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

Small PHA Plan Update Annual Plan for Fiscal Year: October 1, 2002

DEPORT HOUSING AUTHORITY

Deport, Texas

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

| РНА | Name: Deport Housing Authority |
|---------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PHA | Number: TX117v01 |
| PHA | Fiscal Year Beginning: (mm/yyyy) 10/01/02 |
| PHA | Plan Contact Information: |
| Phone: TDD: | Melba G. Ladd 903/652-2744 (if available): dha@neto.com |
| Inform apply) | |
| | Main administrative office of the PHA PHA development management offices |
| Displa | ay Locations For PHA Plans and Supporting Documents |
| The PH | HA Plans (including attachments) are available for public inspection at: (select all that apply) |
| | Main administrative office of the PHA PHA development management offices Main administrative office of the local, county or State government Public library PHA website Other (list below) |
| | lan Supporting Documents are available for inspection at: (select all that apply) |
| | Main business office of the PHA PHA development management offices Other (list below) |
| РНА Р | Programs Administered: |
| Public | Housing and Section 8 Section 8 Only XX Public Housing Only |

Annual PHA Plan Fiscal Year 2002

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

| | Contents | Page # |
|------------|------------------------------------------------------------------------------|--------|
| An | nual Plan | |
| i. | Executive Summary (optional) | 3 |
| ii. | Annual Plan Information | |
| iii. | Table of Contents | |
| 1. | Description of Policy and Program Changes for the Upcoming Fiscal Year | 3 |
| 2. | Capital Improvement Needs | 3 |
| 3. | Demolition and Disposition | N/A |
| 4. | Homeownership: Voucher Homeownership Program | N/A |
| 5. | Crime and Safety: PHDEP Plan | N/A |
| 6. | Other Information: | |
| | A. Resident Advisory Board Consultation Process | 5 |
| | B. Statement of Consistency with Consolidated Plan | 6 |
| | C. Criteria for Substantial Deviations and Significant Amendments | 7 |
| Att | eachments | |
| X | Attachment A: Supporting Documents Available for Review | |
| X | Attachment B: Capital Fund Program Annual Statement | |
| X | Attachment C: Capital Fund Program 5 Year Action Plan | |
| | Attachment: Capital Fund Program Replacement Housing Factor Annual Statement | |
| | Attachment: Public Housing Drug Elimination Program (PHDEP) Plan | |
| X | Attachment D: Resident Membership on PHA Board or Governing Body | |
| X | Attachment E: Membership of Resident Advisory Board or Boards | |
| X | Attachment F: Comments of Resident Advisory Board or Boards & Explanation of | |
| | PHA Response (must be attached if not included in PHA Plan text) | |
| X | Other (List below, providing each attachment name) | |
| 3 7 | | |
| X | Attachment G: Component 3, (6) Deconcentration and Income Mixing | |
| X | Attachment H: Voluntary Conversion Initial Assessments | |
| | | |
| X | Attachment I: Five Year Progress Report Update on Goals | |
| X | Attachment J: Performance and Evaluation Report | |

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

Optional

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

In the process of amending the One Strike Policy to meet with QHWRA. Passbook Interest Rate for Imputed Income From Assets will be as follows: 2 percent as the rate to be used to impute income from assets in excess of \$5,000.

Procurement Policy increased construction bids to meet with the current standards \$25,000.00

In the process of establishing Flat Rents.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

- A. <u>X</u> Yes: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$82,076.00_
- C. \underline{X} Yes: Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.
- D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment B

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment C

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. X No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year?

(If "No", skip to next component ; if "yes", complete one activity description for each development.)

2. Activity Description

| (Not including Activities Associated with HOPE VI or Conversion Activities) | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| 1a. Development name: | |
| 1b. Development (project) number: | |
| 2. Activity type: Demolition | |
| Disposition | |
| 3. Application status (select one) | |
| Approved | |
| Submitted, pending approval | |
| Planned application | |
| 4. Date application approved, submitted, or planned for submission: (DD/MM/YY) | |
| 5. Number of units affected: | |
| 6. Coverage of action (select one) | |
| Part of the development | |
| Total development | |
| 7. Relocation resources (select all that apply) | |
| Section 8 for units | |
| Public housing for units | |
| Preference for admission to other public housing or section 8 | |
| Other housing for units (describe below) | |
| 8. Timeline for activity: | |
| a. Actual or projected start date of activity: | |
| b. Actual or projected start date of relocation activities: | |
| c. Projected end date of activity: | |
| 4. Voucher Homeownership Program [24 CFR Part 903.7 9 (k)] | |
| A. X No: Does the PHA plan to administer a Section 8 Homeownership program purs of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", sk component; if "yes", describe each program using the table below (copy an questions for each program identified.) | tip to next |
| B. Capacity of the PHA to Administer a Section 8 Homeownership Program | |
| The PHA has demonstrated its capacity to administer the program by (select all that apply): | |
| Establishing a minimum homeowner downpayment requirement of at least 3 perc that at least 1 percent of the downpayment comes from the family's resources | eent and requiring |

| Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below): |
| 5. Safety and Crime Prevention: PHDEP Plan 24 CFR Part 903.7 (m)] |
| Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan neeting specified requirements prior to receipt of PHDEP funds. |
| A. X No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? |
| B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ |
| C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component. |
| D. Yes No: The PHDEP Plan is attached at Attachment |
| 6. Other Information 24 CFR Part 903.7 9 (r)] |
| A. Resident Advisory Board (RAB) Recommendations and PHA Response |
| . Yes Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? |
| 2. If yes, the comments are Attached as Attachment (File name) e |
| 3. In what manner did the PHA address those comments? (select all that apply) |
| x The PHA changed portions of the PHA Plan in response to comments A list of these changes is included |
| Yes No: below or |
| Yes at the end of the RAB Comments in Attachment F |
| Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment |
| Other: (list below) |

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

State of Texas

- 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)

Other: (list below)

- 3. PHA Requests for support from the Consolidated Plan Agency
 - X No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
- 4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
 - A. Promote adequate and affordable housing
 - B. Promote economic opportunity
 - C. Promote a suitable living environment without discrimination.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

Substantial Deviation from the 5-year Plan:

Any change to Mission statement such as:

50% deletion from or addition to the goals and objectives as a whole

50% or more decrease in the quantifiable measurement of any individual goal or objective.

Deport Housing Authority has not made any changes to the 5-year plan

B. Significant Amendment or Modification to the Annual Plan:

50% variance in the funds projected in the Capital Fund Program Annual Statement.

Any Increase or decrease over 50% in the funds projected in the Financial Resource statement and/or the Capital Fund Program annual Statement

Any change in a policy or procedure that requires a regulatory 30-day posting

Any submission to HUD that requires a separate notification to residents, such as Hope VI, Public Housing Conversion, Demolition/Disposition, designated Housing or Homeownership programs.

1999 CIAP program was completed on 2/05/00

1999 Desegregation CIAP was completed on 8/27/01

2000 CFP was completed on 3/11/02

2001 CFP program will require a budget revision (see attachment J). Due to the following reasons: an energy audit stated that insulation was needed in the units. This work item has been completed. Work item, install new metal roofs, at project 003 have been moved to the year 2006. Install new water cut offs and replacing hot water heaters in each unit is needed more. These work items were in the plan. All work listed will be completed as stated based on the availability of funds.

Attachment_A_ Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| List of Supporting Documents Available for Review | | | | | | | | | | |
|---------------------------------------------------|--------------------------------------------------------------|-------------------|--|--|--|--|--|--|--|--|
| Applicable & On Display | & Component | | | | | | | | | |
| X | PHA Plan Certifications of Compliance with the PHA Plans and | 5 Year and Annual | | | | | | | | |
| | Related Regulations | Plans | | | | | | | | |
| X | State/Local Government Certification of Consistency with the | 5 Year and Annual | | | | | | | | |
| | Consolidated Plan | Plans | | | | | | | | |

| | List of Supporting Documents Available for Review | | | | | | |
|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--|--|--|--|--|
| Applicable & | Supporting Document | Related Plan Component | | | | | |
| On Display | | • | | | | | |
| X | Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement. | 5 Year and Annual Plans | | | | | |
| X | Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction | Annual Plan: Housing Needs | | | | | |
| X | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources | | | | | |
| X | Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| N/A | Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing A&O Policy | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| N/A | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | |
| N/A | Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O Policy | Annual Plan: Rent Determination | | | | | |
| N/A | Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy | Annual Plan: Rent Determination | | | | | |
| N/A | Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan | Annual Plan: Rent Determination | | | | | |
| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation) | Annual Plan: Operations and Maintenance | | | | | |
| X | Results of latest binding Public Housing Assessment System (PHAS) Assessment | Annual Plan: Management and Operations | | | | | |
| N/A | Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary) | Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency | | | | | |
| N/A | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations | | | | | |

| | List of Supporting Documents Available for Review | | | | | | | |
|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--|--|--|--|--|--|
| Applicable | Supporting Document | Related Plan | | | | | | |
| & | | Component | | | | | | |
| On Display N/A | Any required policies governing any Section 8 special housing | Annual Plan: | | | | | | |
| IN/A | types | Operations and | | | | | | |
| | check here if included in Section 8 Administrative | Maintenance | | | | | | |
| | Plan | | | | | | | |
| X | Public housing grievance procedures | Annual Plan: Grievance | | | | | | |
| | ☑ check here if included in the public housing | Procedures | | | | | | |
| | A & O Policy | | | | | | | |
| N/A | Section 8 informal review and hearing procedures | Annual Plan: | | | | | | |
| | check here if included in Section 8 Administrative | Grievance Procedures | | | | | | |
| | Plan | | | | | | | |
| X | The HUD-approved Capital Fund/Comprehensive Grant Program | Annual Plan: Capital | | | | | | |
| | Annual Statement (HUD 52837) for any active grant year | Needs | | | | | | |
| X | Most recent CIAP Budget/Progress Report (HUD 52825) for any | Annual Plan: Capital | | | | | | |
| | active CIAP grants | Needs | | | | | | |
| N/A | Approved HOPE VI applications or, if more recent, approved or | Annual Plan: Capital | | | | | | |
| | submitted HOPE VI Revitalization Plans, or any other approved | Needs | | | | | | |
| N/A | proposal for development of public housing Self-evaluation, Needs Assessment and Transition Plan required | Annual Plan: Capital | | | | | | |
| IN/A | by regulations implementing §504 of the Rehabilitation Act and | Needs | | | | | | |
| | the Americans with Disabilities Act. See, PIH 99-52 (HA). | riccus | | | | | | |
| N/A | Approved or submitted applications for demolition and/or | Annual Plan: | | | | | | |
| 1,711 | disposition of public housing | Demolition and | | | | | | |
| | | Disposition | | | | | | |
| N/A | Approved or submitted applications for designation of public | Annual Plan: | | | | | | |
| | housing (Designated Housing Plans) | Designation of Public | | | | | | |
| | | Housing | | | | | | |
| N/A | Approved or submitted assessments of reasonable revitalization of | Annual Plan: | | | | | | |
| | public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations | Conversion of Public Housing | | | | | | |
| | Act, Section 22 of the US Housing Act of 1937, or Section 33 of | nousing | | | | | | |
| | the US Housing Act of 1937 | | | | | | | |
| N/A | Approved or submitted public housing homeownership | Annual Plan: | | | | | | |
| | programs/plans | Homeownership | | | | | | |
| N/A | Policies governing any Section 8 Homeownership program | Annual Plan: | | | | | | |
| | (sectionof the Section 8 Administrative Plan) | Homeownership | | | | | | |
| N/A | Cooperation agreement between the PHA and the TANF agency | Annual Plan: | | | | | | |
| | and between the PHA and local employment and training service | Community Service & | | | | | | |
| N/A | agencies FSS Action Plan/s for public housing and/or Section 8 | Self-Sufficiency Annual Plan: | | | | | | |
| 11///1 | 1 55 Action 1 fails for public flousing and/or Section 6 | Community Service & | | | | | | |
| | | Self-Sufficiency | | | | | | |
| X | Section 3 documentation required by 24 CFR Part 135, Subpart E | Annual Plan: | | | | | | |
| | 1 | Community Service & | | | | | | |
| | | Self-Sufficiency | | | | | | |
| N/A | Most recent self-sufficiency (ED/SS, TOP or ROSS or other | Annual Plan: | | | | | | |
| | resident services grant) grant program reports | Community Service & | | | | | | |
| 37/1 | The second secon | Self-Sufficiency | | | | | | |
| N/A | The most recent Public Housing Drug Elimination Program | Annual Plan: Safety | | | | | | |
| | (PHEDEP) semi-annual performance report | and Crime Prevention | | | | | | |

| | List of Supporting Documents Available for Review | | | | | | |
|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--|--|--|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component | | | | | |
| N/A | PHDEP-related documentation: Baseline law enforcement services for public housing developments assisted under the PHDEP plan; Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; Coordination with other law enforcement efforts; Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. | Annual Plan: Safety and Crime Prevention | | | | | |
| X | Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) Check here if included in the public housing A & O Policy | Pet Policy | | | | | |
| X | The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings | Annual Plan: Annual Audit | | | | | |
| | Troubled PHAs: MOA/Recovery Plan Other supporting documents (optional) (list individually; use as many lines as necessary) | Troubled PHAs (specify as needed) | | | | | |

| ATT | ATTACHMENT B Annual Statement/Performance and Evaluation Report | | | | | | | |
|-------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------|-------------------------|-----------------|--|--|--|
| Cap | ital Fund Program and Capital Fund P | rogram Replacement | Housing Factor | (CFP/CFPRHF) Page 1 | art 1: Summary | | | |
| _ | ame: Deport Housing Authority | Grant Type and Number TX211 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor | Federal FY of Grant: 2002 | | | | | |
| | ginal Annual Statement formance and Evaluation Report for Period Ending: | ☐Reserve for Disas ☐Final Performance and | _ | evised Annual Statement | (revision no:) | | | |
| Line No. | Summary by Development Account | Total Estimat | | Total | Actual Cost | | | |
| 110. | | Original | Revised | Obligated | Expended | | | |
| 1 | Total non-CFP Funds | - 8 | | | A | | | |
| 2 | 1406 Operations | | | | | | | |
| 3 | 1408 Management Improvements | 3,000.00 | | | | | | |
| 4 | 1410 Administration | 2,763.00 | | | | | | |
| 5 | 1411 Audit | | | | | | | |
| 6 | 1415 liquidated Damages | | | | | | | |
| 7 | 1430 Fees and Costs | 12,664.00 | | | | | | |
| 8 | 1440 Site Acquisition | | | | | | | |
| 9 | 1450 Site Improvement | | | | | | | |
| 10 | 1460 Dwelling Structures | 6,750.00 | | | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | | | |
| 12 | 1470 Nondwelling Structures | 56,899.00 | | | | | | |
| 13 | 1475 Nondwelling Equipment | | | | | | | |
| 14 | 1485 Demolition | | | | | | | |
| 15 | 1490 Replacement Reserve | | | | | | | |
| 16 | 1492 Moving to Work Demonstration | | | | | | | |
| 17 | 1495.1 Relocation Costs | | | | | | | |
| 18 | 1498 Mod Used for Development | | | | | | | |
| 19 | 1502 Contingency | | | | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2-19) | 80,327.00 | | | | | | |
| 21 | Amount of line 20 Related to LBP Activities | | | | | | | |
| 22 | Amount of line 20 Related to Section 504 Compliance | | | | | | | |
| 23 | Amount of line 20 Related to Security | | | | | | | |
| 24 | Amount of line 20 Related to Energy Conservation | | | | | | | |
| | Measures | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Deport Housing Authority | | Grant Type and Number Capital Fund Program #: TX21P11750202 Capital Fund Program Replacement Housing Factor #: | | | | Federal FY of Grant: 2002 | | |
|------------------------------------|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|---|-------------------------------|---------|---------------------------|-------------------|------|
| Development Number | General Description of Major Work Categories | cription of Major Work Dev. Acct No. Quantity Total Estimated Cost Total Actual C | | ctual Cost Status of Proposed | | | | |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX117-001 | | | | | | | | |
| 117-001-1 | Make units ready to rent | 1460 | 3 | 2,250.00 | | | | |
| | SUBTOTAL | 1460 | | 2,250.00 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Deport Housing Authority | | Grant Type and Number Capital Fund Program #: TX21P11750202 Capital Fund Program Replacement Housing Factor #: | | | | Federal FY of Grant: 2002 | | |
|------------------------------------|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------|----------|----------|------------|---------------------------|-------------------|-----------------------|
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | | mated Cost | Total Actual Cost | | Status of Proposed |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX117-002 | | | | | | | | |
| 117-002-1 | Make units ready to rent | 1460 | 3 | 2,250.00 | | | | |
| | SUBTOTAL | 1460 | | 2,250.00 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Deport Housing Authority | | Grant Type and Number | | | | Federal FY of Grant: 2002 | | |
|------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------------|----------|----------|------------|---------------------------|-------------------|------|
| | | Capital Fund Program #: TX21P11750202 Capital Fund Program Replacement Housing Factor #: | | | | 2002 | | |
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | | mated Cost | Total Ac | Total Actual Cost | |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX117-003 | | | | | | | | |
| 117-003-1 | Make units ready to rent | 1460 | 3 | 2,250.00 | | | | |
| | SUBTOTAL | 1460 | | 2,250.00 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Depor | rt Housing Authority | Capital Fund Progra Capital Fund Progra | rant Type and Number Capital Fund Program #: TX21P11750202 Capital Fund Program Replacement Housing Factor #: | | | | Grant: 2002 | |
|----------------------------|------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------|--------------------|-------------------|-------------------|--|
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estim | nated Cost | Total Ac | Total Actual Cost | |
| Name/HA-Wide Activities | | | | Revised | Funds Obligated | Funds Expended | Proposed Work | |
| TX117-HA | | | | | | | | |
| 117-HA-1 | Hire a consultant to assist with annual plan | 1408 | | 3,000.00 | | | | |
| 117-HA-2 | Provide funds for non technical help | 1410 | | 2,763.00 | | | | |
| 117-HA-3 | Provide funds for sundry items | 1430 | | 1,800.00 | | | | |
| 117-HA-4 | Hire an architect to develop plans and specifications | 1430 | | 7,438.00 | | | | |
| 117-HA-5 | Hire an on site inspector | 1430 | | 3,426.00 | | | | |
| 117-HA-6 | Community room will need to be rebuilt and correct site drainage | 1470 | | 55,150.00 | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

| | Federal FY of Grant: 2002 | | | nber | Type and Nur | Grant | ing Authority | PHA Name: Deport House |
|---|----------------------------------|------------------------------------------|------------------------------------------------------------------------------------------|----------|---------------------------------|---------|--------------------------------------------|------------------------|
| | | | Capital Fund Program #: TX21P11750202 Capital Fund Program Replacement Housing Factor #: | | | | | |
| ; | Reasons for Revised Target Dates | All Funds Expended (Quarter Ending Date) | | ed | Fund Obligate part Ending Da | | Development Number Name/HA-Wide Activities | |
| | | Actual | Revised | Original | Actual | Revised | Original | |
| | | | | 3/31/05 | | | 3/31/04 | TX117 |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Capital Fund Program Five-Year Action Plan Part I: Summary

| PHA Deport Housing | | | | ☑Original 5-Year Plan ☐Revision No: | |
|--------------------------------------|---------------------|----------------------------------------------|----------------------------------------------|----------------------------------------------|----------------------------------------------|
| Development Number/Name/HA- | Year 1 | Work Statement for Year 2 FFY Grant: 2003 | Work Statement for Year 3 FFY Grant: 2004 | Work Statement for Year 4 FFY Grant: 2005 | Work Statement for Year 5 FFY Grant: 2006 |
| Wide | | PHA FY: 2003 | PHA FY: 2004 | PHA FY: 2005 | PHA FY: 2006 |
| | Annual Statement | | | | |
| TX 117-001 | | 6,350.00 | 24,251.00 | 8,527.00 | 2,250.00 |
| TX 117-002 | | 10,160.00 | 36,062.00 | 13,600.00 | 2,250.00 |
| TX 117-003 | | 12,700.00 | 2,587.00 | 7,000.00 | 53,400.00 |
| TX 117-HA | | 51,117.00 | 17,427.00 | 51,200.00 | 22,427.00 |
| | | | | | |
| | | | | | |
| CFP Funds Listed for 5-year planning | | 80,327.00 | 80,327.00 | 80,327.00 | 80,327.00 |
| Replacement Housing Factor Funds | | | | | |

| Activities for | | Activities for Year: 2 | | | Activities for Year: 3 | | |
|----------------|----------------------------|--------------------------------------------------------------------|-----------------|----------------------------|---------------------------|-------------------|--|
| Year 1 | | FFY Grant: 2003 | FFY Grant: 2004 | | | | |
| | | PHA FY: 2003 | | PHA FY: 2004 | | | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | |
| See | | | | | | | |
| Annual | TX 117-001 | Replace existing kitchen counter tops, sinks and fixtures with new | 6,350.00 | TX 117-001 | Enclose front porch areas | 24,251.00 | |
| Statement | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total CFP | Estimated Cost | \$ 6,350.00 | | | 24,251.00 | |

| Activities for Year 1 | | Activities for Year : 4 FFY Grant: 2005 PHA FY: 2005 | | | Activities for Year: 5 FFY Grant: 2006 PHA FY: 2006 | | |
|--------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--|
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | |
| See | | | | | | | |
| Annual | TX 117-001 | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures, lights, site improvements and etc.) and other accouterments | 6,777.00 | TX117-001 | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures, lights, site improvements and etc.) and other accouterments | 2,250.00 | |
| Statement | | Provide landscaping | 1,750.00 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total CFF | P Estimated Cost | \$ 8,527.00 | | | \$2,250.00 | |

| Activities for Year 1 | | Activities for Year: 2 FFY Grant: 2003 | | | Activities for Year: 3 FFY Grant: 2004 | |
|-----------------------|-------------|--------------------------------------------------------------------|-------------|-------------|----------------------------------------|-----------------------|
| | Development | PHA FY: 2003 Major Work Categories | Estimated | Development | PHA FY: 2004 Major Work Categories | Estimated Cost |
| | Name/Number | | Cost | Name/Number | | |
| See | | | | | | |
| Annual | TX 117-002 | Replace existing kitchen counter tops, sinks and fixtures with new | 10,160.00 | TX 117-002 | Enclose front porch areas | 36.062.00 |
| Statement | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Total CFP F | Estimated Cost | \$10,160.00 | | | 36,062.00 |

| Activities for | | Activities for Year: 4 | Activities for Year: 5 | | | | |
|----------------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|
| Year 1 | | FFY Grant: 2005 | | FFY Grant: 2006 | | | |
| | | PHA FY: 2005 | | | | | |
| | Development | Major Work Categories | Estimated | Development | Major Work Categories | Estimated | |
| | Name/Number | | Cost | Name/Number | | Cost | |
| See | | | | | | | |
| Annual | TX 117-002 | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures, lights, site improvements and etc.) and other accouterments | 10,800.00 | TX 117-002 | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures, lights, site improvements and etc.) and other accouterments | 2,250.00 | |
| Statement | | Provide landscaping | 2,800.00 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total CF | FP Estimated Cost | \$ 13,600.00 | | | \$2,250.00 | |

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

| Activities for Year 1 | | Activities for Year: 2 FFY Grant: 2003 | | | Activities for Year: 3 FFY Grant: 2004 | |
|-----------------------|----------------------------|--------------------------------------------------------------------|-------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 1 car 1 | | PHA FY: 2003 | | | PHA FY: 2004 | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost |
| See | | | | | | |
| Annual | TX 117-003 | Replace existing kitchen counter tops, sinks and fixtures with new | 12,700.00 | TX 117-003 | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures, lights, site improvements and etc.) and other accouterments | 2,587.00 |
| Statement | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Total CF | P Estimated Cost | \$ 12,700.00 | | | \$ 2,587.00 |

| Activities for | | Activities for Year: 4 FFY Grant: 2005 PHA FY: 2005 | | | Activities for Year: 5 FFY Grant: 2006 PHA FY: 2006 | t: 2006 | |
|-------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------|-----------------------------------------------------------|----------------|--|
| Year 1 | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | |
| See | | | | | | | |
| Annual | TX 117-003 | Rehab entire unit (electrical, plumbing, painting, doors, cabinets, bathroom fixtures, lights, site improvements and etc.) and other accouterments | 3,500.00 | TX 117-003 | Replace existing roofs with new metal roofs | 53,400.00 | |
| Statement | | Provide landscaping | 3,500.00 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | - | | | | | | |
| | | | | | | | |
| | Total Cl | FP Estimated Cost | \$ 7,000.00 | | | 53,400.00 | |

| Activities for | | Activities for Year: 2 | | | Activities for Year: 3 | | |
|----------------|----------------------------|----------------------------------------------------------------------|-------------------|----------------------------|-------------------------------------------------------|-------------------|--|
| Year 1 | | FFY Grant: 2003 | | | FFY Grant: 2004 | | |
| | | PHA FY: 2003 | | | PHA FY: 2004 | | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | |
| See | | | | | | | |
| Annual | TX 117-HA | Hire a consultant to assist with annual plan | 3,000.00 | TX 117-HA | Hire a consultant to assist with annual plan | 3,000.00 | |
| Statement | | Provide funds for non technical help | 2,763.00 | | Provide funds for non technical help | 2,763.00 | |
| | | Provide funds for sundry items | 800.00 | | Provide funds for sundry items | 800.00 | |
| | | Hire an architect to develop plans and specifications | 7,438.00 | | Hire an architect to develop plans and specifications | 7,438.00 | |
| | | Hire an on site inspector | 3,426.00 | | Hire an on site inspector | 3,426.00 | |
| | | Complete community building and provide parking for community center | 22,990.00 | | | | |
| | | Replace existing sidewalks throughout the developments with new | 10,700.00 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total CF | P Estimated Cost | 51,117.00 | | | \$17,427.00 | |

| Activities for Year 1 | | Activities for Year: 4 FFY Grant: 2005 PHA FY: 2005 | | Activities for Year: 5 FFY Grant: 2006 PHA FY: 2006 | | | |
|--------------------------|----------------------------|------------------------------------------------------------------|-------------------|-----------------------------------------------------|-------------------------------------------------------|-----------------------|--|
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | |
| See | | | | | | | |
| Annual | TX 117-HA | Hire a consultant to assist with annual plan | 3,000.00 | TX 117-HA | Hire a consultant to assist with annual plan | 3,000.00 | |
| Statement | | Provide funds for non technical help | 2,763.00 | | Provide funds for non technical help | 2,763.00 | |
| | | Provide funds for sundry items | 800.00 | | Provide funds for sundry items | 800.00 | |
| | | Hire an architect to develop plans and specifications | 7,438.00 | | Hire an architect to develop plans and specifications | 7,438.00 | |
| | | Hire an on site inspector | 3,426.00 | | Hire an on site inspector | 3,426.00 | |
| | | Replace/repair existing central air conditioning units as needed | 6,000.00 | | Upgrade computers and software | 5,000.00 | |
| | | Purchase a new riding lawn mower, edger and trimmer | 9,562.00 | | | | |
| | | Replace existing ranges, refrigerators and hot waters with new | 18,211.00 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Total CFP F | Estimated Cost | 51,200.00 | | | \$22,427.00 | |

PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

| Section 1: General Information/History |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. Amount of PHDEP Grant \$ |
| B. Eligibility type (Indicate with an "x") N1 N2 R |
| C. FFY in which funding is requested |
| D. Executive Summary of Annual PHDEP Plan |
| In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected |
| outcomes. The summary must not be more than five (5) sentences long |
| |
| |
| E. Target Areas |
| C . 1. 4. 6.11. 1. 4.11. 1. 1. 4. 4. 1. DUDED T 4. 4. (1. 1 |

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

| PHDEP Target Areas (Name of development(s) or site) | Total # of Units within the PHDEP Target Area(s) | Total Population to be Served within the PHDEP Target Area(s) |
|--------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------|
| | | |
| | | |
| | | |

F. Duration of Program

| | tion (number of mentify the # of mon | onths funds will be required) ths). | of the PHDEP Prog | ram proposed u | nder this Plan (p | place an "x" to i | ndicate the length of p | program by # of months. |
|----------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------|--------------------------------------------------|-----------------------------------|---------------------|------------------------|--------------------------|--------------------------|
| · | 12 Months | 18 Months | 24 Months | | | | | |
| G. PHDEP F | Program Histor | rv | | | | | | |
| Indicate each FY programs have n | that funding has lot been closed out ion of the PHDEP | been received under the PHD at the time of this submission. Plan. The Grant Term End | n, indicate the fund b | alance and antio | cipated completi | on date. The Fu | nd Balances should r | eflect the balance as of |
| Fiscal Year of Funding | PHDEP Funding Received | Grant # | Fund Balance as of Date of this Submission | Grant Extensions or Waivers | Grant Start Date | Grant Term End Date | | |
| FY 1995 | | | | | | | | |
| FY 1996 | | | | | | | | |
| FY 1997 | | | | | | | | |
| FY1998 | | | | | | | | |
| FY 1999 | | | | | | | | |
| | HDEP Plan Go Plan Summary | oals and Budget | | | | | - | |
| | | PHDEP strategy to address t | he needs of the targe | t population/targ | get area(s). You | ır summary shoı | ald briefly identify: th | e broad goals and |
| objectives, the ro | ole of plan partners | s, and your system or process | for monitoring and e | evaluating PHD | EP-funded activ | ities. This sum | mary should not excee | ed 5-10 sentences. |
| B. PHDEP 1 | Budget Summa | ary | | | | | | |
| | | funding allocated to each line | item. | | | | | |
| | | | | | | | | |
| FFY | PHDE | EP Budget Summary | | | | | | |
| Original statem | | <i>Q V</i> | | | | | | |
| Revised stateme | | | | | | | | |

| Budget Line Item | Total Funding |
|-----------------------------------------|---------------|
| 9110 – Reimbursement of Law Enforcement | |
| 9115 - Special Initiative | |
| 9116 - Gun Buyback TA Match | |
| 9120 - Security Personnel | |
| 9130 - Employment of Investigators | |
| 9140 - Voluntary Tenant Patrol | |
| 9150 - Physical Improvements | |
| 9160 - Drug Prevention | |
| 9170 - Drug Intervention | |
| 9180 - Drug Treatment | |
| 9190 - Other Program Costs | |
| | |
| TOTAL PHDEP FUNDING | |

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

| 9110 - Reimbursement of Law Enforcement | | | | | | Total PHDEP Funding: \$ | | | |
|-----------------------------------------|-----------------|----------------------|---------------|-------------------|------------|---------------------------|------------------------|--|--|
| Goal(s) | | | | | | | | | |
| Objectives | | | | | | | | | |
| Proposed Activities | # of Persons | Target Population | Start Date | Expected Complete | PHEDE P | Other Funding (Amount/ | Performance Indicators | | |
| | Served | F | | Date | Funding | Source) | | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |

| 9115 - Special Initiative | Total PHDEP Funding: \$ | | | | |
|---------------------------|-------------------------|--|--|--|--|
| Goal(s) | | | | | |
| Objectives | | | | | |

| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount/ Source) | Performance Indicators |
|---------------------|---------------------------|----------------------|---------------|------------------------------|-------------------|--------------------------------------|------------------------|
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |

| 9116 - Gun Buyback TA Match | | | | | Total PHDEP Funding: \$ | | | |
|-----------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|--|
| Goal(s) | | | | | | | | |
| Objectives | | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |

| 9120 - Security Personnel | | | | | Total PHDEP Funding: \$ | | | |
|---------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|--|
| Goal(s) | | | | | | | | |
| Objectives | | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |

| 9130 – Employment of Investigators | | | | | Total PHDEP Funding: \$ | | | |
|------------------------------------|---------|------------|-------|----------|-------------------------|------------------|------------------------|--|
| Goal(s) | | | | | | | | |
| Objectives | | | | | | | | |
| Proposed Activities | # of | Target | Start | Expected | PHEDEP | Other Funding | Performance Indicators | |
| | Persons | Population | Date | Complete | Funding | (Amount /Source) | | |
| | Served | | | Date | | | | |
| 1. | | | | | | | | |

| II a | | | a . | I | 1 | 1 | I | | |
|-------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------|-----------------------------------|------------------------|--|--|
| 2. | | | 4 | <u> </u> | <u> </u> | | | | |
| 3. | | | <u> </u> | <u> </u> | | | | | |
| | | | | | 71 | | | | |
| 9140 – Voluntary Tenan | | | Total PHDEP | Funding: \$ | | | | | |
| Goal(s) | | | | | | | | | |
| Objectives | | | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | | |
| 1. | | | | | | | | | |
| 2. | | | Ţ | | | | | | |
| 3. | | _ | | | | | | | |
| | | | | | | | | | |
| 9150 - Physical Improve | ments | | | | Total PHDEP | Total PHDEP Funding: \$ | | | |
| Goal(s) | | | | | | | | | |
| Objectives | | | - | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |
| | | | | | | | | | |
| 9160 - Drug Prevention | | | | | Total PH | IDEP Funding: \$ | | | |
| Goal(s) | | , | | | | | | | |
| Objectives | | | - | | | | | | |
| Proposed Activities | # of Persons | Target Population | Start Date | Expected Complete | | | Performance Indicators | | |

Date

Served

| 9170 - Drug Intervention | | | | | Total PHDEP Funding: \$ | | | |
|--------------------------|---------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|--|
| Goal(s) | | | | | | | | |
| Objectives | | | | | | | | |
| Proposed Activities | # of Persons Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | <u>-</u> | | | | | | |

| 9180 - Drug Treatment | | | | | Total PHDEP Funding: \$ | | | |
|-----------------------|-------------------------------|----------------------|---------------|------------------------------|-------------------------|-----------------------------------|------------------------|--|
| Goal(s) | | | | | | | | |
| Objectives | | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |

| 9190 - Other Program Costs | | | | | Total PHDEP Funds: \$ | | | | |
|----------------------------|-------------------------------|----------------------|---------------|------------------------------|-----------------------|-----------------------------------|------------------------|--|--|
| Goal(s) | | | | | | | | | |
| Objectives | | | | | | | | | |
| Proposed Activities | # of Person s Served | Target Population | Start Date | Expected Complete Date | PHEDEP Funding | Other Funding (Amount /Source) | Performance Indicators | | |
| 1. | | | | | | | | | |
| 2. | | | | | | | | | |
| 3. | | | | | | | | | |

Required Attachment $\underline{\mathbf{D}}$: Resident Member on the PHA Governing Board

| 1. | Yes Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2) |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. | Name of resident member(s) on the governing board: |
| | Mauna Kidd |
| В. | How was the resident board member selected: (select one)? |
| | Appointed |
| C. | The term of appointment is (include the date term expires): |
| | 2 year term – May 2002 till May 2004 |
| 2. | A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not? the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board. Other (explain): |
| В. | Date of next term expiration of a governing board member: |
| | May 2004 |
| C. | Name and title of appointing official(s) for governing board (indicate appointing official for the next position): |
| | Mayor of Deport |
| | |

Required Attachment $\underline{\mathbf{E}}$: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

April 10, 2002

The monthly meeting with luncheon was held in Community Room #2 at the C.B. Glover units on Wednesday, April 10, 2002.

Jauvanee Carpenter attended for the Housing Authority and related to tenants the proposed 5-year plan for improvements to the needs of the Housing Authority. Improvements planned will result in improvements to the dwelling units, landscaping along with upgrades to public buildings at both sites.

Those in attendance had no objections to plans as proposed. The one suggestion, not addressed in the Plan was for widening of parking spaces. This condition at Site AB, will be considered through ordinary maintenance.

Residents in attendance were Evelyn Roach, Maud Webb, LaVerta Westbrook, Estelle Chesshire, Frances Franklin, Junanita Primm, Eulene Nicholas, Venice Bryson, Eunice Ervin, Willie Mae Speir, and Ruth Murrell. Guests were Alma Scaff and Hazel Relford. Representing Housing Management was Office Assistant, Jauvanee Carpenter, Tenant Activity Director, Phyllis Gifford and Member of the Housing Board of Commissioners, Ruth Cheatham.

The next meeting will be held on Wednesday May 8, 2002. This will be a special activity luncheon to honor Mothers just before Mothers Day.

Attachment <u>F:</u> EXPLANATION OF PHA RESPONSE TO COMMENTS OF RESIDENT ADVISORY

There were no adverse comments from the Resident's regarding Plan as presented to be submitted for approval.

The one request was to enlarge parking spaces at the G.B. Glover units. Management assured those present the problem would be addressed through regular budget.

ATTACHMENT G: Deconcentration and Income Mixing

| In accordance with the final rule 903(2)(b)(2) exempts "public housing developments operated by a PHA with fewer than 100 public housing units". | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

ATTACHMENT H: VOLUNTARY CONVERSION INITIAL ASSESSMENTS

- A. How many of the PHA's developments are subject to the Required Initial Assessments. 8 units in project 002
- B. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?

Project 001 – 10 units

Project 002 – 8 units

Project 003 – 20 units

C. How many Assessments were conducted for the PHA's covered developments?

One

D. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

NONE

| Development Name | Number of Units |
|------------------|-----------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

E. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments.

Conversion to vouchers at this time would have adverse affect on the availability of affordable housing in our community at this time.

Attachment I: Five Year Progress Report Update on Goals

Our Annual Plan is based on the premise that if we accomplish our goals and objectives we will be working towards the achievement of our mission.

Progress Statement:

On-going, through training, the PHA and board members will have the knowledge as needed for the new laws and regulations to better serve the needs of the residents.

On-going, existing policies and procedures will be reviewed and if warranted, develop written recommendations for policy revisions to the Board and the Resident Advisory Board.

On-going, through the receipt of CFP funds we will continue to modernization as needed to promote a better living environment for our residents.

Deport Housing Authority's Resident Survey Follow-up Plan Addressing problems, in sections on Communications, Safety and Neighborhood Appearance have been addressed in the last years plan.

ATTACHMENT J **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary Grant Type and Number TX21P11750101 **PHA Name: Deport Housing Authority Federal FY of Grant:** 2001 Capital Fund Program: CFP Capital Fund Program Replacement Housing Factor Grant No: **Original Annual Statement** Reserve for Disasters/ Emergencies XRevised Annual Statement (revision no: 1) X Performance and Evaluation Report for Period Ending: 3/31/02 Final Performance and Evaluation Report **Summary by Development Account** Line **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 1408 Management Improvements 1,500.00 3,000.00 3,000.00 3,000.00 1410 Administration 6,563.00 2,460.00 4,432.00 5 1411 Audit 1415 liquidated Damages 1430 Fees and Costs 3,426.00 3,426.00 1.575.00 1440 Site Acquisition 1450 Site Improvement 9,330.00 6,290.00 1460 Dwelling Structures 10 70,587.00 61,880.00 61,888.00 40,648.00 1465.1 Dwelling Equipment—Nonexpendable 1470 Nondwelling Structures 12 1475 Nondwelling Equipment 13 1485 Demolition 14 1490 Replacement Reserve 15 16 1492 Moving to Work Demonstration 1495.1 Relocation Costs 17 18 1498 Mod Used for Development 1502 Contingency 19 Amount of Annual Grant: (sum of lines 2-19) 20 82,076.00 82,076.00 75,213.00 43,648.00 21 Amount of line 20 Related to LBP Activities 22 Amount of line 20 Related to Section 504 Compliance 23 Amount of line 20 Related to Security 24 Amount of line 20 Related to Energy Conservation Measures

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Depoi | t Housing Authority | Grant Type and Nu | mber | Federal FY of Grant: 2001 | | | | |
|----------------------------|---------------------------------------------|---------------------|------------------|-----------------------------|----------|--------------------|-------------------|-----------|
| | | Capital Fund Progra | am #: TX21P1 | 1750101 | | | | |
| | | Capital Fund Progra | | | | | | |
| | | | Housing Factor # | | | | | |
| Development | General Description of Major Work | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of |
| Number | Categories | | | | | | | Proposed |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX117-001 | Replace existing water cut-offs with new | 1450 | 10 | 0.00 | 1,275.00 | 1,275.00 | _ | |
| | Provide funds for landscaping | 1450 | | 0.00 | 3,170.00 | 3,170.00 | 1,750.00 | |
| | SUBTOTAL | 1450 | | | 4,445.00 | 4,445.00 | 1,750.00 | |
| | Provide attic Insulation | 1460 | 10 | 0.00 | 3,720.00 | 3,720.00 | 3,720.00 | |
| | Replace existing window screens with new | 1460 | 10 | 400.00 | 0.00 | | | |
| | Replace existing hot water heaters with new | 1460 | 10 | 0.00 | 3,000.00 | 3,000.00 | | |
| | SUBTOTAL | 1460 | | 400.00 | 6,720.00 | 6,720.00 | 3,720.00 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Depor | rt Housing Authority | Grant Type and Nu Capital Fund Progra Capital Fund Progra Replacement F | am #: TX21P1 | Federal FY of Grant: 2001 | | | | |
|----------------------------|---------------------------------------------|-------------------------------------------------------------------------|--------------|---------------------------|-----------|--------------------|-------------------|-----------------------|
| Development Number | • | | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Proposed |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Work |
| TX117-002 | Replace existing water cut-offs with new | 1450 | 16 | 0.00 | 1,860.00 | 1,860.00 | | |
| | Provide funds for landscaping | 1450 | | 0.00 | 1,275.00 | 1,275.00 | | |
| | SUBTOTAL | 1450 | | | 3,135.00 | 3,135.00 | | |
| | Provide attic Insulation | 1460 | 16 | 0.00 | 5,952.00 | 5,952.00 | 5,952.00 | |
| | Replace existing window screens with new | 1460 | 16 | 640.00 | 0.00 | 0.00 | 0.00 | |
| | Replace existing hot water heaters with new | 1460 | 16 | 0.00 | 4,800.00 | 4,800.00 | 0.00 | |
| | SUBTOTAL | 1460 | | 640.00 | 10,752.00 | 10,752.00 | 5,952.00 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Depor | t Housing Authority | Grant Type and No Capital Fund Prog Capital Fund Prog | ram #: TX21Pî ram | | Federal FY of Grant: 2001 | | | | |
|----------------------------|----------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------------|-------------------------|---------------------------|-------------------|-------------------|-----------------------|--|
| Development Number | General Description of Major Work Categories | Replacement Dev. Acct No. | Housing Factor # Quantity | #: Total Estimated Cost | | Total Actual Cost | | Status of Proposed | |
| Name/HA-Wide Activities | C | | | Original | Original Revised | | Funds Expended | Work | |
| TX117-003 | | | | | | | | | |
| | Provide funds for landscaping | 1450 | | 0.00 | 1,750.00 | 1,750.00 | | | |
| | SUBTOTAL | 1450 | | 0.00 | 1,750.00 | 1,750.00 | | | |
| | Complete Work Item: Provide metal roofs including new fascia with vinyl soffits. | 1460 | 20 | 68,747.00 | 00.00 | 0.00 | | | |
| | Install new fasica with vinyl soffits | 1460 | 20 | 0.00 | 30,976.00 | 30,976.00 | 30,976.00 | | |
| | Replace existing window screens with new | 1460 | 20 | 800.00 | 00.00 | 0.00 | | | |
| | Provide attic Insulation | 1460 | 20 | 0.00 | 7,440.00 | 7,440.00 | | | |
| | Replace existing hot water heaters with new | 1460 | 20 | 0.00 | 6,000.00 | 6,000.00 | | | |
| | SUBTOTAL | 1460 | | 69,547.00 | 44,416.00 | 44,416.00 | 30,976.00 | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

| PHA Name: Depor | t Housing Authority | Grant Type and Nu Capital Fund Progr Capital Fund Progr Replacement I | Federal FY of Grant: 2001 | | | | | |
|----------------------------|----------------------------------------------|--------------------------------------------------------------------------------|---------------------------|----------|------------|--------------------|-------------------|------------------|
| Development Number | General Description of Major Work Categories | Dev. Acct No. | Quantity | | mated Cost | Total Ac | Total Actual Cost | |
| Name/HA-Wide Activities | | | | Original | Revised | Funds Obligated | Funds Expended | Proposed Work |
| TX117-HA | Hire a consultant to assist with annual plan | 1408 | | 1,500.00 | 3,000.00 | 3,000.00 | 3,000.00 | |
| | SUBTOTAL | 1408 | | 1,500.00 | 3,000.00 | 3,000.00 | 3,000.00 | |
| | Provide funds for non technical help | 1410 | | 5,763.00 | 3,632.00 | 3,632.00 | | |
| | Provide funds for sundry items | 1410 | | 800.00 | 800.00 | 800.00 | | |
| | SUBTOTAL | 1410 | | 6,563.00 | 4,432.00 | 4,432.00 | | |
| | Hire an on-site inspector | 1430 | | 3,426.00 | 3,426.00 | 3,426.00 | | |
| | SUBTOTAL | 1430 | | 3,426.00 | 3,426.00 | 3,426.00 | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

| PHA Name: Deport Housing Authority | | | Type and Nui | nber | | Federal FY of Grant: 2001 | |
|------------------------------------|-------------|-----------------|----------------|-------------------|--------------------|---------------------------|----------------------------------|
| | | | m #: TX21P117 | | | | |
| | | Capita | ıl Fund Progra | m Replacement Hou | ising Factor #: | | |
| Development Number | | l Fund Obligate | | | ll Funds Expended | | Reasons for Revised Target Dates |
| Name/HA-Wide | (Qu | art Ending Da | te) | (Q | uarter Ending Date | e) | |
| Activities | | ı | | | | 1 | |
| | Original | Revised | Actual | Original | Revised | Actual | |
| TX117-001 | 9/30/03 | | | 9/30/04 | | | |
| | | | | | | | |
| TX117-002 | 9/30/03 | | | 9/30/04 | | | |
| FFX/4.4.F. 0.0.2 | 0.12.0.10.2 | | | 0.12.0.10.4 | | | |
| TX117-003 | 9/30/03 | | | 9/30/04 | | | |
| TV117 IIA | 9/30/03 | | | 9/30/04 | | | |
| TX117-HA | 9/30/03 | | | 9/30/04 | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |