

Five-Year Action Plan

Part I: Summary

Comprehensive Grant Program (CGP)

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

OMB Approval No. 2577-0157
(exp. 11/30/2008)

HA Name	Locality (City/County & State)	<input type="checkbox"/> Original <input type="checkbox"/> Revision No. _____
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A. Development Number/Name	Work Stmt. for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____
	See Annual Statement				
B. Physical Improvements Subtotal					
C. Management Improvements					
D. HA-Wide Nondwelling Structures and Equipment					
E. Administration					
F. Other					
G. Operations					
H. Demolition					
I. Replacement Reserve					
J. Mod Used for Development					
K. Total CGP Funds					
L. Total Non-CGP Funds					
M. Grand Total					

Signature of Executive Director	Date	Signature of Public Housing Director	Date
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Five-Year Action Plan
Part I: Summary (Continuation)
 Comprehensive Grant Program (CGP)

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

A. Development Number/Name	Work Stmt. for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____
	See Annual Statement				

Five-Year Action Plan
Part II: Supporting Pages
Physical Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____			Work Statement for Year _____ FFY _____		
	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						
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		

Five-Year Action Plan
Part III: Supporting Pages
Management Needs Work Statement(s)
 Comprehensive Grant Program (CGP)

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

Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____			Work Statement for Year _____ FFY _____		
	General Description of Major Work Categories	Quantity	Estimated Cost	General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement						
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		

Public reporting burden for this collection of information is estimated to average 3 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. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

This collection of information requires that each eligible applicant submit information to HUD in order to receive its annual formula grant. This information will be used by HUD to determine whether the annual submission meets statutory and regulatory requirements for the annual formula grant. Responses to the collection are required by Section 14(e)(1)(D) of the U.S. Housing Act of 1937, as amended. The information requested does not lend itself to confidentiality.

Instructions for Preparation of Form HUD-52834, Five-Year Action Plan

Report Submission: Prepare one form HUD-52834 for the entire HA and submit to HUD as part of the submission of the original Comprehensive Plan in the first year of participation in the Comprehensive Grant Program (CGP). Thereafter, submit annually an updated form to eliminate the previous year and to add a new fifth year so that the form always covers the present five-year period beginning with the current year. Use as many pages of this form as necessary to cover all proposed work.

Part I: Summary

Heading Instructions:

HA Name. Enter the HA name.

Locality (City/County & State). Enter the City/County and State where the HA Central Office is located.

Original/Revision No. Self-explanatory.

Year 1. Enter the current FFY.

Years 2 through 5. Enter each successive FFY.

A. Development Number/Name. Enter the abbreviated number (e.g. VA 36-1) and name, if any, of each development that will be allocated funding for physical improvements during the five-year period covered by this Action Plan.

Work Statement(s) Years 2 through 5

For each development entered in A., enter the estimated amount of CGP funds to be allocated for physical improvements (development accounts 1450 through 1475) during each year of years 2 through 5.

B. Physical Improvements Subtotal. Enter the estimated subtotal amount of CGP funds to be allocated for physical improvements during each year of years 2 through 5.

C. Management Improvements. Enter the estimated amount of CGP funds to be allocated for management improvements, including those that are HA-wide and/or development-specific, (development account 1408) during each year of years 2 through 5. **Note:** The estimated amount may not exceed 20% of the annual grant, except where approved by HUD or the PHA is both an overall high performer and a Mod-high performer under the PHMAP.

D. HA-Wide Nondwelling Structures and Equipment. Enter the estimated amount of CGP funds to be allocated for HA-wide nondwelling structures and equipment during each year of years 2 through 5.

E. Administration. Enter the estimated amount of CGP funds to be allocated for administration costs (development account 1410) during each year of years 2 through 5. **Note:** The estimated amount may not exceed 10% of the annual grant, excluding certain costs, except where approved by HUD.

F. Other. Enter the estimated amount of CGP funds to be allocated for other costs (development accounts 1411, 1415, 1430, 1440, 1495,) and for contingencies (development account 1502) for each year of years 2 through 5.

G. Operations. Enter the estimated amount of CGP Funds to be allocated to operations (may not exceed 10% of line K) for each year of years 2 through 5.

H. Demolition. Enter the estimated amount of CGP funds to be used for demolition activities (development account 1485) for each year of years 2 through 5.

I. Replacement Reserve. Enter the estimated amount of CGP funds to be allocated to the replacement reserve (development account 1490) in accordance with the requirements of Handbook 7485.3, for each year of years 2 through 5.

J. Mod Used for Development. Enter the estimated amount of CGP funds to be used for development activities (development account 1498) for each year of years 2 through 5.

K. Total CGP Funds. Enter the total amount of CGP funds that is estimated for each year of years 2 through 5. This is the sum of B through J and should equal the amount of the current year annual grant.

L. Total Non-CGP Funds. Enter the estimated amount of non-CGP funds (e.g., Community Development Block Grant funds, CIAP funds being reprogrammed for use under the CGP, etc.) to be allocated in support of the CGP for each year of years 2 through 5.

M. Grand Total. Enter the total of K and L.

Note: Enter all estimates as current cost; not trended for inflation.

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

FFY:

Work Statement for Year 1. Enter the current FFY.

Work Statements for Years 2 through 5. Enter each successive FFY.

Development Number/Name.

Enter the abbreviated development number (e.g., VA 36-1) and name, if any, of each development which will be funded in each year of years 2 through 5 or enter "HA-wide."

General Description of Major Work Categories. For each development entered, list the major work categories for which CGP funding, including non-CGP funds, will be allocated in each year of years 2 through 5. The work categories should be described in broad terms, such as kitchens, bathrooms, electrical, site, etc. A work category may encompass various components; e.g., the major work category of kitchens may include ranges, refrigerators, cabinets, floors, range hoods, etc.

For "HA-Wide," list HA-wide non-dwelling structures and equipment that will be funded.

Quantity. Enter the quantity of the major work category to be undertaken as a percentage or whole number, e.g., 50 percent of the units, 125 units, etc.

Estimated Cost. For each major work category or HA-wide nondwelling structures and equipment listed, enter the estimated hard cost that will be allocated in each year of years 2 through 5. Mark with an asterisk the estimated cost of each work item that will be funded with non-CGP funds, including reprogrammed CIAP funds. Enter the subtotal of estimated costs for each year of years 2 through 5 that will be funded with CGP funds, excluding asterisked items. This subtotal should be reflected on line B in Part 1: Summary for each year of years 2 through 5.

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

FFY:

Work Statement for Year 1. Enter the current FFY.

Work Statements for Years 2 through 5. Enter each successive FFY.

General Description of Major Work Categories. In each year of years 2 through 5, enter the major work categories for which CGP funding, including non-CGP funds, will be allocated as well as those work categories that are no cost items. This includes work identified through the Public Housing Management Assessment Program (PHMAP) for PHAs, or through audits, HUD monitoring reviews, or HA self-assessments. The work categories should be described in sufficient detail for HUD to make a determination of eligibility. For example, training activities must describe how they relate to identified physical or management improvements, e.g., staff training to improve PHMAP scores on rent collection. If a particular work category is targeted to a specific development, e.g., conduct study to determine the feasibility of resident management, enter the development number in parenthesis.

Quantity. Where appropriate, enter the quantity of the major work category to be undertaken as a percentage or whole number, e.g., train 50 residents, train 10 percent of the staff, etc.

Estimated Cost. For each major work category entered, enter the estimated cost that will be allocated in each year of years 2 through 5. Mark with an asterisk the estimated cost of each work item that will be funded with non-CGP funds, including reprogrammed CIAP funds. Enter the subtotal for each year of years 2 through 5 that will be funded with CGP funds, excluding asterisked items. This subtotal should be reflected on line C in Part I: Summary for each year of Years 2 through 5.