No.: NY06P03050108 Rev. #5			Federal FFY of Grant:
Elmira Housing Authority					2008
Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 11					
Hoffman Pl.	6/12/2010		6/12/2011		
AMP 12					
Bragg Towers	6/12/2010		6/12/2011		
AMP 12					
Flannery Apts.	6/12/2010		6/12/2011		

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

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

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

<b>Part I: Summary</b>													
<b>PHA Name:</b>  Elmira Housing Authority	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>Grant Type and Number:</b></td> <td style="text-align: right;"><b>FFY of Grant:</b></td> </tr> <tr> <td>Capital Fund Program Grant No.:</td> <td style="text-align: center;">NY06P03050109</td> <td style="text-align: center;">2009</td> </tr> <tr> <td>Date of CFFP:</td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><b>FFY of Grant Approval:</b></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">_____</td> </tr> </table>	<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	Capital Fund Program Grant No.:	NY06P03050109	2009	Date of CFFP:	_____	<b>FFY of Grant Approval:</b>			_____
<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>											
Capital Fund Program Grant No.:	NY06P03050109	2009											
Date of CFFP:	_____	<b>FFY of Grant Approval:</b>											
		_____											

<b>Type of Grant</b>	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009	<input type="checkbox"/> Revised Annual statement (revision no: _____)
	<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	68,195.00	68,195.00	0.00	0.00
3	1408 Management Improvements	42,500.00	42,500.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	65,000.00	65,000.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	28,000.00	28,000.00	0.00	0.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	10,000.00	10,000.00	0.00	0.00
10	1460 Dwelling Structures	25,000.00	25,000.00	0.00	0.00
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	0.00	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	220,000.00	220,000.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	184,435.47	184,435.47	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	38,827.53	38,827.53	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	681,958.00	681,958.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	42,500.00	42,500.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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


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

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

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

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

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

<b>Part I: Summary</b>	
PHA Name:  Elmira Housing Authority	Grant Type and Number: Capital Fund Program Grant No. NY06P03050109 Replacement Housing Factor Grant No. Date of CFFP: _____
	FFY of Grant: 2009 FFY of Grant Approval: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009 <input type="checkbox"/> Final Performance and Evaluation Report	
<b>Line</b>	<b>Summary by Development Account</b>
	<b>Total Estimated Cost</b>
	<b>Total Actual Cost<sup>1</sup></b>
	<b>Original      Revised<sup>2</sup>      Obligated      Expended</b>
Signature of Executive Director 	Date 10/15/2009
Signature of Public Housing Director	Date

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

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

<b>Part II: Supporting Pages</b>									
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant: 2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>Operations</b>		<b>1406</b>							
A11	Operations			20,458.50	20,458.50	0.00	0.00		
A12	Operations			47,736.50	47,736.50	0.00	0.00		
Total for Operations				68,195.00	68,195.00	0.00	0.00		
<b>Management Improvements</b>		<b>1408</b>							
A11	Drug Enforcement Personnel			19,000.00	12,000.00	0.00	0.00		
A12	Drug Enforcement Personnel			21,000.00	28,000.00	0.00	0.00		
A11	Security Improvements			1,187.50	750.00	0.00	0.00		
A12	Security Improvements			1,312.50	1,750.00	0.00	0.00		
Total for Management Improvements				42,500.00	42,500.00	0.00	0.00		
<b>Administration</b>		<b>1410</b>							
A11	Modernization Coordinator	1410.1		17,700.00	17,700.00	0.00	0.00		
A12	Modernization Coordinator	1410.1		41,300.00	41,300.00	0.00	0.00		
A11	Printing & Advertising	1410.12		1,662.50	1,050.00	0.00	0.00		
A12	Printing & Advertising	1410.12		1,837.50	2,450.00	0.00	0.00		
A11	Admin. Sundry	1410.19		1,187.50	750.00	0.00	0.00		
A12	Admin. Sundry	1410.19		1,312.50	1,750.00	0.00	0.00		
Total for Administration				65,000.00	65,000.00	0.00	0.00		
<b>Fees &amp; Costs</b>									
A11	Architectural & Engineering Fees	<b>1430</b>		13,300.00	8,400.00	0.00	0.00		
A12	Architectural & Engineering Fees			14,700.00	19,600.00	0.00	0.00		
Total for Fees & Costs				28,000.00	28,000.00	0.00	0.00		
<b>Collateralization or Debt Service</b>		<b>1501</b>							
	Bond Payment			184,435.47	184,435.47	0.00	0.00		
Total for Collateralization or Debt Service				184,435.47	184,435.47	0.00	0.00		
<b>Contingency</b>		<b>1502</b>							
A11	Contingency			11,648.26	11,648.26	0.00	0.00		
A12	Contingency			27,179.27	27,179.27	0.00	0.00		
Total for Contingency				38,827.53	38,827.53	0.00	0.00		

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

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



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

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

<b>Part II: Supporting Pages</b>									
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant:  2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
AMP 12	<b>Site Improvement</b>	<b>1450</b>							
George E. Bragg Towers									
	Total for Site Improvement			0.00	0.00	0.00	0.00		
	<b>Dwelling Structures</b>	<b>1460</b>							
	Total for Dwelling Structures			0.00	0.00	0.00	0.00		
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>							
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00		
	<b>Nondwelling Structures</b>	<b>1470</b>							
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00		
	<b>Nondwelling Equipment</b>	<b>1475</b>							
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00		

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

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund program Replacment Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

Part II: Supporting Pages		Grant Type and Number:						Federal FY of Grant:
PHA Name: Elmira Housing Authority		Capital Fund Program Grant No.: <u>NY06P03050109</u> CFFP (Yes/No): No						2009
		Replacement Housing Factor Grant No.: _____						
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP T2</b>	<b>Site Improvement</b>	<b>1450</b>						
Edward Flannery Apartments	Parking Lot Work			10,000.00	10,000.00	0.00	0.00	
	Total for Site Improvement			10,000.00	10,000.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Trashroom equipment			20,000.00	20,000.00	0.00	0.00	
	Install sprinkler system			200,000.00	200,000.00	0.00	0.00	
	Total for Nondwelling Equipment			220,000.00	220,000.00	0.00	0.00	

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

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: Elmira Housing Authority				Federal FFY of Grant: 2009	
Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 11					
Hoffman Pl.	6/12/2011		6/12/2012		
AMP 12					
Bragg Towers	6/12/2011		6/12/2012		
AMP 12					
Flannery Apts.	6/12/2011		6/12/2012		

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



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

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

<b>Part I: Summary</b>										
<b>PHA Name:</b> Elmira Housing Authority	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>Grant Type and Number:</b></td> <td><b>FFY of Grant:</b></td> </tr> <tr> <td>Capital Fund Program Grant No.:</td> <td>CFFP Program</td> <td>Replacement Housing Factor Grant No:</td> </tr> <tr> <td>Date of CFFP:</td> <td>1/1/2008</td> <td><b>FFY of Grant Approval:</b></td> </tr> </table>	<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	Capital Fund Program Grant No.:	CFFP Program	Replacement Housing Factor Grant No:	Date of CFFP:	1/1/2008	<b>FFY of Grant Approval:</b>
<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>								
Capital Fund Program Grant No.:	CFFP Program	Replacement Housing Factor Grant No:								
Date of CFFP:	1/1/2008	<b>FFY of Grant Approval:</b>								

<b>Type of Grant</b>	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009	<input type="checkbox"/> Revised Annual statement (revision no: 5 )
<input type="checkbox"/> Final Performance and Evaluation Report	

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0.00	0.00	0.00	0.00
3	1408 Management Improvements	0.00	0.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	0.00	0.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	256,432.90	256,432.90	256,432.90	256,056.62
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	761,946.22	756,159.22	756,159.22	571,056.13
10	1460 Dwelling Structures	706,267.32	608,144.34	608,144.34	600,350.74
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	50,000.00	50,000.00	50,000.00	50,000.00
13	1475 Non-dwelling Equipment	717,375.00	745,964.98	745,964.98	745,964.98
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	95,526.50	95,526.50	95,526.50	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	2,587,547.94	2,512,227.94	2,512,227.94	2,223,428.47
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	1,268,852.32	1,187,745.32	1,187,745.32	1,005,627.26

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

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

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

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

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

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

<b>Part I: Summary</b>			
<b>PHA Name:</b> Elmira Housing Authority		<b>Grant Type and Number:</b> Capital Fund Program Grant No.: _____ Date of CFFP: <u>1/1/2008</u>	
		<b>Replacement Housing Factor Grant No</b>	<b>FFY of Grant:</b> _____ <b>FFY of Grant Approval:</b> _____
<b>Type of Grant</b>			
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies	
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending <u>6/30/2009</u>		<input type="checkbox"/> Revised Annual statement (revision no: <u>5</u> )	
		<input type="checkbox"/> Final Performance and Evaluation Report	
<b>Line</b>		<b>Summary by Development Account</b>	
		<b>Total Estimated Cost</b>	
		<b>Total Actual Cost<sup>1</sup></b>	
		<b>Original</b>	<b>Revised<sup>2</sup></b>
		<b>Obligated</b>	<b>Expended</b>
<b>Signature of Executive Director</b> James A. Mirando  X <i>James A. Mirando</i>		<b>Signature of Public Housing Director</b>  <i>[Signature]</i>	
<b>Date</b> <u>10/15/2009</u>		<b>Date</b> _____	



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

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

<b>Part II: Supporting Pages</b>								
PHA Name: <b>Elmira Housing Authority</b>			Grant Type and Number: Capital Fund Program Grant No.: _____ CFFP (Yes/No): Yes Replacement Housing Factor Grant No.: _____				Federal FY of Grant:	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP 11</b>	<b>Site Improvement</b>	<b>1450</b>						
Hoffman Plaza	Foundation Access			114,196.22	114,196.22	114,196.22	103,417.59	
	Total for Site Improvement			114,196.22	114,196.22	114,196.22	103,417.59	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Replace Bldg. Siding			576,102.32	500,782.32	500,782.32	495,709.61	
	Replace Storm Doors			45,000.00	45,000.00	45,000.00	42,279.11	
	Replace Electric Service			85,165.00	62,362.02	62,362.02	62,362.02	
	Total for Dwelling Structures			706,267.32	608,144.34	608,144.34	600,350.74	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Rehab Storage Sheds			50,000.00	50,000.00	50,000.00	50,000.00	
	Total for Nondwelling Structures			50,000.00	50,000.00	50,000.00	50,000.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00	

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: _____ CFFP (Yes/No): Yes Replacement Housing Factor Grant No.: _____				Federal FY of Grant:	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AMP 12	<b>Site Improvement</b>	<b>1450</b>						
George E. Bragg Towers	Building Seal			647,750.00	641,963.00	641,963.00	467,638.54	
	Total for Site Improvement			647,750.00	641,963.00	641,963.00	467,638.54	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Install Sprinkler System			624,442.00	653,031.98	653,031.98	653,031.98	
	Install Emergency Lighting			0.00	0.00	0.00	0.00	
	Hallway Upgrades			59,700.00	59,700.00	59,700.00	59,700.00	
	Total for Nondwelling Structures			684,142.00	712,731.98	712,731.98	712,731.98	

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

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund program Replacment Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

<b>Part II: Supporting Pages</b>								
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: _____ CFFP (Yes/No): Yes Replacement Housing Factor Grant No.: _____				Federal FY of Grant:	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AMP T2	<b>Site Improvement</b>	<b>1450</b>						
Edward Flannery Apartments								
	Total for Site Improvement			0.00	0.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Upgrade Fire Pump			33,233.00	33,233.00	33,233.00	33,233.00	
	Install Emergency Lighting			0.00	0.00	0.00	0.00	
	Total for Nondwelling Equipment			33,233.00	33,233.00	33,233.00	33,233.00	

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

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name:  Elmira Housing Authority				Federal FFY of Grant:	
Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 11					
Hoffman Pl.	1/31/2009		1/31/2010		
AMP 12					
Bragg Towers	1/31/2009		1/31/2010		
AMP 12					
Flannery Apts.	1/31/2009		1/31/2010		

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

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

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

<b>Part I: Summary</b>													
<b>PHA Name:</b>  Elmira Housing Authority	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>Grant Type and Number:</b></td> <td style="text-align: right;"><b>FFY of Grant:</b></td> </tr> <tr> <td>Capital Fund Program Grant No.:</td> <td style="text-align: center;">NY06S03050109</td> <td style="text-align: center;">2009</td> </tr> <tr> <td>Date of CFFP:</td> <td style="text-align: center;">_____</td> <td style="text-align: right;"><b>FFY of Grant Approval:</b></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">_____</td> </tr> </table>	<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>	Capital Fund Program Grant No.:	NY06S03050109	2009	Date of CFFP:	_____	<b>FFY of Grant Approval:</b>			_____
<b>Grant Type and Number:</b>		<b>FFY of Grant:</b>											
Capital Fund Program Grant No.:	NY06S03050109	2009											
Date of CFFP:	_____	<b>FFY of Grant Approval:</b>											
		_____											

<b>Type of Grant</b>	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies
<input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009	<input type="checkbox"/> Revised Annual statement (revision no: _____)
	<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0.00	0.00	0.00	0.00
3	1408 Management Improvements	60,000.00	60,000.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	3,500.00	3,500.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	56,500.00	56,500.00	28,043.00	0.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	10,000.00	10,000.00	0.00	0.00
10	1460 Dwelling Structures	20,000.00	20,000.00	0.00	0.00
11	1465.1 Dwelling Equipment - Nonexpendable	50,000.00	50,000.00	0.00	0.00
12	1470 Non-dwelling Structures	0.00	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	640,000.00	640,000.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	23,224.00	23,224.00	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	863,224.00	863,224.00	28,043.00	0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	60,000.00	60,000.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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

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


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

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



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

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

<b>Part I: Summary</b>					
PHA Name:  Elmira Housing Authority	<b>Grant Type and Number:</b> Capital Fund Program Grant No.: NY06S03050109      Replacement Housing Factor Grant No: Date of CFFP: _____				
<b>FFY of Grant:</b> 2009  <b>FFY of Grant Approval:</b> _____					
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input checked="" type="checkbox"/> Performance and Evaluation report for Program Year Ending 6/30/2009 <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	<b>Total Actual Cost</b>		
		Original	Revised <sup>2</sup>	Obligated	Expended
Signature of Executive Director 		Date 10/15/2009	Signature of Public Housing Director		Date

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

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

<b>Part II: Supporting Pages</b>									
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06S03050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant: 2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
	<b>Operations</b>	<b>1406</b>							
	Total for Operations			0.00	0.00	0.00	0.00		
	<b>Management Improvements</b>	<b>1408</b>							
A11	Security Cameras			60,000.00	60,000.00	0.00	0.00		
	Total for Management Improvements			60,000.00	60,000.00	0.00	0.00		
	<b>Administration</b>	<b>1410</b>							
A11	Printing & Advertising	1410.12		350.00	350.00	0.00	0.00		
A12	Printing & Advertising	1410.12		3,150.00	3,150.00	0.00	0.00		
	Total for Administration			3,500.00	3,500.00	0.00	0.00		
	<b>Fees &amp; Costs</b>								
A11	Architectural & Engineering Fees	<b>1430</b>		5,650.00	5,650.00	5,650.00	0.00		
A12	Architectural & Engineering Fees			50,850.00	50,850.00	22,393.00	0.00		
	Total for Fees & Costs			56,500.00	56,500.00	28,043.00	0.00		
	<b>Collateralization or Debt Service</b>	<b>1501</b>							
	Total for Collateralization or Debt Service			0.00	0.00	0.00	0.00		
	<b>Contingency</b>	<b>1502</b>							
A11	Contingency			2,822.40	2,822.40	0.00	0.00		
A12	Contingency			20,401.60	20,401.60	0.00	0.00		
	Total for Contingency			23,224.00	23,224.00	0.00	0.00		

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

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06S03050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant:  2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP 11</b>	<b>Site Improvement</b>	<b>1450</b>						
Hoffman Plaza	Site Lighting			10,000.00	10,000.00	0.00	0.00	
	Total for Site Improvement			10,000.00	10,000.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00	

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

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

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

<b>Part II: Supporting Pages</b>								
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06S03050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____					Federal FY of Grant:  2009
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AMP 12	<b>Site Improvement</b>	<b>1450</b>						
George E. Bragg Towers								
	Total for Site Improvement			0.00	0.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	"K" apts. kitchen upgrades			20,000.00	20,000.00	0.00	0.00	
	Total for Dwelling Structures			20,000.00	20,000.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Bathroom exhausts			50,000.00	50,000.00	0.00	0.00	
	Total for Dwelling Equipment - Nonexp.			50,000.00	50,000.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	

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

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund program Replacment Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

<b>Part II: Supporting Pages</b>								
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06S03050109</u> CFFP (Yes/No): No Replacement Housing Factor Grant No.: _____				Federal FY of Grant: 2009	
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
AMP T2	<b>Site Improvement</b>	<b>1450</b>						
Edward Flannery Apartments								
	Total for Site Improvement			0.00	0.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Trashroom equipment			40,000.00	40,000.00	0.00	0.00	
	Install sprinkler system			600,000.00	600,000.00	0.00	0.00	
	Total for Nondwelling Equipment			640,000.00	640,000.00	0.00	0.00	

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

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: NY06S03050109				Federal FFY of Grant: 2009	
Elmira Housing Authority					
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 11					
Hoffman Pl.	3/17/2010		3/17/2012		
AMP 12					
Bragg Towers	3/17/2010		3/17/2012		
AMP 12					
Flannery Apts.	3/17/2010		3/17/2012		

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b>  Elmira Housing Authority		<b>Grant Type and Number:</b> Capital Fund Program Grant No.: NY06P03050110 Date of CFFP: _____		Original Budget Replacement Housing Factor Grant No: _____	
				<b>FFY of Grant:</b> 2010	
				<b>FFY of Grant Approval:</b> _____	
<b>Type of Grant</b>					
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____)					
<input type="checkbox"/> Performance and Evaluation report for Program Year Ending _____ <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	68,195.00	68,195.00	0.00	0.00
3	1408 Management Improvements	66,500.00	66,500.00	0.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	25,000.00	25,000.00	0.00	0.00
5	1411 Audit	0.00	0.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	0.00	0.00	0.00	0.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	80,000.00	80,000.00	0.00	0.00
10	1460 Dwelling Structures	194,327.00	194,327.00	0.00	0.00
11	1465.1 Dwelling Equipment - Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	0.00	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	40,000.00	40,000.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities <sup>4</sup>	0.00	0.00	0.00	0.00
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	180,872.63	180,872.63	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	27,063.37	27,063.37	0.00	0.00
20	Amount of Annual Grant (sum of lines 2 - 19)	681,958.00	681,958.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	62,500.00	62,500.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	35,000.00	35,000.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00

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

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

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

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

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

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

<b>Part I: Summary</b>				
PHA Name: Elmira Housing Authority		Grant Type and Number: Capital Fund Program Grant No.: NY06P03050110 Date of CFFP: _____		Original Budget Replacement Housing Factor Grant No: FFY of Grant: 2010 FFY of Grant Approval: _____
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual statement (revision no: _____ ) <input type="checkbox"/> Performance and Evaluation report for Program Year Ending _____ <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>	Obligated      Expended
Signature of Executive Director <i>Jose M. Juan</i>		Date 10/15/2009	Signature of Public Housing Director Date	



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

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

<b>Part II: Supporting Pages</b>									
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: NY06P03050110 Replacement Housing Factor Grant No.:				Original Budget CFPP (Yes/No): No		Federal FY of Grant: 2010
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
<b>Operations</b>		<b>1406</b>							
A11	Operations			20,458.50	20,526.70	0.00	0.00		
A12	Operations			47,736.50	47,668.30	0.00	0.00		
Total for Operations				68,195.00	68,195.00	0.00	0.00		
<b>Management Improvements</b>		<b>1408</b>							
A11	Drug Enforcement Personnel			16,555.00	16,555.00	0.00	0.00		
A12	Drug Enforcement Personnel			38,445.00	38,445.00	0.00	0.00		
A11	Staff Training			602.00	602.00	0.00	0.00		
A12	Staff Training			1,398.00	1,398.00	0.00	0.00		
A11	Security Improvements			2,257.50	2,257.50	0.00	0.00		
A12	Security Improvements			5,242.50	5,242.50	0.00	0.00		
A11	Resident Training			602.00	602.00	0.00	0.00		
A12	Resident Training			1,398.00	1,398.00	0.00	0.00		
Total for Management Improvements				66,500.00	66,500.00	0.00	0.00		
<b>Administration</b>		<b>1410</b>							
A11	Modernization Coordinator	1410.1		6,020.00	6,020.00	0.00	0.00		
A12	Modernization Coordinator	1410.1		13,980.00	13,980.00	0.00	0.00		
A11	Printing & Advertising	1410.12		903.00	903.00	0.00	0.00		
A12	Printing & Advertising	1410.12		2,097.00	2,097.00	0.00	0.00		
A11	Admin. Sundry	1410.19		602.00	602.00	0.00	0.00		
A12	Admin. Sundry	1410.19		1,398.00	1,398.00	0.00	0.00		
Total for Administration				25,000.00	25,000.00	0.00	0.00		
<b>Fees &amp; Costs</b>		<b>1430</b>							
A11	Architectural & Engineering Fees			0.00	0.00	0.00	0.00		
A12	Architectural & Engineering Fees			0.00	0.00	0.00	0.00		
Total for Fees & Costs				0.00	0.00	0.00	0.00		
<b>Collateralization or Debt Service</b>		<b>1501</b>		180,872.63	180,872.63	0.00	0.00		
<b>Contingency</b>		<b>1502</b>							
A11	Contingency			8,146.07	8,146.07	0.00	0.00		
A12	Contingency			18,917.30	18,917.30	0.00	0.00		
Total for Contingency				27,063.37	27,063.37	0.00	0.00		

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

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

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

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

<b>Part II: Supporting Pages</b>									
PHA Name: Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: NY06P03050110 Replacement Housing Factor Grant No.: _____				Original Budget CFPP (Yes/No): No		Federal FY of Grant: 2010
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
AMP 11	<b>Site Improvement</b>	<b>1450</b>							
Hoffman Plaza	Paving & Resealing			25,000.00	25,000.00	0.00	0.00		
	Wireless Security System			35,000.00	35,000.00	0.00	0.00		
	Total for Site Improvement			60,000.00	60,000.00	0.00	0.00		
	<b>Dwelling Structures</b>	<b>1460</b>							
	Apt. Modifications			15,000.00	15,000.00	0.00	0.00		
	Total for Dwelling Structures			15,000.00	15,000.00	0.00	0.00		
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>							
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00		
	<b>Nondwelling Structures</b>	<b>1470</b>							
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00		
	<b>Nondwelling Equipment</b>	<b>1475</b>							
	Total for Nondwelling Equipment			0.00	0.00	0.00	0.00		

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

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

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

<b>Part II: Supporting Pages</b>									
PHA Name:  Elmira Housing Authority			Grant Type and Number: Capital Fund Program Grant No.: <u>NY06P03050110</u> Replacement Housing Factor Grant No.: _____				Original Budget CFPP (Yes/No): No		Federal FY of Grant:  2010
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)	
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)		
AMP 12	<b>Site Improvement</b>	<b>1450</b>							
George E. Bragg Towers									
	Total for Site Improvement			0.00	0.00	0.00	0.00		
	<b>Dwelling Structures</b>	<b>1460</b>							
	Hallway Upgrades			50,000.00	50,000.00	0.00	0.00		
	Elevator Upgrades			129,327.00	129,327.00	0.00	0.00		
	Total for Dwelling Structures			179,327.00	179,327.00	0.00	0.00		
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>							
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00		
	<b>Nondwelling Structures</b>	<b>1470</b>							
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00		
	<b>Nondwelling Equipment</b>	<b>1475</b>							
	Water Treatment System			20,000.00	20,000.00	0.00	0.00		
	Total for Nondwelling Structures			20,000.00	20,000.00	0.00	0.00		

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

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

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund program Replacment Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

Part II: Supporting Pages		Grant Type and Number:		Original Budget		Federal FY of Grant:		
PHA Name: Elmira Housing Authority		Capital Fund Program Grant No.: Replacement Housing Factor Grant No.:		NY06P03050110		CFFP (Yes/No): No		2010
Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work (2)
				Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	
<b>AMP T2</b>	<b>Site Improvement</b>	<b>1450</b>						
Edward Flannery Apartments	Hallway Carpeting			20,000.00	20,000.00	0.00	0.00	
	Total for Site Improvement			20,000.00	20,000.00	0.00	0.00	
	<b>Dwelling Structures</b>	<b>1460</b>						
	Total for Dwelling Structures			0.00	0.00	0.00	0.00	
	<b>Dwelling Equipment - Nonexpendable</b>	<b>1465.1</b>						
	Total for Dwelling Equipment - Nonexp.			0.00	0.00	0.00	0.00	
	<b>Nondwelling Structures</b>	<b>1470</b>						
	Total for Nondwelling Structures			0.00	0.00	0.00	0.00	
	<b>Nondwelling Equipment</b>	<b>1475</b>						
	Water Treatment System			20,000.00	20,000.00	0.00	0.00	
	Total for Nondwelling Equipment			20,000.00	20,000.00	0.00	0.00	

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

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: NY06P03050110			Original Budget		Federal FFY of Grant: 2009
Elmira Housing Authority					
Development Number/Name	All Funds Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 11					
Hoffman Pl.	6/12/2012		6/12/2013		
AMP 12					
Bragg Towers	6/12/2012		6/12/2013		
AMP 12					
Flannery Apts.	6/12/2012		6/12/2013		

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

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

Part I: Summary

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 4/30/2011

<b>Part I: Summary</b>						
PHA Name/Number Elmira Housing Authority (NY030)		Locality (City/County & State) Elmira/Chemung & New York		<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b>		<input type="checkbox"/> <b>Revision No:</b>
A.	Development Number and Name	Work Statement for Year 1	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
	AMP11: Hoffman Plaza AMP12: Bragg Towers/Flannery Apts.					
B.	Physical Improvements	Annual Statement				
	Subtotal		306,000.00	325,500.00	266,000.00	326,000.00
C.	Management Improvements		66,500.00	66,500.00	66,500.00	66,500.00
D.	PHA-Wide Non-dwelling Structures and Equipment		0.00	0.00	0.00	0.00
E.	Administration		25,000.00	25,000.00	25,000.00	25,000.00
F.	Other		34,069.89	13,443.99	72,144.12	12,144.12
G.	Operations		68,195.00	68,195.00	68,195.00	68,195.00
H.	Demolition		0.00	0.00	0.00	0.00
I.	Development		0.00	0.00	0.00	0.00
J.	Capital Fund Financing - Debt Service		182,193.11	183,319.01	184,118.88	184,118.88
K.	Total CFP Funds		681,958.00	681,958.00	681,958.00	681,958.00
L.	Total Non-CFP Funds		0.00	0.00	0.00	0.00
M.	Grand Total		681,958.00	681,958.00	681,958.00	681,958.00

Capital Fund Program Five-Year Action Plan

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2</u> FFY <u>2011</u>			Work Statement for Year: <u>3</u> FFY <u>2012</u>		
	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 AMP 11 - Hoffman Plaza				AMP 11 - Hoffman Plaza		
Annual Statement	Site Improvements			Site Improvements		
	Walkway repairs		\$10,000.00	Paving & resealing		\$25,000.00
				Site lighting		\$12,500.00
				Walkway repairs		\$5,000.00
	Total for Site Improvements:		\$10,000.00	Total for Site Improvements:		\$42,500.00
	Dwelling Structures:			Dwelling Structures:		
	Apt. Modifications		\$20,000.00	Apt. Modifications		\$20,000.00
				Repl. Kitchen cabinets		\$8,000.00
				Repl. Closet doors		\$4,000.00
				Repl. BR & Bath doors		\$4,000.00
	Total for Dwelling Structures:		\$20,000.00	Total for Dwelling Structures:		\$36,000.00
	Dwelling Equipment Non-Expendable:			Dwelling Equipment Non-Expendable:		
	Total for Dwelling Equipment:		\$0.00	Total for Dwelling Equipment:		\$0.00
	Non-Dwelling Structures:			Non-Dwelling Structures:		
	Total for Non-Dwelling Structures:		\$0.00	Total for Non-Dwelling Structures:		\$0.00
	Non-Dwelling Equipment:			Non-Dwelling Equipment:		
				Replace Gas lines		\$10,000.00
	Total for Non-Dwelling Equipment:		\$0.00	Total for Non-Dwelling Equipment:		\$10,000.00
	Subtotal of Estimated Cost		\$30,000.00	Subtotal of Estimated Cost		\$88,500.00

Capital Fund Program Five-Year Action Plan

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>4</u> FFY <u>2013</u>			Work Statement for Year: <u>5</u> FFY <u>2014</u>		
	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 AMP 11 - Hoffman Plaza				AMP 11 - Hoffman Plaza		
Annual Statement	Site Improvements			Site Improvements		
	Walkway repairs		\$5,000.00	Paving & resealing		\$25,000.00
				Site lighting		\$10,000.00
				Walkway repairs		\$5,000.00
	Total for Site Improvements:		\$5,000.00	Total for Site Improvements:		\$40,000.00
	Dwelling Structures:			Dwelling Structures:		
	Apt. modifications		\$20,000.00	Apt. modifications		\$20,000.00
	Repl. Kitchen cabinets		\$8,000.00	Repl. Kitchen cabinets		\$8,000.00
	Repl. Closet doors		\$4,000.00	Repl. Closet doors		\$4,000.00
	Repl. BR & bath doors		\$4,000.00	Repl. BR & bath doors		\$4,000.00
	Total for Dwelling Structures:		\$36,000.00	Total for Dwelling Structures:		\$36,000.00
	Dwelling Equipment Non-Expendable:			Dwelling Equipment Non-Expendable:		
	Total for Dwelling Equipment:		\$0.00	Total for Dwelling Equipment:		\$0.00
	Non-Dwelling Structures:			Non-Dwelling Structures:		
	Total for Non-Dwelling Structures:		\$0.00	Total for Non-Dwelling Structures:		\$0.00
	Non-Dwelling Equipment:			Non-Dwelling Equipment:		
	Gas line replacement		\$32,000.00	Gas line replacement		\$27,000.00
	Total for Non-Dwelling Equipment:		\$32,000.00	Total for Non-Dwelling Equipment:		\$27,000.00
	Subtotal of Estimated Cost		\$73,000.00	Subtotal of Estimated Cost		\$103,000.00



Capital Fund Program Five-Year Action Plan

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2</u> FFY <u>2011</u>			Work Statement for Year: <u>3</u> FFY <u>2012</u>		
	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	AMP 12 - George E. Bragg Towers			AMP 12 - George E. Bragg Towers		
Annual Statement	Site Improvements			Site Improvements		
	Parking repairs & new		\$6,000.00	Parking repairs & new		\$21,000.00
	Wireless security system		\$70,000.00	Walkway repairs		\$11,000.00
				Wirelss security system		\$80,000.00
	Total for Site Improvements:		\$76,000.00	Total for Site Improvements:		\$112,000.00
	Dwelling Structures:			Dwelling Structures:		
	Roof replacement		\$200,000.00	Upgrades for hallways		\$31,000.00
				Unit painting		\$5,000.00
	Total for Dwelling Structures:		\$200,000.00	Total for Dwelling Structures:		\$36,000.00
	Dwelling Equipment Non-Expendable:			Dwelling Equipment Non-Expendable:		
	Total for Dwelling Equipment:		\$0.00	Total for Dwelling Equipment:		\$0.00
	Non-Dwelling Structures:			Non-Dwelling Structures:		
	Total for Non-Dwelling Structures:		\$0.00	Total for Non-Dwelling Structures:		\$0.00
	Non-Dwelling Equipment:			Non-Dwelling Equipment:		
	Total for Non-Dwelling Equipment:		\$0.00	Total for Non-Dwelling Equipment:		\$0.00
	Subtotal of Estimated Cost		\$276,000.00	Subtotal of Estimated Cost		\$148,000.00

Capital Fund Program Five-Year Action Plan

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>4</u> FFY <u>2013</u>			Work Statement for Year: <u>5</u> FFY <u>2014</u>		
	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	AMP 12 - George E. Bragg Towers			AMP 12 - George E. Bragg Towers		
Annual Statement	Site Improvements			Site Improvements		
	Parking repairs & new		\$5,000.00	Parking repairs & new		\$10,000.00
	Walkway repairs		\$8,000.00	Walkway repairs		\$8,000.00
	Total for Site Improvements:		\$13,000.00	Total for Site Improvements:		\$18,000.00
	Dwelling Structures:			Dwelling Structures:		
	Upgrades for hallways		\$8,000.00	Upgrades for hallways		\$8,000.00
	Unit painting		\$10,000.00	Unit painting		\$10,000.00
	Total for Dwelling Structures:		\$18,000.00	Total for Dwelling Structures:		\$18,000.00
	Dwelling Equipment Non-Expendable:			Dwelling Equipment Non-Expendable:		
				Bathroom exhausts		\$5,000.00
				Ranges		\$5,000.00
	Total for Dwelling Equipment:		\$0.00	Total for Dwelling Equipment:		\$10,000.00
	Non-Dwelling Structures:			Non-Dwelling Structures:		
	Total for Non-Dwelling Structures:		\$0.00	Total for Non-Dwelling Structures:		\$0.00
	Non-Dwelling Equipment:			Non-Dwelling Equipment:		
	Total for Non-Dwelling Equipment:		\$0.00	Total for Non-Dwelling Equipment:		\$0.00
	Subtotal of Estimated Cost		\$31,000.00	Subtotal of Estimated Cost		\$46,000.00

Capital Fund Program Five-Year Action Plan

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2</u> FFY <u>2011</u>			Work Statement for Year: <u>3</u> FFY <u>2012</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	AMP 12 - Edward Flannery Apartments			AMP 12 - Edward Flannery Apartments		
	Site Improvements			Site Improvements		
	Total for Site Improvements:		\$0.00	Total for Site Improvements:		\$0.00
	Dwelling Structures:			Dwelling Structures:		
				Unit painting		\$12,000.00
				Hallway painting		\$10,000.00
				Elevator upgrades		\$60,000.00
	Total for Dwelling Structures:		\$0.00	Total for Dwelling Structures:		\$82,000.00
	Dwelling Equipment Non-Expendable:			Dwelling Equipment Non-Expendable:		
				Ranges		\$7,000.00
	Total for Dwelling Equipment:		\$0.00	Total for Dwelling Equipment:		\$7,000.00
	Non-Dwelling Structures:			Non-Dwelling Structures:		
	Total for Non-Dwelling Structures:		\$0.00	Total for Non-Dwelling Structures:		\$0.00
	Non-Dwelling Equipment:			Non-Dwelling Equipment:		
	Total for Non-Dwelling Equipment:		\$0.00	Total for Non-Dwelling Equipment:		\$0.00
	Subtotal of Estimated Cost		\$0.00	Subtotal of Estimated Cost		\$89,000.00

Capital Fund Program Five-Year Action Plan

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

<b>Part II: Supporting Pages - Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>4</u> FFY <u>2013</u>			Work Statement for Year: <u>5</u> FFY <u>2014</u>		
	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	AMP 12 - Edward Flannery Apartments			AMP 12 - Edward Flannery Apartments		
Annual Statement	Site Improvements			Site Improvements		
	Parking lot work		\$62,000.00	Parking lot work		\$12,000.00
	Walkway repairs		\$8,000.00	Walkway repairs		\$8,000.00
	Wireless security system		\$70,000.00	Wireless security system		\$70,000.00
	Total for Site Improvements:		\$140,000.00	Total for Site Improvements:		\$90,000.00
	Dwelling Structures:			Dwelling Structures:		
	Unit painting		\$12,000.00	Unit painting		\$12,000.00
	Hallway painting		\$10,000.00	Hallway painting		\$10,000.00
	Total for Dwelling Structures:		\$22,000.00	Total for Dwelling Structures:		\$22,000.00
	Dwelling Equipment Non-Expendable:			Dwelling Equipment Non-Expendable:		
				Ranges		\$5,000.00
	Total for Dwelling Equipment:		\$0.00	Total for Dwelling Equipment:		\$5,000.00
	Non-Dwelling Structures:			Non-Dwelling Structures:		
	Total for Non-Dwelling Structures:		\$0.00	Total for Non-Dwelling Structures:		\$0.00
	Non-Dwelling Equipment:			Non-Dwelling Equipment:		
				Trashroom equipment		\$10,000.00
				Install sprinkler system		\$30,000.00
				Replace windows		\$20,000.00
	Total for Non-Dwelling Equipment:		\$0.00	Total for Non-Dwelling Equipment:		\$60,000.00
	Subtotal of Estimated Cost		\$162,000.00	Subtotal of Estimated Cost		\$177,000.00

Capital Fund Program Five-Year Action Plan

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 4/30/2011

<b>Part III: Supporting Pages - Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>2</u> FFY <u>2011</u>		Work Statement for Year: <u>3</u> FFY <u>2012</u>	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	AMP 11 - Hoffman Plaza		AMP 11 - Hoffman Plaza	
	<b>Operations</b>	\$20,526.69	<b>Operations</b>	\$20,526.69
	<b>Management Improvements</b>		<b>Management Improvements</b>	
	Drug enforcement personnel	\$16,555.00	Drug enforcement personnel	\$16,555.00
	Staff training	\$602.00	Staff training	\$602.00
	Security improvements	\$2,257.50	Security improvements	\$2,257.50
	Resident Training	\$602.00	Resident training for self-sufficiency	\$602.00
	<b>Total for Management Improvements</b>	<b>\$20,016.50</b>	<b>Total for Management Improvements</b>	<b>\$20,016.50</b>
	<b>Administration</b>		<b>Administration</b>	
	Modernization Coordinator	\$6,020.00	Modernization Coordinator	\$6,020.00
	Printing & Advertising	\$903.00	Printing & Advertising	\$903.00
	Admin. Sundry	\$602.00	Admin. Sundry	\$602.00
	<b>Total for Administration</b>	<b>\$7,525.00</b>	<b>Total for Administration</b>	<b>\$7,525.00</b>
	<b>Fees &amp; Costs</b>		<b>Fees &amp; Costs</b>	
	A & E fees	\$9,030.00	A & E fees	\$0.00
	<b>Contingency</b>	<b>\$1,225.04</b>	<b>Contingency</b>	<b>\$4,046.64</b>
	<b>Total for AMP 11</b>	<b>\$58,323.23</b>	<b>Total for AMP 11</b>	<b>\$52,114.83</b>
	AMP 12 - Bragg Towers & Flannery Apts.		AMP 12 - Bragg Towers & Flannery Apts.	
	<b>Operations</b>	\$47,668.31	<b>Operations</b>	\$47,668.31
	<b>Management Improvements</b>		<b>Management Improvements</b>	
	Drug enforcement personnel	\$38,445.00	Drug enforcement personnel	\$38,445.00
	Staff Training	\$1,398.00	Staff training	\$1,398.00
	Security improvements	\$5,242.50	Security improvements	\$5,242.50
	Resident Training	\$1,398.00	Resident training for self-sufficiency	\$1,398.00
	<b>Total for Management Improvements</b>	<b>\$46,483.50</b>	<b>Total for Management Improvements</b>	<b>\$46,483.50</b>
	<b>Administration</b>		<b>Administration</b>	
	Modernization Coordinator	\$13,980.00	Modernization Coordinator	\$13,980.00
	Printing & Advertising	\$2,097.00	Printing & Advertising	\$2,097.00
	Admin. Sundry	\$1,398.00	Admin. Sundry	\$1,398.00
	<b>Total for Administration</b>	<b>\$17,475.00</b>	<b>Total for Administration</b>	<b>\$17,475.00</b>
	<b>Fees &amp; Costs</b>		<b>Fees &amp; Costs</b>	
	A & E fees	\$20,970.00	A & E fees	\$0.00
	<b>Contingency</b>	<b>\$2,844.85</b>	<b>Contingency</b>	<b>\$9,397.35</b>
	<b>Total for AMP 12</b>	<b>\$135,441.66</b>	<b>Total for AMP 12</b>	<b>\$121,024.16</b>
	PHA Wide		PHA Wide	
	<b>Bond Debt Obligation</b>	<b>\$182,193.11</b>	<b>Bond Debt Obligation</b>	<b>\$183,319.01</b>
	Subtotal of Estimated Cost		Subtotal of Estimated Cost	

Capital Fund Program Five-Year Action Plan

U. S. Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 4/30/2011

<b>Part III: Supporting Pages - Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2010	Work Statement for Year <u>4</u> FFY <u>2013</u>		Work Statement for Year: <u>5</u> FFY <u>2014</u>	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	AMP 11 - Hoffman Plaza		AMP 11 - Hoffman Plaza	
	<b>Operations</b>	\$20,526.69	<b>Operations</b>	\$20,526.69
	<b>Management Improvements</b>		<b>Management Improvements</b>	
	Drug enforcement personnel	\$16,555.00	Drug enforcement personnel	\$16,555.00
	Staff training	\$602.00	Staff training	\$602.00
	Security improvements	\$2,257.50	Security improvements	\$2,257.50
	Resident training for self-sufficiency	\$602.00	Resident training for self-sufficiency	\$602.00
	Total for Management Improvements	\$20,016.50	Total for Management Improvements	\$20,016.50
	<b>Administration</b>		<b>Administration</b>	
	Modernization Coordinator	\$6,020.00	Modernization Coordinator	\$6,020.00
	Printing & Advertising	\$903.00	Printing & Advertising	\$903.00
	Admin. Sundry	\$602.00	Admin. Sundry	\$602.00
	Total for Administration	\$7,525.00	Total for Administration	\$7,525.00
	<b>Fees &amp; Costs</b>		<b>Fees &amp; Costs</b>	
	A & E fees	\$9,030.00	A & E fees	\$0.00
	Energy Audit	\$6,020.00		
	Total for Fees & Costs	\$15,050.00	Total for Fees & Costs	\$0.00
	<b>Contingency</b>	\$6,665.38	<b>Contingency</b>	\$3,655.38
	<b>Total for AMP 11</b>	<b>\$63,763.57</b>	<b>Total for AMP 11</b>	<b>\$51,723.57</b>
	AMP 12 - Bragg Towers & Flannery Apts.		AMP 12 - Bragg Towers & Flannery Apts.	
	<b>Operations</b>	\$47,668.31	<b>Operations</b>	\$47,668.31
	<b>Management Improvements</b>		<b>Management Improvements</b>	
	Drug enforcement personnel	\$38,445.00	Drug enforcement personnel	\$38,445.00
	Staff training	\$1,398.00	Staff training	\$1,398.00
	Security improvements	\$5,242.50	Security improvements	\$5,242.50
	Resident training for self-sufficiency	\$1,398.00	Resident training for self-sufficiency	\$1,398.00
	Total for Management Improvements	\$46,483.50	Total for Management Improvements	\$46,483.50
	<b>Administration</b>		<b>Administration</b>	
	Modernization Coordinator	\$13,980.00	Modernization Coordinator	\$13,980.00
	Printing & Advertising	\$2,097.00	Printing & Advertising	\$2,097.00
	Admin. Sundry	\$1,398.00	Admin. Sundry	\$1,398.00
	Total for Administration	\$17,475.00	Total for Administration	\$17,475.00
	<b>Fees &amp; Costs</b>		<b>Fees &amp; Costs</b>	
	A & E fees	\$20,970.00	A & E fees	\$0.00
	Energy Audit	\$13,980.00		
	Total for Fees & Costs	\$34,950.00	Total for Fees & Costs	\$0.00
	<b>Contingency</b>	\$15,478.74	<b>Contingency</b>	\$8,488.74
	<b>Total for AMP 12</b>		<b>Total for AMP 12</b>	<b>\$120,115.55</b>
	PHA Wide		PHA Wide	
	<b>Bond Debt Obligation</b>	\$184,118.88	<b>Bond Debt Obligation</b>	\$184,118.88
	Subtotal of Estimated Cost		Subtotal of Estimated Cost	