
INDIAN HOUSING PLAN/ANNUAL PERFORMANCE REPORT

(NAHASDA §§ 102(b)(1)(A) and 404(a)(2))

This form meets the requirements for an Indian Housing Plan (IHP) and Annual Performance Report (APR) required by the United States Department of Housing and Urban Development. In addition to these requirements, a tribe or tribally designated housing entity (TDHE) may elect to prepare a more comprehensive IHP. If a tribe or TDHE elects to prepare a more comprehensive IHP, the required elements of this IHP must still be submitted on the prescribed HUD form. The information requested does not lend itself to confidentiality. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget (OMB) control number.

Regulatory and statutory citations are provided throughout this form as applicable. Recipients are encouraged to review these citations when completing the IHP and APR sections of the form.

Under the Native American Housing Assistance and Self-Determination Act of 1996 (NAHASDA) (25 U.S.C. 4101 et seq.), HUD will provide grants, loan guarantees, and technical assistance to Indian tribes and Alaska Native villages for the development and operation of low-income housing in Indian areas. Grants will be made to eligible recipients under the Indian Housing Block Grant (IHBG) program. To be eligible for the grants, respondents must submit an IHP that meets the requirements of the Act.

The recipient is required to submit the IHP to HUD at least 75 days prior to the start of its 12-month program year (NAHASDA § 102(a)(1)). The APR is due no later than 90 days after the end of the recipient's program year (24 CFR § 1000.514).

The IHP and the APR (previously two separate forms) are now combined into one form. The sections pertaining to the IHP are submitted **before** the beginning of the 12-month program year, leaving the APR (shaded) sections blank. If the IHP has been updated or amended, use the most recent version when preparing the APR. After the 12-month program year, enter the results from the 12-month program year in the shaded sections of the form to complete the APR. More details on how to complete the IHP and APR sections of the form can be found in the body of this form. In addition, a separate IHP and APR report form guidance is available.

NOTE: Grants awarded under the American Recovery and Reinvestment Act (Recovery Act) are excluded from this process. Grants under the Recovery Act continue to use the stand alone APR (HUD-52735-AS).

FORM COMPLETION OPTIONS: The IHP/APR form may be completed either in hard copy or electronically. Hard copy versions may be completed either by hand or typewriter. Alternatively, the form may be completed electronically as it is a Word Document. To check a box in the form double-click on the box and a window will open, under the default value section select the "Checked" button. It is recommended that the form be completed electronically because it is more efficient to complete, submit, and review the form. Furthermore, electronic versions of the form may be submitted to HUD as an email attachment. To document official signatures on the electronic version, you should sign a hard copy of the pages and either fax that signed page or email it as an attachment to your Area Office of Native American Programs. Pages of the IHP section that require an official signature include pages, 4, 20, 21, and 22. Pages of the APR section that require an official signature include pages 4 and 25.

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COVER PAGE

SECTION 1:

- (1) Initial Plan (Complete this Section then proceed to Section 3)
- (2) Amended Plan (Complete this Section and Section 2)
- (3) Annual Performance Report (Complete the APR signature (items 25-28) and proceed to Section 4)
- (4) Tribe
- (5) TDHE

| | | |
|--|-----------------------|-----------------------------|
| (6) Name of Recipient: Laguna Housing Development and Management Enterprise | | |
| (7) Contact Person: Jeffrey Harrison | | |
| (8) Telephone Number with Area Code: 505-552-6430 | | |
| (9) Mailing Address: PO Box 178 | | |
| (10) City: Laguna | (11) State: NM | (12) Zip Code: 87026 |
| (13) Fax Number with Area Code (if available): 505-552-9409 | | |
| (14) Email Address (if available): jeffreyh@lagunahousing.org | | |
| (15) If TDHE, List Tribes Below: Laguna Pueblo | | |

| |
|--|
| (16) Tax Identification Number:850200111 |
| (17) DUNS Number:0581685760000 |
| (18) CCR Number: |
| (19) IHBG Annual Grant Amount:\$1,510,121.00 |
| (20) Recipient Program Year:2012 |
| (21) Name of Authorized IHP Submitter: Jeffrey Harrison |
| (22) Title of Authorized IHP Submitter: Executive Director |
| (23) Signature of Authorized IHP Submitter: |
| (24) IHP Submission Date: 10-1-2011 |
| (25) Name of Authorized APR Submitter: |
| (26) Title of Authorized APR Submitter: |
| (27) Signature of Authorized APR Submitter: |
| (28) APR Submission Date: |

Certification: The information contained in this document is accurate and reflects the activities actually planned or accomplished during the program year. Activities planned and accomplished are eligible under applicable statutes and regulations.

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosure of information, including intentional disclosure, is subject to a civil money penalty not to exceed \$10,000 for each violation.

IHP AMENDMENTS

(24 CFR § 1000.232)

**Use this section for IHP amendments only.
If you are not amending an IHP, proceed to Section 3 (Housing Needs).**

SECTION 2: Fill out the text below to summarize your IHP amendment. This amendment is only required to be submitted to the HUD Area Office of Native American Programs when (1) the recipient is adding a new activity that was not described in the current One-Year Plan that has been determined to be in compliance by HUD or (2) to reduce the amount of funding that was previously budgeted for the operation and maintenance of 1937 Act housing under NAHASDA § 202(1). All other amendments should be made locally by the recipient and placed in the recipient's files.

| |
|--|
| (1) Program Name: |
| (2) Program Description (<i>This should adequately describe the new program that is planned.</i>): |
| (3) Eligible Activity Number (<i>Select one activity from the Eligible Activities list below.</i>): |

Eligible Activities May Include (citations below all reference sections in NAHASDA):

| | |
|---|--|
| (1) Modernization of 1937 Act Housing [202(1)] | (12) Acquisition of Homebuyer Units [202(2)] |
| (2) Operation of 1937 Act Housing [202(1)] | (13) Downpayment/Closing Cost Assistance [202(2)] |
| (3) Acquisition of Rental Housing [202(2)] | (14) Lending Subsidies for Homebuyers (Loan) [202(2)] |
| (4) Construction of Rental Housing [202(2)] | (15) Other Homebuyer Assistance Activities [202(2)] |
| (5) Rehabilitation of Rental Housing [202(2)] | (16) Rehabilitation Assistance to Existing Homeowners [202(2)] |
| (6) Acquisition of Land for Rental Housing Development [202(2)] | (17) Tenant Based Rental Assistance [202(3)] |
| (7) Development of Emergency Shelters [202(2)] | (18) Other Housing Service [202(3)] |
| (8) Conversion of Other Structures to Affordable Housing [202(2)] | (19) Housing Management Services [202(4)] |
| (9) Other Rental Housing Development [202(2)] | (20) Crime Prevention and Safety [202(5)] |
| (10) Acquisition of Land for Homebuyer Unit Development [202(2)] | (21) Model Activities [202(6)] |
| (11) New Construction of Homebuyer Units [202(2)] | (22) Self-Determination Program [231-235] |
| | (23) Infrastructure to Support Housing [202(2)] |

(4) Intended Outcome (*Select one from the list below.*):

Intended Outcome May Include:

| | |
|--|--|
| (1) Reduce over-crowding | (6) Create new affordable rental units |
| (2) Assist renters to become homeowners | (7) Assist affordable housing for college students |
| (3) Improve quality of substandard units | (8) Provide accessibility for disabled/elderly persons |
| (4) Improve quality of existing infrastructure | (9) Improve energy efficiency |
| (5) Address homelessness | (10) Reduction in crime reports |
| | (11) Other – must provide description in the box above |

(5) Who Will Be Assisted (*This should adequately describe the types of households who will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median income should be included as a separate Program within this Section.*):

(6) Types and Level of Assistance (*This should adequately describe any types of assistance and the level of assistance that will be provided to each household.*):

ONE YEAR PLAN & ANNUAL PERFORMANCE REPORT

SECTION 3: HOUSING NEEDS (NAHASDA § 102(b)(2)(B))

(1) **Type of Need:** Check the appropriate box(es) below to describe the estimated types of housing needs and the need for other assistance for low-income Indian families (column B) and all Indian families (column C) inside and outside the jurisdiction.

| (A) Type of Need | Check All That Apply | |
|--|-------------------------------------|-------------------------------------|
| | (B) Low-Income Indian Families | (C) All Indian Families |
| Overcrowded Households | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Renters Who Wish to Become Owners | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Substandard Units Needing Rehabilitation | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Homeless Households | <input type="checkbox"/> | <input type="checkbox"/> |
| Households Needing Affordable Rental Units | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| College Student Housing | <input type="checkbox"/> | <input type="checkbox"/> |
| Disabled Households Needing Accessibility | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Units Needing Energy Efficiency Upgrades | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Infrastructure to Support Housing | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Other (specify below) | <input type="checkbox"/> | <input type="checkbox"/> |

(2) Other Needs (Describe the "Other" needs below. Note: this text is optional for all needs except "Other.):

(3) Planned Program Benefits *(Describe below how your planned programs and activities will address the needs of low income families identified above. Also describe how your planned programs will meet the needs for the various types of housing assistance. NAHASDA § 102(b)(2)(B):*

LHDME's 2012 housing plan will continue to focus on addressing the maintenance needs of its rental units and overcrowding within Laguna Pueblo. During 2012, LHDME will continue to assess its management and housing needs, and build its management capacity accordingly. LHDME's emphasis will be on implementing policies and preparing written procedures to ensure staff and tenant compliance and have contingency in this area.

LHDME's planned benefits:

- LHDME will construct 5 new homeownership homes
- LHDME will construct 60 new rental units
- LHDME will make communities more livable by investing funds in "green" housing construction and common areas when financially feasible.
- LHDME will create 5-10 jobs for community members, helping alleviate high unemployment rates within the community.
- LHDME will increase the value of homes through maintenance and housing counseling classes/workshops.
- LHDME will improve the physical quality and management accountability of assisted housing through the repair and rehab of homes, the enforcement of LHDME Maintenance Policies and implementation of a comprehensive housing counseling approach.
- LHDME will collaborate with tribal entities and programs on data collection to effectively plan for the needs of the low income families within the Laguna Pueblo.
- LHDME will replace existing streetlights with solar powered streetlights. LHDME will also install additional streetlights at each LHDME housing area to ensure adequate lighting at night for safety purposes.

(4) Geographic Distribution *(Describe below how the program intends to distribute assistance throughout the geographic area and how this geographic distribution is consistent with the needs of low income families. NAHASDA § 102(b)(2)(B)(i):*

The scope of the Indian Housing Plan of the Pueblo of Laguna is limited to the reservation area which is defined as Tribal lands held in trust; however, its services are not limited to Tribal members who presently live on those lands. Services will be offered to all income-eligible Indian persons within the jurisdiction. It is estimated that 850 new homes, both rental and owner occupied are needed for the 3,800 (according to the 2000 U.S. Census) residents of the Pueblo of Laguna. The Tribal enrollment is 8,448 persons and slightly more than half the enrolled members live on trust land. Other Pueblo members live off reservation in other cities or states. Recognized "Colonies" of Laguna estimated that 3,855 Tribal members, slightly under half of all the Pueblo's members, live off the reservation in various places. Therefore, the dynamics of housing need are based on a total enrollment 8,448 with most all of whom maintain family and home ties at Laguna and

who may potentially return. While the enrollment is over 8,448; our current immediate needs are listed individual/families on the LHDME waiting list below:

Homeownership Participants: 42

Rental Units Participants: 62

Rehabilitation Participants:6

All 110 families that are needing immediate assistance have incomes that fall below or within the 80% median income range.

SECTION 4: PROGRAM DESCRIPTIONS

Planning and Reporting Program Year Activities

For the IHP, the purpose of this section is to describe each program that will be operating during the 12-month program year. Each program must include the eligible activity, its intended outcome, planned outputs, who will be assisted, and types and levels of assistance. Copy and paste text boxes 1.1 through 1.10 as often as needed so that all of your planned programs are included. For the APR, the purpose of this section is to describe your accomplishments, actual outputs, and any reasons for delays.

Eligible Activity May Include (*citations below all reference sections in NAHASDA*):

| | |
|---|--|
| (1) Modernization of 1937 Act Housing [202(1)] | (12) Acquisition of Homebuyer Units [202(2)] |
| (2) Operation of 1937 Act Housing [202(1)] | (13) Downpayment/Closing Cost Assistance [202(2)] |
| (3) Acquisition of Rental Housing [202(2)] | (14) Lending Subsidies for Homebuyers (Loan) [202(2)] |
| (4) Construction of Rental Housing [202(2)] | (15) Other Homebuyer Assistance Activities [202(2)] |
| (5) Rehabilitation of Rental Housing [202(2)] | (16) Rehabilitation Assistance to Existing Homeowners [202(2)] |
| (6) Acquisition of Land for Rental Housing Development [202(2)] | (17) Tenant Based Rental Assistance [202(3)] |
| (7) Development of Emergency Shelters [202(2)] | (18) Other Housing Service [202(3)] |
| (8) Conversion of Other Structures to Affordable Housing [202(2)] | (19) Housing Management Services [202(4)] |
| (9) Other Rental Housing Development [202(2)] | (20) Crime Prevention and Safety [202(5)] |
| (10) Acquisition of Land for Homebuyer Unit Development [202(2)] | (21) Model Activities [202(6)] |
| (11) New Construction of Homebuyer Units [202(2)] | (22) Self-Determination Program [231-235] |
| | (23) Infrastructure to Support Housing [202(2)] |

Outcome May Include:

| | |
|--|--|
| (1) Reduce over-crowding | (6) Create new affordable rental units |
| (2) Assist renters to become homeowners | (7) Assist affordable housing for college students |
| (3) Improve quality of substandard units | (8) Provide accessibility for disabled/elderly persons |
| (4) Improve quality of existing infrastructure | (9) Improve energy efficiency |
| (5) Address homelessness | (10) Reduction in crime reports |
| | (11) Other – must provide description in boxes 1.4 (IHP) and 1.5 (APR) below |

IHP: PLANNED PROGRAM YEAR ACTIVITIES (NAHASDA § 102(b)(2)(A))

For each planned activity, complete all the non-shaded sections below. It is recommended that for each program name you assign a unique identifier to help distinguish individual programs. This unique number can be any number of your choosing, but it should be simple and clear so that you and HUD can track tasks and results under the program and collect appropriate file documentation tied to this program.

- One way to number your programs is chronologically. For example, you could number your programs 2011-1, 2011-2, 2011-3 etc.
- Or, you may wish to number the programs based on type. For example rental 1, rental 2, homebuyer 1, homebuyer 2 etc. This type of numbering system might be appropriate if you have many programs that last over several years.
- Finally, you may wish to use an outline style of numbering. For example, all programs under your first eligible activity would start with the number 1 and then be consecutively numbered as 1.1, 1.2, 1.3 etc. The programs under the second eligible activity would be numbered as 2.1, 2.2., 2.3 etc.

APR: REPORTING ON PROGRAM YEAR PROGRESS (NAHASDA § 404(b))

Complete the shaded section of text below to describe your completed program tasks and actual results. Only report on activities completed during the 12-month program year. Financial data should be presented using the same basis of accounting as the Schedule of Expenditures of Federal Awards (SEFA) in the annual OMB Circular A-133 audit. For unit accomplishments, only count units when the unit was completed and occupied during the year. For households, only count the household if it received the assistance during the previous 12-month program year.

| |
|--|
| <p>1.1. Program Name and Unique Identifier: 2012-1 Operating Assistance</p> |
| <p>1.2. Program Description (<i>This should be the description of the planned program.</i>): This program is designed to establish and maintain systems which ensure sound fiscal management, human resource management, and planning and development of maintenance programs. Funds support the cost of maintenance services and office/shop; utility costs; insurance; work order system; inventory control system; purchasing supplies, materials, services, and equipment; contracting, vehicle/equipment maintenance; Board meetings; training; legal/auditing services; pest control; and preventive maintenance activities. Also included within this program are the following activities: routine and non-routine repairs, maintenance and replacement of fixtures, equipment and/or materials to ensure compliance with housing policies.</p> |
| <p>1.3. Eligible Activity Number (<i>Select one activity from the Eligible Activity list.</i>): 2- Operation of 1937 Act Housing</p> |
| <p>1.4. Intended Outcome Number (<i>Select one outcome from the Outcome list.</i>): 3- Improve quality of substandard units</p> |
| <p>1.5. Actual Outcome Number (<i>In the APR identify the actual outcome from the Outcome list.</i>):</p> |
| <p>1.6. Who Will Be Assisted (<i>Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be</i></p> |

included as a separate program within this section.):

Low income families.

1.7. Types and Level of Assistance *(Describe the types and the level of assistance that will be provided to each household, as applicable.)*

Types of services include management functions such as accounting, procurement, maintenance (work orders), legal/auditing services, reporting, and Board meetings. Force account maintenance crews and/or contractors occasion may be utilized to perform work. Charges will apply for tenant damage based on LHDME's established fee schedule.

1.8. APR: *Describe the accomplishments for the APR in the 12-month program year.*

1.9. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| 131 | NA | | |

1.10. APR: *If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))*

1.9. Program Name and Unique Identifier:

2012- 2 New Rental Units- Rainbow

1.10. Program Description *(This should be the description of the planned program.):*

Up to 60 rental units are planned to be constructed for elderly and disabled households.

1.11. Eligible Activity Number *(Select one activity from the Eligible Activity list.):*

4- Construction of Rental Housing

1.12. Intended Outcome Number (Select one outcome from the Outcome list.):

6- Create new affordable rental units

1.13. Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

1.14. Who Will Be Assisted (Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):

The elderly and disabled households.

1.15. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.)

Contractors will perform work. Applicants and/or families applying for a rental unit must participate in housing counseling classes.

1.16. APR: Describe the accomplishments for the APR in the 12-month program year.

1.17. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| 60 | NA | | |

1.18. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

1.19. Program Name and Unique Identifier:

2012-3 Construction of New Homes (5)

1.20. Program Description (This should be the description of the planned program.):

Build up to 5 new single family homes.

1.21. Eligible Activity Number (Select one activity from the Eligible Activity list.):

11- Construction of New Homes

1.22. Intended Outcome Number (Select one outcome from the Outcome list.):

1- Reduce over-crowding

1.23. Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

1.24. Who Will Be Assisted (Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):

Low income families.

1.25. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.)

Contractors will perform work. Applicants applying for a home must participate in housing counseling classes.

1.26. APR: Describe the accomplishments for the APR in the 12-month program year.

1.27. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| 5 | NA | | |

1.28. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

1.29. Program Name and Unique Identifier:

2012-4 Comprehensive Housing Counseling

1.30. Program Description (This should be the description of the planned program.):

This program is designed to provide the following activities: establish a comprehensive housing counseling program to provide homebuyer education, one-on-one counseling, tenants rights and obligations counseling, maintenance

counseling, credit repair, and budgeting counseling. Under this program LHDME will also conduct a housing fair as part of its outreach to the community as well as disseminate written communication materials to the current and prospective tenants educating them on LHDME's housing program.

1.31. Eligible Activity Number (Select one activity from the Eligible Activity list.):

18- Other Housing Services

1.32. Intended Outcome Number (Select one outcome from the Outcome list.):

2- Assist renters to become homeowners

1.33. Actual Outcome Number (In the APR identify the actual outcome from the Outcome list.):

1.34. Who Will Be Assisted (Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.):

All eligible families whose income falls within 80% of the median income

1.35. Types and Level of Assistance (Describe the types and the level of assistance that will be provided to each household, as applicable.)

Types of services will include: one-on-one counseling, workshops, and home visits.

1.36. APR: Describe the accomplishments for the APR in the 12-month program year.

1.37. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| NA | 193 | | |

1.38. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

1.39. Program Name and Unique Identifier:

2012-5 Housing Management Services

1.40. Program Description (*This should be the description of the planned program.*):
 This program is designed to provide the following activities: application intake, tenant relations, home-renter monitoring, collections, conveying stock, re-certifications, home-renter and homebuyer agreement and enforcement, data collection and analysis, report preparation, file maintenance of all tenant & applicant information and correspondence, and conducting inspections.

1.41. Eligible Activity Number (*Select one activity from the Eligible Activity list.*):
 19-Housing Management Services

1.42. Intended Outcome Number (*Select one outcome from the Outcome list.*):
 11 – other – ensure viability of housing stock and facilitate providing safe and decent housing.

1.43. Actual Outcome Number (*In the APR identify the actual outcome from the Outcome list.*):

1.44. Who Will Be Assisted (*Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.*):
 All eligible clients whose income falls within 80% of the median income

1.45. Types and Level of Assistance (*Describe the types and the level of assistance that will be provided to each household, as applicable.*):
 Housing Management Services will be provided by Tenant Services Staff at no cost to the applicant or tenant.

1.46. APR: *Describe the accomplishments for the APR in the 12-month program year.*

1.47. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| NA | 193 | | |

1.48. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

1.49. Program Name and Unique Identifier:

2012-6 Solar powered street lights

1.50. Program Description (*This should be the description of the planned program.*):

This program is designed to replace existing street lights with solar powered street lights to improve energy efficiency in safeguarding housing units and reduce the physical housing costs resulting from illegal activities.

1.51. Eligible Activity Number (*Select one activity from the Eligible Activity list.*):

20 - Crime Prevention and Safety

1.52. Intended Outcome Number (*Select one outcome from the Outcome list.*):

9 – Improve energy efficiency and 10 – reduction in crime reports

1.53. Actual Outcome Number (*In the APR identify the actual outcome from the Outcome list.*):

1.54. Who Will Be Assisted (*Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.*):

Low income families currently residing in LHMDE managed units.

1.55. Types and Level of Assistance (*Describe the types and the level of assistance that will be provided to each household, as applicable.*)

of streets per housing project. Work to be performed by contractor.

1.56. APR: *Describe the accomplishments for the APR in the 12-month program year.*

1.57. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| NA | 193 | | |

1.58. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))



1.59. Program Name and Unique Identifier:

2012-7 Maintenance Bldg. Addition

1.60. Program Description (*This should be the description of the planned program.*):

This program is designed to construction an addition to the existing maintenance and storage space for housing materials for housing assistance under NAHASDA guidelines.

1.61. Eligible Activity Number (*Select one activity from the Eligible Activity list.*):

21- Model Activities

1.62. Intended Outcome Number (*Select one outcome from the Outcome list.*):

11 – Other – ensure adequate inventory of housing materials/parts/equipment to provide safe and decent housing.

1.63. Actual Outcome Number (*In the APR identify the actual outcome from the Outcome list.*):

1.64. Who Will Be Assisted (*Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.*):

Low income families currently residing in LHDME management housing units.

1.65. Types and Level of Assistance (*Describe the types and the level of assistance that will be provided to each household, as applicable.*)

Contractor to construct addition to maintenance building.

1.66. APR: *Describe the accomplishments for the APR in the 12-month program year.*

1.67. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| NA | 193 | | |

1.68. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

1.69. Program Name and Unique Identifier:
2012-8 Infrastructure

1.70. Program Description (*This should be the description of the planned program.*):
This program is designed to plan and/or development adequate infrastructure in areas identified for housing projects. This program will also be utilized to implement infrastructure upgrades on an as needed basis in areas for potential housing development and/or for safety/sanitary reasons.

1.71. Eligible Activity Number (*Select one activity from the Eligible Activity list.*):
23 - Infrastructure to Support Housing

1.72. Intended Outcome Number (*Select one outcome from the Outcome list.*):
4 – Improve quality of existing infrastructure

1.73. Actual Outcome Number (*In the APR identify the actual outcome from the Outcome list.*):

1.74. Who Will Be Assisted (*Describe the types of households that will be assisted under the program. Please note: assistance made available to families whose incomes fall within 80 to 100 percent of the median should be included as a separate program within this section.*):

All eligible families whose income falls within 80% of the median income

1.75. Types and Level of Assistance (*Describe the types and the level of assistance that will be provided to each household, as applicable.*)

Engineering and contractor services.

1.76. APR: Describe the accomplishments for the APR in the 12-month program year.

1.77. Planned and Actual Outputs for 12-Month Program Year

| Planned Number of Units to be Completed in Year Under this Program | Planned Number of Households To Be Served in Year Under this Program | APR: Actual Number of Units Completed in Program Year | APR: Actual Number of Households Served in Program Year |
|--|--|---|---|
| NA | 5 | | |

1.78. APR: If the program is behind schedule, explain why. (24 CFR § 1000.512(b)(2))

SECTION 5: MAINTAINING 1937 ACT UNITS, DEMOLITION, AND DISPOSITION

(1) Maintaining 1937 Act Units (NAHASDA § 102(b)(2)(A)(v)) *(Describe specifically how you will maintain and operate your 1937 Act housing units in order to ensure that these units will remain viable.):*

Pending conveyance, 1937 Act homes will be maintained to ensure that homebuyers have safe and healthy homes through annual inspections that ensure homes are adequately maintained by homebuyers/tenants. Homes of Low Rent Programs will be maintained by LHDME in accordance with standard building codes. LHDME will continue oversight of Mutual help homes in accordance with the provisions of the Mutual Help Homeowners Occupancy Agreement (MHOA) and will continue modernization as needed in defined existing/anticipated housing rehabilitation programs. IHBG funds will be set aside to accomplish the maintenance of rental units and for monitoring of lease purchase units.

(2) Demolition and Disposition (NAHASDA § 102(b)(2)(A)(iv)(I-III)) *(Describe any planned demolition or disposition of 1937 Act housing units. Be certain to include the timetable for any planned demolition or disposition and any other information required by HUD with respect to the demolition or disposition.):*

none

SECTION 6: BUDGETS

(1) **Planned Grant-Based Budget for Eligible Programs** (In the table below show how you plan to spend the total amount of that year's IHBG funds based on the estimated formula allocation or the final formula allocation. This table should include only planned IHBG funds and not program income or funding from any other source.)

| Eligible Activity | Planned IHBG Budget |
|--|----------------------------|
| Indian Housing Assistance | \$555,235 |
| Development | \$520,000 |
| Housing Services | \$25,000 |
| Housing Management Services | \$25,000 |
| Crime Prevention and Safety Activities | \$10,000 |
| Model Activities | \$125,990 |
| Administration | \$315,306 |
| TOTAL | \$1,576,531 |

(2) Estimated Sources of Funding (NAHASDA § 102(b)(2)(C)(i)) (Complete the **non-shaded** portions of the chart below to describe your estimated or anticipated sources of funding for the 12-month program year. **APR Actual Sources of Funding -- Please complete the shaded portions of the chart below to describe your actual funds received. Only report on funds actually received and under a grant agreement or other binding commitment during the 12-month program year.**)

| SOURCE | IHP | | | | | APR | | | | | |
|--------------------------------|--|---|---|--|--|---|--|--|---|--|---|
| | (A) Estimated amount on hand at beginning of program year | (B) Estimated amount to be received during 12-month program year | (C) Estimated total sources of funds (A + B) | (D) Estimated funds to be expended during 12-month program year | (E) Estimated unexpended funds remaining at end of program year (C minus D) | (F) Actual amount on hand at beginning of program year | (G) Actual amount received during 12-month program year | (H) Actual total sources of funding (F + G) | (I) Actual funds expended during 12-month program year | (J) Actual unexpended funds remaining at end of 12-month program year (H minus I) | (K) Actual unexpended funds obligated but not expended at end of 12-month program year |
| 1. IHBG Funds | 2,360,121 | 1,576,531 | 3,936,652 | 2,295,060 | 1,641,592 | | | | | | |
| 2. IHBG Program Income | 140,000 | 100,000 | 240,000 | 90,000 | 150,000 | | | | | | |
| 3. Title VI | | | | | | | | | | | |
| 4. Title VI Program Income | | | | | | | | | | | |
| 5. 1937 Act Operating Reserves | | | | | | | | | | | |
| 6. Carry Over 1937 Act Funds | | | | | | | | | | | |
| LEVERAGED FUNDS | | | | | | | | | | | |
| 7. ICDBG Funds | 825,000 | | 825,000 | 825,000 | 0 | | | | | | |
| 8. Other Federal Funds | | | | | | | | | | | |
| 9. LIHTC | | | | | | | | | | | |
| 10. Non-Federal Funds | | | | | | | | | | | |
| TOTAL | 3,325,121 | 1,676,531 | 5,001,652 | 3,210,060 | 1,791,592 | \$ 0.00 | | | | | |

Notes:

- a. For the IHP, fill in columns A, B, C, D, and E (non-shaded columns). **For the APR, fill in columns F, G, H, I, J, and K (shaded columns).**
- b. Total of Column D should match the total of Column O from the **Uses Table** on the following page.
- c. Total of Column I should match the Total of Column R from the Uses Table on the following page.**
- d. For the IHP, describe any estimated leverage in box 4 on page 17. For the APR, describe actual leverage in box 5 on page 17.

(3) Uses of Funding (NAHASDA § 102(b)(2)(C)(ii)) (Note that the budget should not exceed the total funds on hand. **Actual expenditures in the APR section are for the 12-month program year.) (Insert as many rows as needed)**

| PROGRAM NAME (tie to program names in Section 4 above) | Eligible Activity Number | IHP | | | | APR | | |
|---|--------------------------|---|---|--|--|--|--|--|
| | | (L) Prior year IHBG (only) funds to be expended in 12-month program year | (M) Current year IHBG (only) funds to be expended in 12-month program year | (N) Total all other funds to be expended in 12-month program year | (O) Total funds to be expended in 12-month program year (L + M + N) | (P) Total IHBG (only) funds expended in 12-month program year | (Q) Total all other funds expended in 12-month program year | (R) Total funds expended in 12-month program year (P+Q) |
| 2012-1 Operating Assistance | 2 | 243,553 | 275,000 | 90,000 | 608,553 | | | |
| 2012-2 New Rental Units - Rainbow | 4 | | 100,000 | | 100,000 | | | |
| Rehabilitation of Rental Housing | 5 | 126,786 | | | 126,786 | | | |
| 2012-3 Construction 5 new homeownership units | 11 | 903,214 | 100,000 | | 1,003,214 | | | |
| 2012-4 Comprehensive Housing Counseling Program | 18 | 45,000 | 10,000 | | 55,000 | | | |
| 2012-5 Housing Mgmt. Services | 19 | 25,000 | 10,000 | | 35,000 | | | |
| 2012- 6 Solar Powered Street Light | 20 | | 10,000 | | 10,000 | | | |
| 2012-7 Maintenance Bldg. Addition | 21 | 110,495 | 60,000 | | 170,495 | | | |
| 2012-8 Infrastructure | 23 | | 10,000 | 825,000 | 835,000 | | | |
| Program Administration | | 151,012 | 115,000 | | 266,012 | | | |
| Loan repayment – describe in 4 below. | | | | | | | | |
| TOTAL | | 1,605,060 | 690,000 | 915,000 | 3,210,060 | | | |

Notes:

- a. Total of Column L cannot exceed the IHBG funds from Column A, Row 1 from the Sources Table on the previous page.
- b. Total of Column M cannot exceed the IHBG funds from Column B, Row 1 from the Sources Table on the previous page.
- c. Total of Column N should equal the total from Columns A and B, rows 2-10 from the Sources Table on the previous page.
- d. Total of Column P cannot exceed total received IHBG grant from Column C, Row 1 from the Sources table on the previous page.**
- e. Total of Column Q cannot exceed total of Column H of the Sources Table on the previous page excluding the IHBG funds on row 1.**
- f. Total of Column R should equal total of Column I of the Sources Table on the previous page.**

(4) Estimated Sources or Uses of Funding (NAHASDA § 102(b)(2)(C)). *(Provide any additional information about the estimated sources or uses of funding, including leverage (if any). You must provide the relevant information for any planned loan repayment listed in the Uses Table on the previous page. This planned loan repayment can be associated with Title VI or with private or tribal funding that is used for an eligible activity described in an IHP that has been determined to be in compliance by HUD. The text must describe which specific loan is planned to be repaid and the NAHASDA-eligible activity and program associated with this loan. This information would be used to ensure timely payment of debt obligations, including public and private financial transactions, should it be necessary to prevent default.*

(5) APR (NAHASDA § 404(b)) *(Enter any additional information about the actual sources or uses of funding, including leverage (if any). You must provide the relevant information for any actual loan repayment listed in the Uses Table on the previous page. The text must describe which loan was repaid and under the NAHASDA-eligible activity and program associated with this loan.):*

SECTION 7: OTHER SUBMISSION ITEMS

(1) Useful Life/Affordability Period(s) (NAHASDA § 205, 24 CFR § 1000.142) *(List all unit types (excluding Mutual Help units) that will be developed or rehabilitated with IHBG funds during the 12 month period, and the anticipated useful life of these units. If you propose to assign some period of time other than the useful life of the units, indicate that affordability period.):*

Housing assisted under section 202 of NAHASDA will remain affordable and restricted to occupancy by eligible low income families in the lease purchase and rental programs for the useful life of 40 years.

Units that are under the LPI and LPII are on a 45-year useful life due to the funding sources that are associated with this development; all other LHDME units are on a 40-year useful life expectancy from date first constructed.

All rehabilitated homes that are assisted with NAHASDA grant funding will remain affordable and restricted to occupancy by eligible low income families as depicted in LHDME Housing Programs Policies & Procedures, page 37, R. Useful Life.

(2) Model Housing and Over-Income Activities (24 CFR § 1000.108) *(If you wish to undertake a model housing activity or wish to serve non-low-income households during the 12-month program year, those activities may be described here, in the program description section of the 1-year plan, or as a separate submission.):*

LHDME plans to add-on to the current maintenance bldg. structure. The addition will provide increased working space and allow for expanded storage space for housing materials, parts, and equipment needed to adequately service housing units. LHDME also plans to actively train community members, preference given to low income families, in the various construction trades which would allow LHDME to adequately service housing units without having to sub-contract work. Increasing maintenance capacity will drive demand for increased inventory as such adequate storage and workspace to perform work. LHDME will begin working on the addition to the maintenance building upon grant award and within the first year will accomplish the following:

Will procure for constructions services;

Award contract and begin construction.

LHDME is actively seeking applicants for the force account workers.

(3) Tribal and Other Indian Preference (NAHASDA § 201(b)(5), 24 CFR § 1000.120)

If preference will be given to tribal members or other Indian families, the preference policy must be described. This information may be provided here or in the program description section of the 1-year plan.

Does the Tribe have a preference policy? Yes No

If yes, describe the policy

It is the policy of Laguna Housing Development and Management Enterprise to serve the housing

needs of Laguna tribal members and other persons authorized to live on tribal lands. LHDME will provide services to all members of the Laguna Pueblo by referring them to appropriate funding resources that meet their current financial capabilities.

The initial priority of this IHP will be given to tribal members who meet eligibility for housing opportunity. LHDME provides assistance in meeting tribal member housing needs and housing improvements. Housing services for tribal members are prioritized towards low-income individuals who are deemed eligible and who have compiled with criteria of NAHASDA and are next on the waiting list, as required by funding regulations.

(4) Administrative (NAHASDA § 102(b)(2)(C)(ii), 24 CFR § 1000.238)

Do you intend to use more than 20% of your current grant for Administration? Yes No

If yes, describe why the additional funds are needed for Administration.

(5) Expanded Formula Area – Verification of Substantial Housing Services (24 CFR § 1000.302(3))

If your Tribe has an expanded formula area, (i.e., an area that was justified based on housing services provided rather than the list of areas defined in 24 CFR § 1000.302 Formula Area (1)), the Tribe must demonstrate that it is continuing to provide substantial housing services to that expanded formula area. Does the Tribe have an expanded formula area?

Yes No If no, proceed to Section 8.

If yes, list each separate geographic area that has been added to the Tribe's formula area and the documented number of Tribal members residing there.

For each separate formula area expansion, list the budgeted amount of IHBG and other funds to be provided to all American Indian and Alaska Native (AIAN) households and to only those AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year:

Total Expenditures on Affordable Housing Activities for:

| | All AIAN Households | AIAN Households with Incomes 80% or less of Median Income |
|----------------------------------|----------------------------|--|
| IHBG funds: | NA | NA |
| Funds from other Sources: | NA | NA |

(6) APR: For each separate formula area expansion, list the actual amount of IHBG and other funds expended for all AIAN households and for only AIAN households with incomes 80% of median income or lower during the recipient's 12-month program year.

| Total Expenditures on Affordable Housing Activities for: | | |
|---|----------------------------|--|
| | All AIAN Households | AIAN Households with Incomes 80% or less of Median Income |
| IHBG funds: | | |
| Funds from other Sources: | | |

SECTION 8: INDIAN HOUSING PLAN CERTIFICATION OF COMPLIANCE
 (NAHASDA § 102(b)(2)(D))

This certification is used to ensure that you have all required policies and procedures in place in order to operate any planned IHBG programs.

(1) In accordance with applicable statutes, the recipient certifies that:

- a. Yes No It will comply with title II of the Civil Rights Act of 1968 in carrying out this Act, to the extent that such title is applicable, and other applicable federal statutes.

(2) In accordance with 24 CFR 100.328, the recipient receiving less than \$200,000 under FCAS certifies that:

- a. Yes No Not Applicable There are households within its jurisdiction at or below 80 percent of median income.

(3) The following certifications will only apply where applicable based on program activities.

- a. Yes No Not Applicable It will maintain adequate insurance coverage for housing units that are owned and operated or assisted with grant amounts provided under NAHASDA, in compliance with such requirements as may be established by HUD;
- b. Yes No Not Applicable Policies are in effect and are available for review by HUD and the public governing the eligibility, admission, and occupancy of families for housing assisted with grant amounts provided under NAHASDA;
- c. Yes No Not Applicable Policies are in effect and are available for review by HUD and the public governing rents charged, including the methods by which such rents or homebuyer payments are determined, for housing assisted with grant amounts provided under NAHASDA; and
- d. Yes No Not Applicable Policies are in effect and are available for review by HUD and the public governing the management and maintenance of housing assisted with grant amounts provided under NAHASDA.

| | |
|--|--|
| (4) Recipient: | Laguna Housing Development and Management Enterprise |
| (5) Authorized Official's Name and Title: | Jeffrey Harrison, Executive Director |
| (6) Authorized Official's Signature: | |
| (7) Date (MM/DD/YYYY): | |

SECTION 9: IHP TRIBAL CERTIFICATION
 (NAHASDA § 102(c))

This certification is used when a Tribally Designated Housing Entity (TDHE) prepares the IHP on behalf of a tribe. This certification must be executed by the recognized tribal government covered under the IHP.

(1) The recognized tribal government of the grant beneficiary certifies that:

(2) It had an opportunity to review the IHP and has authorized the submission of the IHP by the TDHE; or

(3) It has delegated to such TDHE the authority to submit an IHP and amendments on behalf of the Tribe without prior review by the Tribe.

| | |
|---|--|
| (4) Recipient: | Laguna Housing Development and Management Enterprise |
| (5) Authorized Official's Name and Title: | Richard Luarkie, Governor of the Pueblo of Laguna |
| (6) Authorized Official's Signature: | |
| (7) Date (MM/DD/YYYY): | |

SECTION 10: TRIBAL WAGE RATE CERTIFICATION

(NAHASDA §§ 102(b)(2)(D)(vi) and 104(b)(3))

This certification is used to indicate whether for construction activities you will use tribally determined prevailing wage rates or Davis-Bacon wage rates. Check only the applicable boxes below.

- (1) You will use tribally determined wage rates when required for IHBG-assisted construction or maintenance activities. The Tribe has appropriate laws and regulations in place in order for it to determine and distribute prevailing wages.
- (2) You will use Davis-Bacon or HUD determined wage rates when required for IHBG-assisted construction or maintenance.
- (3) You will use Davis-Bacon and/or HUD determined wage rates when required for IHBG-assisted construction except for the activities listed below.

| |
|---|
| (4) List the activities using tribally determined wage rates: |
|---|

| | |
|---|--|
| (5) Recipient: | Laguna Housing Development and Management Enterprise |
| (6) Authorized Official's Name and Title: | Jeffrey Harrison, Executive Director |
| (7) Authorized Official's Signature: | |
| (8) Date (MM/DD/YYYY): | |

SECTION 11: SELF-MONITORING

(NAHASDA § 403(b), 24 CFR § 1000.502)

(1) Do you have a procedure and/or policy for self-monitoring, including monitoring sub-recipients?

Yes No

(2) Pursuant to 24 CFR § 1000.502 (b) where the recipient is a TDHE, the grant beneficiary (Indian Tribe) is responsible for monitoring programmatic compliance. Did the Tribe monitor the TDHE?

Yes No Not Applicable

(3) Did you complete an annual compliance assessment?

Yes No

(4) Self-Monitoring Results. *(Describe the results of the monitoring activities, including inspections for this program year.):*

SECTION 12: INSPECTIONS

(NAHASDA § 403(b))

(1) Inspection of Units (Use the table below to record the results of the inspections of assisted housing.)

| Results of Inspections | | | | | |
|-----------------------------------|------------------------------------|--|--|---|--|
| (A) Activity | (B) Total number of units | (C) Units in standard condition | (D) Units needing rehabilitation | (E) Units needing to be replaced | (F) Total number of units inspected |
| 1. 1937 Housing Act Units: | | | | | |
| a. Rental | | | | | |
| b. Homeownership | | | | | |
| c. Other | | | | | |
| 1937 Act Subtotal | | | | | |
| 2. NAHASDA Units: | | | | | |
| a. Rental | | | | | |
| b. Homeownership | | | | | |
| c. Rental Assistance | | | | | |
| d. Other | | | | | |
| NAHASDA Subtotal | | | | | |
| Total | | | | | |

Note: Total of column F should equal the sum of columns C+D+E.

(2) Did you comply with your inspection policy: Yes No:

(3) If no, why not:

SECTION 13: AUDITS

If you expended less than \$500,000 in total Federal awards during the fiscal year ended and, on that basis, claim that a financial audit is not required for that fiscal year, the authorized official should sign the following certification.

During the previous fiscal year ended, the recipient expended less than \$500,000 in Federal awards, as that term is defined in the Single Audit Act of 1984, 31 U.S.C. § 7501(a)(4) and in Office of Management and Budget Circular A-133, § ____.105. This certification is based on a review of the recipient's financial records.

| | |
|---|--|
| (1) Recipient: | |
| (2) Authorized Official's Name and Title: | |
| (3) Authorized Official's Signature: | |
| (4) Date (MM/DD/YYYY): | |

SECTION 14: PUBLIC ACCOUNTABILITY

(1) Did you make this APR available to the citizens in your jurisdiction before it was submitted to HUD (24 CFR § 1000.518)?

Check one: Yes No

(2) If you are a TDHE, did you submit this APR to the Tribe (24 CFR § 1000.512)?

Check one: Yes No Not Applicable

(3) If you answered "No" to question #1 and/or #2, provide an explanation as to why not and indicate when you will do so.

(4) Summarize any comments received from the Tribe and/or the citizens (NAHASDA § 404(d)):

SECTION 15: JOBS SUPPORTED BY NAHASDA

Use the table below to record the number of jobs supported with IHBG funds.

| Indian Housing Block Grant Assistance (IHBG) | |
|---|--|
| (1) Number of Permanent Jobs Supported | |
| (2) Number of Temporary Jobs Supported | |

(3) Narrative (optional):

SECTION 16: IHP WAIVER REQUESTS

(NAHASDA § 101(b)(2))

THIS SECTION IS ONLY REQUIRED IF THE RECIPIENT IS REQUESTING A WAIVER OF AN IHP SECTION OR A WAIVER OF THE IHP SUBMISSION DUE DATE. A waiver is valid for a period not to exceed 90 days. Fill out the form below if you are requesting a waiver of one or more sections of the IHP. **NOTE:** This is NOT a waiver of the IHBG program requirements but rather a request to waive some of the IHP submission items.

(1) List below the sections of the IHP where you are requesting a waiver and/or a waiver of the IHP due date.

(List the requested waiver sections by name and section number):

none

(2) Describe the reasons that you are requesting this waiver *(Describe completely why you are unable to complete a particular section of the IHP.):*

n/a

(3) Describe the actions that you will take in order to ensure that you is able to submit a complete IHP in the future and/or submit the IHP by the required due date. *(This section should completely describe the procedural, staffing or technical corrections that you will make in order to submit a complete IHP in the future and/or submit the IHP by the required due date.):*

n/a