City of Manistee
Housing Commission
273 6th Avenue, Manistee, Michigan 49660
PROVIDING SAFE AFFORDABLE HOUSING

Public Review Copy

Annual Plan
2017

Comments must be received in writing and include:

- **Commenter name and address**
- **Commenter signature**
- **Comments to be submitted**

Comments are to be addressed

CMHC 2017 Annual Plan Comment
Attn: Clinton McKinven-Copus, Executive Director
273 Sixth Ave.
Manistee, MI 49660
OR
clintonmc@manisteehousing.com

Legal Notice
2017 Annual Plan Comment Period

City of Manistee Housing Commission 2017 Annual Plan Comment Period

On August 22, 2016, the City of Manistee Housing Commission shall make available for public review a draft copy of components of its Annual Agency Plan per the guidelines of the 24 CFR 903, a requirement of the Quality Housing and Work Responsibility Act of 1998.

Documents shall be available for review for approximately 45 days at:

- www.manisteemi.gov
- City of Manistee Housing Commission Offices
  Harborview Apartments
  273 6th Ave, Manistee, MI 49660
  Monday—Friday 8:00 AM to 4:00 PM

Comments must be received in writing and include

- Commenter name and address
- Commenter signature
- Comments to be submitted

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CMHC 2017 Annual Plan Comment
Attn: Clinton McKinven-Copus, Executive Director
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Manistee, MI 49660
OR
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The City of Manistee Housing Commission has scheduled a public hearing to he held on October 11, 2016, @ 4:00 PM in the Community Room of Harborview Apartments located at 273 Sixth Ave., Manistee, MI 49660. At this time, the CMHC Commissioners shall receive and consider any and all written comments before finalization of their agency plan for submission to HUD on or before October 18, 2016.

Streamlined Annual PHA Plan *(Small PHAs)*	**U.S. Department of Housing and Urban Development Office of Public and Indian Housing**	**OMB No. 2577-0226 Expires: 02/29/2016**

Purpose. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

Applicability. Form HUD-50075-SM is to be completed annually by **Small PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, HCV-Only PHA, or Qualified PHA do not need to submit this form.

Definitions.

(1) ***High-Performer PHA*** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both of the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments.

(2) ***Small PHA*** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, and that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceeds 550.

(3) ***Housing Choice Voucher (HCV) Only PHA*** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment, and does not own or manage public housing.

(4) ***Standard PHA*** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceeds 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.

(5) ***Troubled PHA*** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.

(6) ***Qualified PHA*** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined, and is not PHAS or SEMAP troubled.

A. PHA Information.

A.1

PHA Name: **Manistee Housing Commission** **PHA Code**: **MI078**
PHA Type: ☒ Small ☐ High Performer
PHA Plan for Fiscal Year Beginning: (MM/YYYY): **01/2017**
PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)
Number of Public Housing (PH) Units 218 Number of Housing Choice Vouchers (HCVs) N/A
Total Combined _____
PHA Plan Submission Type: ☒ Annual Submission ☐Revised Annual Submission

Availability of Information. In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan, but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on their official website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.

☐ **PHA Consortia**: (Check box if submitting a Joint PHA Plan and complete table below)

Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program	
				PH	HCV
Lead PHA:					

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B.	**Annual Plan Elements Submitted with 5-Year PHA Plans.** Required elements for all PHAs completing this document in years in which the 5-Year Plan is also due. This section does not need to be completed for years when a PHA is not submitting its 5-Year Plan. See Section C for required elements in all other years (Years 1-4).
B.1	**Revision of PHA Plan Elements.** (a) Have the following PHA Plan elements been revised by the PHA since its last **Five-Year PHA Plan** submission? Y N ☐ ☐ Statement of Housing Needs and Strategy for Addressing Housing Needs. ☐ ☐ Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions. ☐ ☐ Financial Resources. ☐ ☐ Rent Determination. ☐ ☐ Homeownership Programs. ☐ ☐ Substantial Deviation. ☐ ☐ Significant Amendment/Modification (b) The PHA must submit its Deconcentration Policy for Field Office Review. (c) If the PHA answered yes for any element, describe the revisions for each element below:
B.2	**New Activities.** (a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year? Y N ☐ ☐ Hope VI or Choice Neighborhoods. ☐ ☐ Mixed Finance Modernization or Development. ☐ ☐ Demolition and/or Disposition. ☐ ☐ Conversion of Public Housing to Tenant Based Assistance. ☐ ☐ Conversion of Public Housing to Project-Based Assistance under RAD. ☐ ☐ Project Based Vouchers. ☐ ☐ Units with Approved Vacancies for Modernization. ☐ ☐ Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants). (b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project based units and general locations, and describe how project basing would be consistent with the PHA Plan.
B.3	**Progress Report.** Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year Plan.

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C.	**Annual Plan Elements Submitted All Other Years (Years 1-4).** Required elements for all other fiscal years. This section does not need to be completed in years when a PHA is submitting its 5-Year PHA Plan.
C.1.	**New Activities** (a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year? Y N ☐ ☒ Hope VI or Choice Neighborhoods. ☐ ☒ Mixed Finance Modernization or Development. ☐ ☒ Demolition and/or Disposition. ☐ ☒ Conversion of Public Housing to Tenant-Based Assistance. ☐ ☒ Project Based Vouchers. ☐ ☒ Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants). (b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. (c) If using Project-Based Vouchers, provide the projected number of project-based units, general locations, and describe how project-basing would be consistent with the PHA Plan. (d) The PHA must submit its Deconcentration Policy for Field Office Review.
C.2	**Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan** Form 50077-SM, *Certification of Compliance with PHA Plans and Related Regulations,* including Item 5 must be submitted by the PHA as an electronic attachment to the PHA Plan. Item 5 requires certification on whether plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public.
D	**Other Document or Certification Requirements for Annual Plan Submissions.** Required in all submission years.
D.1	**Civil Rights Certification.** Form 50077-SM-HP, *Certification of Compliance with PHA Plans and Related Regulations,* must be submitted by the PHA as an electronic attachment to the PHA Plan.
D.2	**Resident Advisory Board (RAB) Comments.** (a) Did the RAB(s) provide comments to the PHA Plan? Y N ☒ ☐ If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.
D.3	**Certification by State or Local Officials.** Form HUD 50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan,* must be submitted by the PHA as an electronic attachment to the PHA Plan.
E	**Statement of Capital Improvements**. Required in all years for all PHAs completing this form that administer public housing and receive funding from the Capital Fund Program (CFP).
E.1	**Capital Improvements.** Include a reference here to the most recent HUD-approved 5-Year Action Plan (HUD-50075.2) and the date that it was approved by HUD.

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Instructions for Preparation of Form HUD-50075-SM
Annual Plan for Small and High Performing PHAs

A. PHA Information. All PHAs must complete this section.

A.1 Include the full **PHA Name**, **PHA Code**, **PHA Type**, **PHA Fiscal Year Beginning** (MM/YYYY), **PHA Inventory, Number of Public Housing Units and or Housing Choice Vouchers (HCVs), PHA Plan Submission Type**, and the **Availability of Information**, specific location(s) of all information relevant to the public hearing and proposed PHA Plan. (24 CFR §903.23(4)(e))

PHA Consortia: Check box if submitting a Joint PHA Plan and complete the table. (24 CFR §943.128(a))

B. Annual Plan. PHAs must complete this section during years where the 5-Year Plan is also due. (24 CFR §903.12)

B.1 Revision of PHA Plan Elements. PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the "yes" box. If an element has not been revised, mark "no."

☐ **Statement of Housing Needs and Strategy for Addressing Housing Needs.** Provide a statement addressing the housing needs of low-income, very low-income and extremely low-income families and a brief description of the PHA's strategy for addressing the housing needs of families who reside in the jurisdiction served by the PHA. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income), (ii) elderly families and families with disabilities, and (iii) households of various races and ethnic groups residing in the jurisdiction or on the waiting list based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent it pertains to the housing needs of families that are on the PHA's public housing and Section 8 tenant-based assistance waiting lists. 24 CFR §903.7(a)(1) and 24 CFR §903.12(b). Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent it pertains to the housing needs of families that are on the PHA's public housing and Section 8 tenant-based assistance waiting lists. 24 CFR §903.7(a)(2)(ii) and 24 CFR §903.12(b).

☐ **Deconcentration and Other Policies that Govern Eligibility, Selection and Admissions**. Describe the PHA's admissions policy for deconcentration of poverty and income mixing of lower-income families in public housing. The Deconcentration Policy must describe the PHA's policy for bringing higher income tenants into lower income developments and lower income tenants into higher income developments. The deconcentration requirements apply to general occupancy and family public housing developments. Refer to 24 CFR §903.2(b)(2) for developments not subject to deconcentration of poverty and income mixing requirements. 24 CFR §903.7(b) Describe the PHA's procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists. 24 CFR §903.7(b) A statement of the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV. (24 CFR §903.7(b) Describe the unit assignment policies for public housing. 24 CFR §903.7(b)

☐ **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA operating, capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources. (24 CFR §903.7(c)

☐ **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units, including applicable public housing flat rents, minimum rents, voucher family rent contributions, and payment standard policies. (24 CFR §903.7(d)

☐ **Homeownership Programs**. A description of any homeownership programs (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent that the PHA participates in homeownership programs under section 8(y) of the 1937 Act. (24 CFR §903.7(k) and 24 CFR §903.12(b).

☐ **Substantial Deviation.** PHA must provide its criteria for determining a "substantial deviation" to its 5-Year Plan. (24 CFR §903.7(r)(2)(i)

☐ **Significant Amendment/Modification**. PHA must provide its criteria for determining a "Significant Amendment or Modification" to its 5-Year and Annual Plan. Should the PHA fail to define 'significant amendment/modification', HUD will consider the following to be 'significant amendments or modifications': a) changes to rent or admissions policies or organization of the waiting list; b) additions of non-emergency public housing CFP work items (items not included in the current CFP Annual Statement or CFP 5-Year Action Plan); or c) any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. See guidance on HUD's website at: Notice PIH 1999-51. (24 CFR §903.7(r)(2)(ii)

If any boxes are marked "yes", describe the revision(s) to those element(s) in the space provided.

PHAs must submit a Deconcentration Policy for Field Office review. For additional guidance on what a PHA must do to deconcentrate poverty in its development and comply with fair housing requirements, see 24 CFR 903.2. (24 CFR §903.23(b))

B.2 New Activities. If the PHA intends to undertake any new activities related to these elements or discretionary policies in the current Fiscal Year, mark "yes" for those elements, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake these activities, mark "no."

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☐ **Hope VI or Choice Neighborhoods. 1)** A description of any housing (including project name, number (if known) and unit count) for which the PHA will apply for HOPE VI; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm**.** (Notice PIH 2010-30)

☐ **Mixed Finance Modernization or Development. 1)** A description of any housing (including name, project number (if known) and unit count) for which the PHA will apply for Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Mixed Finance Modernization or Development is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm**.** (Notice PIH 2010-30)

☐ **Demolition and/or Disposition.** Describe any public housing projects owned by the PHA and subject to ACCs (including name, project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm. (24 CFR §903.7(h))

☐ **Conversion of Public Housing.** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA is required to convert or plans to voluntarily convert to tenant-based assistance; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm**.** (24 CFR §903.7(j))

☐ **Project-Based Vouchers.** Describe any plans to use HCVs for new project-based vouchers. (24 CFR §983.57(b)(1)) If using project-based vouchers, provide the projected number of project-based units and general locations, and describe how project-basing would be consistent with the PHA Plan.

☐ **Other Capital Grant Programs** (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).

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B.3 Progress Report. For all Annual Plans following submission of the first Annual Plan, a PHA must include a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year PHA Plan. (24 CFR §903.7(r)(1))

C. Annual Plan. PHAs must complete this section during years where the 5-Year Plan is not due. (24 CFR §903.12)

C.1 New Activities. If the PHA intends to undertake any new activities related to these elements in the current Fiscal Year, mark "yes" for those elements, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake these activities, mark "no."

☐ **Hope VI or Choice Neighborhoods. 1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Choice Neighborhoods; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI or Choice Neighborhoods is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm**.** (Notice PIH 2010-30)

☐ **Mixed Finance Modernization or Development. 1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Mixed Finance Modernization or Development is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm**.** (Notice PIH 2010-30)

☐ **Demolition and/or Disposition.** Describe any public housing projects owned by the PHA and subject to ACCs (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm. (24 CFR §903.7(h))

☐ **Conversion of Public Housing.** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA is required to convert or plans to voluntarily convert to tenant-based assistance; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm**.** (24 CFR §903.7(j))

☐ **Conversion of Public Housing.** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA plans to voluntarily convert to project-based assistance under RAD. See additional guidance on HUD's website at: Notice PIH 2012-32

☐ **Project-Based Vouchers.** Describe any plans to use HCVs for new project-based vouchers. (24 CFR §983.57(b)(1)) If using project-based vouchers, provide the projected number of project-based units and general locations, and describe how project-basing would be consistent with the PHA Plan.

☐ **Units with Approved Vacancies for Modernization.** The PHA must include a statement related to units with approved vacancies that are undergoing modernization in accordance with 24 CFR §990.145(a)(1).

☐ **Other Capital Grant Programs** (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).

C.2 Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan. Provide a certification that the following plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public. This requirement is satisfied by completing form HUD-50077 SM-HP.

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D. **Annual Plan.** PHAs must complete this section in all years.

D.1 **Civil Rights Certification.** Form HUD-50077 SM-HP, *PHA Certifications of Compliance with the PHA Plans and Related Regulation*, must be submitted by the PHA as an electronic attachment to the PHA Plan. This includes all certifications relating to Civil Rights and related regulations. A PHA will be considered in compliance with the AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction. (24 CFR §903.7(o))

D.2 **Resident Advisory Board (RAB) comments**. If the RAB provided comments to the annual plan, mark "yes," submit the comments as an attachment to the Plan and describe the analysis of the comments and the PHA's decision made on these recommendations. (24 CFR §903.13(c), 24 CFR §903.19)

D.3 **Certification by State or Local Officials.** Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, must be submitted by the PHA as an electronic attachment to the PHA Plan. (24 CFR §903.15)

E. **Statement of Capital Improvements**. PHAs that receive funding from the Capital Fund Program (CFP) must complete this section. (24 CFR 903.7 (g))

E.1 **Capital Improvements.** In order to comply with this requirement, the PHA must reference the most recent HUD approved Capital Fund 5 Year Action Plan. PHAs can reference the form by including the following language in Section C. 8.0 of the PHA Plan Template: "See HUD Form 50075.2 approved by HUD on XX/XX/XXXX."

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the 5-Year and Annual PHA Plan. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families.

Public reporting burden for this information collection is estimated to average 16.64 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

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Certification of Compliance with PHA Plans and Related Regulations ***(Small PHAs)***	**U.S. Department of Housing and Urban Development** Office of Public and Indian Housing **OMB No. 2577-0226** **Expires 02/29/2016**

PHA Certifications of Compliance with the PHA Plans and Related Regulations including Civil Rights and PHA Plan Elements that Have Changed

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the___ 5-Year and/or_**X**_ Annual PHA Plan for the PHA fiscal year beginning **01/01/2017**, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA certifies that the following policies, programs, and plan components have been revised since submission of its last Annual PHA Plan (check all policies, programs, and components that have been changed):

___ 903.7a Housing Needs
_**X**_ 903.7b Deconcentration and Other Policies Governing Eligibility, Selection, Occupancy, and Admissions Policies
___ 903.7c Financial Resources
___ 903.7d Rent Determination Policies
___ 903.7h Demolition and Disposition
___ 903.7k Homeownership Programs
___ 903.7r Additional Information
- ___A. Progress in meeting 5-year mission and goals
- ___B. Criteria for substantial deviation and significant amendments
- ___C. Other information requested by HUD
  - ___1. Resident Advisory Board consultation process
  - ___2. Membership of Resident Advisory Board
  - ___3. Resident membership on PHA governing board

The PHA provides assurance as part of this certification that:
(i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
(ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
(iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.

5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identifying any impediments to fair housing choice within those programs, addressing those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and by maintaining records reflecting these analyses and actions.
8. For a PHA Plan that includes a policy for site based waiting lists:
   - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2010-25);

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- The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
- Adoption of site-based waiting lists would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
- The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
- The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).

9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act**,** the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA certifies that it is in compliance with applicable Federal statutory and regulatory requirements, including the Declaration of Trust(s).

Manistee Housing Commission	**MI078**
PHA Name	PHA Number/HA Code
_____ 5-Year PHA Plan for Fiscal Years 20____ - 20____	Annual PHA Plan for Fiscal Year 20**17**

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

Name of Authorized Official Dale Priester	Title President, Board of Commissioners
Signature	Date

DRAFT - Pre-submission

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 06/30/2017

Part I: Summary

PHA Name: Manistee Housing Commission - MI078	**Grant Type and Number** Capital Fund Program Grant No: MI28P078501-17 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2017** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	$ 42,399.00			
3	1408 Management Improvements	$ 25,439.76			
4	1410 Administration (may not exceed 10% of line 21)	$ 21,199.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$ 15,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	$107,960.24			
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.

DRAFT: Pre-submission

form **HUD-50075.1** (07/2014)

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 06/30/2017

Part I: Summary

PHA Name: Manistee Housing Commission - MI078	**Grant Type and Number** Capital Fund Program Grant No: MI28P078501-17 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2017** **FFY of Grant Approval:**

Type of Grant

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

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by 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)	$211,998.00			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director **Date**	**Signature of Public Housing Director** **Date**

[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.

DRAFT: Pre-submission

form **HUD-50075.1** (07/2014)

Part II: Supporting Pages

PHA Name: Manistee Housing Commission - MI078	**Grant Type and Number** Capital Fund Program Grant No: MI28P078501-17 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2017**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA Wide	Housing Operations	1406	14%	$ 42,399.00				
HA Wide	Management Improvements	1408	12%	$ 25,439.76				
HA Wide	Partial Salary/Beneftis [CFP Staff]	1410	10%	$ 21,199.00				
HA Wide	Professional Services	1430	7.07%	$ 15,000.00				
HA Wide	Unit and Property Modernization	1460	51%	$107,960.24				
GRAND TOTAL				$211,998.00				

[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.

DRAFT: Pre-submission

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Manistee Housing Commission - MI078

Federal FFY of Grant: MI28P078501-17

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/2018		12/31/2021		
MI078 - 1	12/31/2018		12/31/2021		
MI078 - 2	12/31/2018		12/31/2021		

[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.

DRAFT: Pre-submission

Part I: Summary

PHA Name/Number **Manistee Housing Commission – MI078**			Locality (City/County & State) **Manistee/Manistee, Michigan, 49660**		☐**Original 5-Year Plan** ☒**Revision No: 2016 - 1**	
A.	Development Number and Name	Work Statement for Year 1 FFY **2017**	Work Statement for Year 2 FFY **2018**	Work Statement for Year 3 FFY **2019**	Work Statement for Year 4 FFY **2020**	Work Statement for Year 5 FFY **2021**
B.	Physical Improvements Subtotal	Annual Statement	$107,960.24	$107,960.24	$107,960.24	$107,960.24
C.	Management Improvements		$25,439.76	$25,439.76	$25,439.76	$25,439.76
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		$21,199.00	$21,199.00	$21,199.00	$21,199.00
F.	Other		$15,000.00	$15,000.00	$15,000.00	$15,000.00
G.	Operations		$42,399.00	$42,399.00	$42,399.00	$42,399.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		**$211,998.00**	**$211,998.00**	**$211,998.00**	**$211,998.00**
L.	Total Non-CFP Funds					
M.	Grand Total	**$211,998.00**	**$211,998.00**	**$211,998.00**	**$211,998.00**	**$211,998.00**

DRAFT: Pre-submission

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

Work Statement for Year 1 FFY **2017**	Work Statement for Year 2 FFY **2018**			Work Statement for Year: 3 FFY **2019**		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	HA-Wide Unit Modernization		$107,960.24	HA-Wide Unit Modernization		$107,960.24
	Subtotal of Estimated Cost		**$107,960.24** *($211,998.00 total CFP)*	Subtotal of Estimated Cost		**$107,960.24** *($211,998.00 total CFP)*

DRAFT: Pre-submission

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

Work Statement for Year 1 FFY **2017**	Work Statement for Year 4 FFY **2020**			Work Statement for Year: 5 FFY **2021**		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	Unit & Property Modernization		$107,960.24	Unit & Property Modernization		$107,960.24
	Subtotal of Estimated Cost		**$107,960.24** *($211,998.00 total CFP)*	Subtotal of Estimated Cost		**$107,960.24** *($211,998.00 total CFP)*

DRAFT: Pre-submission

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

Work Statement for Year 1 FFY **2017**	Work Statement for Year 2 FFY **2018**		Work Statement for Year: 3 FFY **2019**	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Operations: General Housing Operations	$42,399.00	HA Wide Operations: General Housing Operations	$42,399.00
Annual				
Statement	HA Wide Management Improvements	$25,439.76	HA Wide Management Improvements	$25,439.76
	HA Wide Administrative Costs: Salary/Benefits for CFP Staff	$21,199.00	HA Wide Administrative Costs: Salary/Benefits for CFP Staff	$21,199.00
	HA Wide Fees and Costs: Professional Services/Consulting for HA Projects	$15,000.00	HA Wide Fees and Costs: Professional Services/Consulting for HA Projects	$15,000.00
	Subtotal of Estimated Cost	**$104,037.76** *($211,998.00 total CFP)*	Subtotal of Estimated Cost	**$104,037.76** *($211,998.00 total CFP)*

DRAFT: Pre-submission

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

Work Statement for Year 1 FFY **2017**	Work Statement for Year 4 FFY **2020**		Work Statement for Year: 5 FFY **2021**	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide Operations: General Housing Operations	$42,399.00	HA Wide Operations: General Housing Operations	$42,399.00
Annual				
Statement	HA Wide Management Improvements	$25,439.76	HA Wide Management Improvements	$25,439.76
	HA Wide Administrative Costs: Salary/Benefits for CFP Staff	$21,199.00	HA Wide Administrative Costs: Salary/Benefits for CFP Staff	$21,199.00
	HA Wide Fees and Costs: Professional Services/Consulting for HA Projects	$15,000.00	HA Wide Fees and Costs: Professional Services/Consulting for HA Projects	$15,000.00
	Subtotal of Estimated Cost	**$104,037.76** *($211,998.00 total CFP)*	Subtotal of Estimated Cost	**$104,037.76** *($211,998.00 total CFP)*

DRAFT: Pre-submission

Part I: Summary

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-16 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2016** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**
☒ **Performance and Evaluation Report for Period Ending: 8/12/16** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	$26,431.00	$29,680.00	$29,680.00	$29,680.00
3	1408 Management Improvements	$18,879.00	$21,200.00	$7,109.43	$7,109.43
4	1410 Administration (may not exceed 10% of line 21)	$18,879.00	$21,200.00	$21,200.00	$21,200.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$10,000.00	$15,000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	$99,601.00	$109,918.00	$3,277.79	$3,277.79
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	$15,000.00			
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.

Part I: Summary

PHA Name: Manistee Housing Commission- MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-16 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2016** **FFY of Grant Approval:**

Type of Grant

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

☒ **Performance and Evaluation Report for Period Ending: 8/12/16** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by 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)	$188,790.00	$211,998.00	$61,267.22	$61,267.22
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 8/12/2016**	**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.

Part II: Supporting Pages

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-16 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2016**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA Wide	Housing Operations	1406	14%	$26,431.00	$29,680.00	$29,680.00	$29,680.00	100% Complete
HA Wide	Management Improvements	1408	10%	$18,879.00	$21,200.00	$7,109.43	$7,109.43	34% Completed
HA Wide	Partial Salary/Benefits (CFP Staff)	1410	10%	$18,879.00	$21,200.00	$21,200.00	$21,200.00	100% Complete
HA Wide	Professional Services	1430	5.29%	$10,000.00	$15,000.00	$0.00	$0.00	0% Complete
15HA Wide	Non-dwelling Equipment: Server Replacement	1475	7.94%	$15,000.00		$0.00	$0.00	0% Complete

[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.

Part II: Supporting Pages		
PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-16 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2016**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA Wide	Unit and Property Modernization	1460	53%	$99,601.00				
	Harborview Generator Repair	1460	1 Building	$0.00	$3,277.79	$3,277.79	$3,277.79	100% Complete
	Comp. Mod.-Dwelling Structure Equipment Upgrade [Elevator Mod.] Harborview Building	1460	1 Building	$0.00	$18,189.30	$0.00	$0.00	0% Complete
GRAND TOTAL			100%	$188,790.00	$211,998.00	$61,267.22	$61,267.22	29% Complete

[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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Manistee Housing Commission-MI078					**Federal FFY of Grant: 2016**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/2017		12/31/2020		
MI078-1	12/31/2017		12/31/2020		
MI078-2	12/31/2017		12/31/2020		

[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.

Part I: Summary

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-15 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2015** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:2)**
☒ **Performance and Evaluation Report for Period Ending: 08/12/2016** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	$37,758.00	$23,568.11	$23,568.11	$23,568.11
3	1408 Management Improvements	$20,000.00		$20,000.00	$20,000.00
4	1410 Administration (may not exceed 10% of line 21)	$18,879.00		$18,879.00	$18,879.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$10,000.00		$10,000.00	$00.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	$102,153.00	$116,342.89	$116,342.89	$116,342.89
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.

Part I: Summary

PHA Name: Manistee Housing Commission- MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-15 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2015** **FFY of Grant Approval:**

Type of Grant

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

☒ **Performance and Evaluation Report for Period Ending: 08/12/2016** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by 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)	$188,790.00		$188,790.00	$178,790.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	**Date 08/12/2016**	**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.

Part II: Supporting Pages		
PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-15 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2015**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA Wide	Housing Operations	1406	20%	$37,758.00	$23,568.11	$23,568.11	$23,568.11	100% Complete
HA Wide	Management Improvements	1408	10%	$20,000.00		$14,453.00	$14,453.00	100% Complete
HA Wide	Partial Salary/Benefits (CFP Staff)	1410	10%	$18,879.00		$18,879.00	$18,879.00	100% Complete
HA Wide	Professional Services	1430	4%	$10,000.00		$10,000.00	$00.00	0% Completed

[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.

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-15 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2015**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA Wide	Unit and Property Modernization	1460	54.71%	$102,153.00	$00.00	$00.00	$00.00	0% Completed
MI078-02	Comp. Mod.-Dwelling Structure Equipment Upgrade [Elevator Mod.] Harborview Building	1460	1 Building	$00.00	$87,429.25	$87,429.25	$87,429.25	100% Complete
	Century Terrace Transformer	1460	1 Building	$00.00	$5,893.34	$5,893.34	$5,893.34	100% Complete
	Harborview Generator Repair	1460	1 Building	$00.00	$8,830.41	$8,830.41	$8,830.41	100% Complete
GRAND TOTAL			100%	$188,790.00		$188,790.00	$178,790.00	95% Complete

[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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Manistee Housing Commission-MI078					**Federal FFY of Grant: 2015**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/2016		12/31/2019		
MI078-1	12/31/2016		12/31/2019		
MI078-2	12/31/2016		12/31/2019		

[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.

Part I: Summary

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-14 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2014** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:2)**
☒ **Performance and Evaluation Report for Period Ending: 08/08/2016** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	$34,232.00	$24,820.82	$24,820.82	$24,820.82
3	1408 Management Improvements	$20,000.00	$10,262.02	$10,262.02	$10,262.02
4	1410 Administration (may not exceed 10% of line 21)	$19,018.00		$19,018.00	$19,018.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	$16,750.00	$10,253.47	$10,253.47	$4,745.57
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	$100,182.00	$125,827.69	$125,827.69	$125,827.69
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.

Part I: Summary

PHA Name: Manistee Housing Commission- MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-14 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2014** **FFY of Grant Approval:**

Type of Grant

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

☒ **Performance and Evaluation Report for Period Ending: 08/22/2015** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by 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)	$190,182.00		$190,182.00	$184,674.10
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 08/08/2016**	**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.

Part II: Supporting Pages

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-14 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2014**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA Wide	Housing Operations	1406	18%	$34,232.00	$24,820.82	$24,820.82	$24,820.82	100% Completed
HA Wide	Management Improvements	1408	10%	$20,000.00	$10,262.02	$10,262.02	$10,262.02	100% Completed
HA Wide	Partial Salary/Benefits (CFP Staff)	1410	10%	$19,018.00		$19,018.00	$19,018.00	100% Completed
HA Wide	Professional Services	1430	4%	$16,750.00	$10,253.47	$10,253.47	$4,745.57	46% Completed

[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.

Part II: Supporting Pages

PHA Name: Manistee Housing Commission-MI078	**Grant Type and Number** Capital Fund Program Grant No: MI33P078501-14 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2014**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
MI078-02	Century Terrace Transformer	1460	1 Building	$00.00	$00.00	$00.00	$00.00	0% Completed
	Harborview-HVAC/Split System	1460	1 Building	$8,000.00	$00.00	$00.00	$00.00	0% Completed
	Harborview-Air Handler Mod.	1460	1 Building	$30,182.00	$00.00	$00.00	$00.00	0% Completed
	Comp. Mod.-Dwelling Structure Equipment Upgrade [Elevator Mod.] Harborview Building	1460	1 Building	$19.500.00	$67.886.82	$67.886.82	$67.886.82	100% Completed
	Security Entrance System [Century Terrace & Harborview]	1460	2 Buildings	$40,000.00	$32,295.18	$32,295.18	$32,295.18	100% Completed
GRAND TOTAL			100%	$190,182.00		$190,182.00	$184,674.10	97% Completed

[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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Manistee Housing Commission-MI078					**Federal FFY of Grant: 2014**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	12/31/2015		12/31/2018		
MI078-1	12/31/2015		12/31/2018		
MI078-2	12/31/2015		12/31/2018		

[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.

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan or State Consolidated Plan ***(All PHAs)***	**U. S Department of Housing and Urban Development** Office of Public and Indian Housing OMB No. 2577-0226 **Expires 2/29/2016**

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

I, Tonya Young (*Official's Name*), the Consolidate Plan Coordinator (*Official's Title*)

certify that the 5-Year PHA Plan and/or Annual PHA Plan of the

City of Manistee Housing Commission
PHA Name

is consistent with the Consolidated Plan or State Consolidated Plan and the Analysis of Impediments (AI) to Fair Housing Choice of the

State of Michigan
Local Jurisdiction Name

pursuant to 24 CFR Part 91.

Provide a description of how the PHA Plan is consistent with the Consolidated Plan or State Consolidated Plan and the AI.

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

Name of Authorized Official	Title
Tonya Young	Consolidated Plan Coordinator
Signature: Tonya Young	Date: 8-9-2016

form **HUD-50077-SL** (12/2014)

Attachment B

Request for Certification of Consistency
Local Housing Authorities

Instructions: Complete this form and attach the completed Required Form for Certification of Consistency with the State Consolidated Plan and send to the following address:

Tonya Young
Program—Policy Manager
Community Development Division
Michigan State Housing Development Authority
youngt4@michigan.gov

LHA Name **City of Manistee Housing Commission**

Address **273 Sixth Ave**

Manistee, MI 49660

Contact **Clinton McKinven-Copus**
Phone # **231-723-6201, Ext. 102**
FAX # **231-723-8900**
E-Mail clintonmc@manisteehousing.com

Program Year Start Date **January 1, 2017**

Date of Plan Submission to HUD **October 18, 2016**

CERTIFICATION:

I Clinton McKinven-Copus, Executive Director of the City of Manistee Housing Commission (LHA), have reviewed the State of Michigan Housing and Community Development Consolidated Plan and hereby certify that the Annual and Five-Year plans, as approved for submission to HUD by the LHA Board, is consistent with the State of Michigan's Consolidated Plan as described in the attached Required Form for Certification with the State Consolidated Plan.

Signed/Dated _____ 8-2-16

Attachment: **Required Form for Certification of Consistency with the State Consolidated Plan**

Attachment C

Required Form for Certification of Consistency with the State Consolidated Plan Local Housing Authorities

LHA Name **City of Manistee Housing Commission**

a. Provide a description of the manner in which your LHA's annual and five-year plan is consistent with the State of Michigan's Housing and Community Development Consolidated Plan (ConPlan). Note: See guidance on back page.

The City of Manistee Housing Commission's Annual and Five Year Plan is consistent with the State of Michigan Consolidated Plan in that it provides for the improvement and preservation of existing affordable housing stock and neighborhoods.

Specifically

- CMHC, through a MSHDA grant owns three homes which provide permanent, affordable housing to victims of domestic violence. The program is operated in collaboration with CHOICES of Manistee County, the domestic violence shelter for Manistee County.
- CMHC, in collaboration with Centra Wellness (formerly known as Manistee-Benzie Community Mental Health) provides supportive housing for Centra Wellness consumers.
- CMHC provides 214 public housing units to individuals that are very-low or extremely low-income.
- CMHC works collaboratively with the Manistee County Human Services Collaborative and the Manistee County Continuum of Care.
- CMHC, in collaboration with the City of Manistee Police Department has established a neighborhood watch for our family sites and for our Century Terrace high rise.

b. Does the LHA currently have plans stated in the annual or five-year plan to utilize funding sources covered by the State Consolidated Plan? Note: See guidance on back page.
_____Yes __X__No If yes, please list the programs and proposed use of the funding here:

Guidance to Required Form

a. The State ConPlan addresses housing and community development needs in the State of Michigan, including homeless individuals and persons with AIDS. The plan references strategies developed to address the following goals of the programs that it covers during the next five-year period. These include:

1. Expand the availability and supply of safe, decent, affordable, and accessible rental housing for low and extremely low-income individuals and families;

2. Improve and preserve the existing affordable housing stock and neighborhoods;

3. Increase homeownership opportunities for individuals and families by reducing the costs of homeownership;

4. Make homeless assistance more effective and responsive to local need through local autonomy and movement toward a continuum of care;

5. Develop linkages between housing and service sectors to provide greater housing opportunities for households with special needs; and

6. Establish a suitable living environment and expand economic opportunities for low and moderate-income people through economic and infrastructure development.

In your description, please specify how the strategies identified in the LHA's annual and five year plans address one or more of these six goals.

b. The State ConPlan covers the planning and funding application aspects of four U.S. Department of Housing and Urban Development's formula programs; the Community Development Block Grant (CDBG), the HOME Investment Partnership (HOME), the Emergency Shelter Grant (ESG), and the Housing Opportunities for Persons with AIDS (HOPWA) programs. There are five action plans within the ConPlan, which identify the eligible uses and applicants for these funds. Please identify which, if any, of these five funding sources the LHA intends to utilize and how the funds will be utilized.