

PHA 5-Year and Annual Plan

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

OMB No. 2577-0226
Expires 4/30/2011

| | | | | | | |
|-----|---|----------|--------------------------------------|-------------------------------|------------------------------|-----|
| 1.0 | PHA Information PHA Name: Blue Earth County Economic Development Authority PHA Code: MN167 PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): 01-01-2016 | | | | | |
| 2.0 | Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 75 Number of HCV units: 72 | | | | | |
| 3.0 | Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only | | | | | |
| 4.0 | PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) | | | | | |
| | 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: | | | | | |
| 5.0 | 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. | | | | | |
| 5.1 | Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The Blue Earth County EDA will employ open and responsive planning and development to provide housing services for a vibrant, livable and sustainable regional community. | | | | | |
| 5.2 | Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. (Goals and Objectives are listed here for information only) <ol style="list-style-type: none"> 1. Provide safe, decent, and affordable housing to low-income and very low-income people. <ol style="list-style-type: none"> a. Continued successful administration of the Housing Choice Voucher (HCV) and Public Housing Programs. b. Maintain a "High Performance" rating in the Housing Choice Voucher Program and Public Housing Program. c. Continue to improve the public housing units with the administration of the Capital Fund Program. d. Explore options provided by the Rental Assistance Demonstration (RAD) program. e. Administer flat rents in accordance with HUD Notice PIH 2014-12, requiring the flat rent set no less than 80% of FMR. 2. Expand Affordable Housing Opportunities <ol style="list-style-type: none"> a. Apply for additional affordable housing opportunities when possible. 3. Address the needs of the homeless in Blue Earth County <ol style="list-style-type: none"> a. Continued successful administration of the Bridges Program. b. Increase the units of Bridges funding if available. 4. Help move citizens to economic self-sufficiency <ol style="list-style-type: none"> a. Continued successful administration of homeownership educational programs: Home Stretch, First Home and the HCV Homeownership Program. b. Continue to obtain and provide gap financing when available. c. Continue to provide individual homebuyer and credit counseling. d. Continue to administer the Family Self-Sufficiency Program. 5. Assist Program Participants who are Victims of Domestic Abuse <ol style="list-style-type: none"> a. Refer victims to law enforcement as well as to services provided by the Committee Against Domestic Violence (CADA). b. Terminate housing assistance/lease agreements of the perpetrators of domestic violence. <p>Please see #10.0 for a report on progress made in meeting the goals and objectives described in the previous 5-year plan.</p> | | | | | |
| 6.0 | PHA Plan Update <ol style="list-style-type: none"> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: MN Housing has granted funds to offer an enhanced first time homebuyer (First Home) program that will target emerging market families and low-income renters. (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. The public may obtain copies of the PHA Plans at the housing office located at 10 Civic Center Plaza, Mankato MN as well as on the City of Mankato website. | | | | | |
| 7.0 | Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> | | | | | |

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|------|---|
| 8.0 | Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. |
| 8.1 | Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. These reports are attached. |
| 8.2 | Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. These plans are attached. |
| 8.3 | Capital Fund Financing Program (CFFP). <input 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. |
| 9.0 | Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. Please see the recently completed Mankato area Consolidated Plan for a description of area housing needs. |
| 9.1 | Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. |
| 10.0 | Additional Information. Describe the following, as well as any additional information HUD has requested. <ul style="list-style-type: none"> (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. The public housing, voucher, and Bridges Programs are fully leased. Staff continue to improve existing units through the administration of the Capital Fund Program. This year staff submitted grants to re-new the Bridges, Shelter + Care, Family Self-Sufficiency and Home Stretch Programs. A new grant was funded that will allow for the provision of the First Home Program. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" The Blue Earth County EDA has defined a Substantial Deviation as a decision made by the Board of Commissioners to change the PHA's mission statement, goals, or objectives identified in the 5-Year Plan. It is also when goals or objectives are changed that affect the residents or have a significant impact to the PHA's financial situation. A Significant Amendment or Modification is a change in PHA plans or policies that require formal approval by the Board of Commissioners. |
| 11.0 | Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office. <ul style="list-style-type: none"> (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) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) (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. (g) Challenged Elements (h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) |

Capital Fund Program—Five-Year Action Plan

Part I: Summary

| PHA Name/Number Blue Earth County EDA/MN167 | | Locality (City/County & State) Mankato, MN in Blue Earth County | | | <input checked="" type="checkbox"/> Original 5-Year Plan | <input type="checkbox"/> Revision No: 3 |
|---|--|---|------------------------------------|-----------------------------------|--|---|
| A. | Development Number and Name | Work Statement for Year 1 FFY 2016 | Work Statement for Year 2 FFY 2017 | Work Statement for Year 3 FFY2018 | Work Statement for Year 4 FFY 2019 | Work Statement for Year 5 FFY2020 |
| B. | Physical Improvements Subtotal | | 70,000 | 70,000 | 70,000 | 70,000 |
| C. | Management Improvements | | | | | |
| D. | PHA-Wide Non-dwelling Structures and Equipment | | | | | |
| E. | Administration | | | | | |
| F. | Other – Fees and Costs | | | | | |
| G. | Operations | 7,850 | | 7,850 | 7,850 | 7,850 |
| H. | Demolition | | | | | |
| I. | Development | | | | | |
| J. | Capital Fund Financing – Debt Service | | | | | |
| K. | Total CFP Funds | | | | | |
| L. | Total Non-CFP Funds | | | | | |
| M. | Grand Total | 113,000 | 113,000 | 113,000 | 113,000 | 113,000 |

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

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

| Work Statement for Year 1 FFY | Work Statement for Year _____ FFY | | | Work Statement for Year: _____ FFY | | |
|-------------------------------|--|--|--|--|--|--|
| | Development Number/Name | | Estimated Cost | Development Number/Name | | Estimated Cost |
| | General Description of Major Work Categories |
| See Annual Statement | | | | | | |
| See Annual Statement | | | | | | |
| See Annual Statement | | | | | | |
| See Annual Statement | | | | | | |
| See Annual Statement | | | | | | |
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| See Annual Statement | | | | | | |
| See Annual Statement | | | | | | |
| See Annual Statement | | | | | | |
| Subtotal of Estimated Cost | \$ | | | | Subtotal of Estimated Cost | \$ |

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 3/31/2014

| Part I: Summary | | FFY of Grant: 2016 | |
|---|--|----------------------------------|--|
| PHA Name: Blue Earth County EDDA MN167 | Grant Type and Number Capital Fund Program Grant No: MN46P16750116 Replacement Housing Factor Grant No: Date of CFFP: | FFY of Grant Approval: 2016 | FFY of Grant Approval: 2016 |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | | |
| <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | | | |
| Type of Grant Line | Summary by Development Account | Total Estimated Cost Original | Total Actual Cost Obligated Expended |
| 1 | Total non-CFP Funds | | |
| 2 | 1406 Operations (may not exceed 20% of line 2) ¹ | 3,000 | |
| 3 | 1408 Management Improvements | | |
| 4 | 1410 Administration (may not exceed 10% of line 2) ¹ | | |
| 5 | 1411 Audit | | |
| 6 | 1415 Liquidated Damages | | |
| 7 | 1430 Fees and Costs | | |
| 8 | 1440 Site Acquisition | | |
| 9 | 1450 Site Improvement | 35,000 | |
| 10 | 1460 Dwelling Structures | 75,000 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | |
| 12 | 1470 Non-dwelling Structures | | |
| 13 | 1475 Non-dwelling Equipment | | |
| 14 | 1485 Demolition | | |
| 15 | 1492 Moving to Work Demonstration | | |
| 16 | 1495.1 Relocation Costs | | |
| 17 | 1499 Development Activities ⁴ | | |

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

| Part I: Summary | | | | |
|--|--|---|--------------------------------------|--|
| PHA Name: Blue Earth County EDA MN167 | Grant Type and Number Capital Fund Program Grant No: MN46P16750116 Replacement Housing Factor Grant No: Date of CFFP: | <input checked="" type="checkbox"/> FFY of Grant:2016 <input type="checkbox"/> FFY of Grant Approval: 2016 | | |
| Type of Grant | | <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report | | |
| <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | Total Estimated Cost | Revised ² | Obligated |
| Line | Summary by Development Account | Original | Revised ² | Total Actual Cost ¹ Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | 113,000 | | |
| 21 | Amount of line 20 Related to LBP Activities | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | |
| Signature of Executive Director | | Date | Signature of Public Housing Director | |
| | | Date | | |

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 3/31/2014

| Part I: Summary | | <input checked="" type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | | | <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1) <input type="checkbox"/> Final Performance and Evaluation Report | | | |
|-----------------|---|---|----------------------|--|---|----------------------|-----------|--|
| Line | Summary by Development Account | | Total Estimated Cost | | Original | Revised ¹ | Obligated | Total Actual Cost ¹ Expended |
| 1 | Total non-CFP Funds | | | | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 2) ³ | | 3,321 | | | 3,321 | | |
| 3 | 1408 Management Improvements | | | | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 2) | | | | | | | |
| 5 | 1411 Audit | | | | | | | |
| 6 | 1415 Liquidated Damages | | | | | | | |
| 7 | 1430 Fees and Costs | | | | | | | |
| 8 | 1440 Site Acquisition | | | | | | | |
| 9 | 1450 Site Improvement | | 60,000 | | 60,275 | | | |
| 10 | 1460 Dwelling Structures | | 50,000 | | 49,725 | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | | | | |
| 12 | 1470 Non-dwelling Structures | | | | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | | | | |
| 14 | 1485 Demolition | | | | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | | | | |
| 16 | 1495.1 Relocation Costs | | | | | | | |
| 17 | 1499 Development Activities ⁴ | | | | | | | |

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

*Review of P&E
Report as of 7/15*

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

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

| Part I: Summary | | <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Final Performance and Evaluation Report | | |
|---|--|--|--------------------------------------|-----------------------|
| | | <input type="checkbox"/> FFY of Grant:2015 <input type="checkbox"/> FFY of Grant Approval: 2015 | | |
| PHA Name: Blue Earth County EDA MN67 | Grant Type and Number Capital Fund Program Grant No: MN46P16750115 Replacement Housing Factor Grant No: Date of CFFP: | | | |
| Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: | <input type="checkbox"/> Reserve for Disasters/Emergencies | | | |
| Line | Summary by Development Account | Total Estimated Cost | Total Actual Cost ¹ | |
| | | Original | Revised ² | Obligated Expended |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct Payment | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 + 19) | 113,321 | 113,321 | |
| 21 | Amount of line 20 Related to LBP Activities | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | |
| 25 | Amount of line 20 Related to Energy Conservation Measures | | | |
| Signature of Executive Director <i>Karen W Meyer</i> | | Date 8/4/15 | Signature of Public Housing Director | |
| Date | | | | |

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

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

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

| Part II: Supporting Pages | | | | | Federal FFY of Grant: 2015 | |
|---|--|---|-----------|----------------------|------------------------------|-----------------------------|
| Development Number Name/PHA-Wide Activities | General Description of Major Work Categories | Grant Type and Number Capital Fund Program Grant No: MN46P16750115 CFFP (Yes/No): Replacement Housing Factor Grant No: | Quantity | Total Estimated Cost | Total Actual Cost | Status of Work |
| | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² |
| MN167000001 | Operations | 1406 | 3,321 | 3,321 | | |
| MN167000001 | Site Improvement includes landscaping, concrete repairs, driveways and sidewalks | 1450 | Area wide | 60,000 | 60,275 | |
| MN167000001 | Dwelling Structures includes gut rehab of units, kitchens, baths, flooring, paint, electrical, windows and doors | 1460 | 12 | 50,000 | 49,675 | |
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 8/31/2013

| Part I: Summary | | | | | |
|---|--|--|--------------------------------------|---|--------------------------------|
| PHA Name: Blue Earth County EDA | | Grant Type and Number Capital Fund Program Grant No: MN46P16750114 Replacement Housing Factor Grant No: Date of CFFP: | | FFY of Grant: 2014 FFY of Grant Approval: 2014 | |
| Type of Grant | <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 7/31/2014 | <input checked="" type="checkbox"/> Reserve for Disasters/Emergencies Line Summary by Development Account | | <input checked="" type="checkbox"/> Revised Annual Statement (revision no:2) <input type="checkbox"/> Final Performance and Evaluation Report | |
| Line | | Original | Total Estimated Cost ¹ | Obligated | Total Actual Cost ¹ |
| | | Revised ² | Revised ² | Expended | |
| 1 | Total non-CFFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | 7,850 | 8,850 | 3,185 | 3,185 |
| 3 | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | | | | |
| 5 | 1411 Audit | | | | |
| 6 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | 1,000 | 10,199 | 10,199 | 9,999 |
| 8 | 1440 Site Acquisition | | | | |
| 9 | 1450 Site Improvement | 40,000 | 0 | 0 | 0 |
| 10 | 1460 Dwelling Structures | 63,163 | 92,964 | 78,962.19 | 71,387.19 |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities ⁴ | | | | |
| 18a | 1501 Collateralization on Debt Service paid by the PHA | | | | |
| 18ba | 9000 Collateralization on Debt Service paid Via System of Direct Payment | | | | |
| 19 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 - 19) | \$112,013 | \$112,013 | \$92,346.19 | \$ 84,571.197 |
| 21 | Amount of line 20 Related to LBP Activities | | | | |
| 22 | Amount of line 20 Related to Section 504 Activities | | | | |
| 23 | Amount of line 20 Related to Security - Soft Costs | | | | |
| 24 | Amount of line 20 Related to Security - Hard Costs | | | | |
| 25 | Amount of line 26 Related to Energy Conservation Measures | | | | |
| Signature of Executive Director <i>W. W. Ferges</i> | | Date <i>8/14/15</i> | Signature of Public Housing Director | | Date |

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

*Leveenah Key 8-11-15
 Approved by 8-11-15
 at HEP*

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 8/31/2013

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Blue Earth County EDA

| Development Number Name/PHA-Wide Activities | All Fund Obligated (Quarter Ending Date) | All Funds Expended (Quarter Ending Date) | | Reasons for Revised Target Dates ¹ Federal FFY of Grant: 2014 |
|---|---|---|-------------------------------|---|
| | | Original Obligation End Date | Actual Obligation End Date | |
| MN167000001 | 5/13/2016 | | | |
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.