

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

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# PHA Plans

5 Year Plan for Fiscal Years 2001 - 2005  
Annual Plan for Fiscal Year 2001

**Newbern Housing Authority**  
**709 Maple Drive**  
**Newbern, Tennessee 38059**

**TN075v02**

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

**PHA Plan  
Agency Identification**

**PHA Name: Newbern Housing Authority**

**PHA Number: TN075**

**PHA Fiscal Year Beginning: (mm/yyyy) 07/2001**

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2001 - 2005**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- PHA Goal: Expand the supply of assisted housing  
Objectives:
- Apply for additional rental vouchers:
  - Reduce public housing vacancies:
  - Leverage private or other public funds to create additional housing opportunities:
  - Acquire or build units or developments
  - Other (list below)
- PHA Goal: Improve the quality of assisted housing  
Objectives:
- Improve public housing management: (PHAS score)
  - Improve voucher management: (SEMAP score)
  - Increase customer satisfaction:
  - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

- Renovate or modernize public housing units:
- Demolish or dispose of obsolete public housing:
- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

- PHA Goal: Increase assisted housing choices

Objectives:

- Provide voucher mobility counseling:
- Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- Implement voucher homeownership program:
- Implement public housing or other homeownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- PHA Goal: Provide an improved living environment

Objectives:

- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- Implement public housing security improvements:
- Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- Increase the number and percentage of employed persons in assisted families:
- Provide or attract supportive services to improve assistance recipients' employability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- Other: (list below)

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan**  
**PHA Fiscal Year 2001**  
[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

**Standard Plan**

**Streamlined Plan:**

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**

**Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

**Not Required**

### **iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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#### **Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

#### Required Attachments:

- Admissions Policy for Deconcentration **(Attachment A)**
- FY 2001 Capital Fund Program Annual Statement **(See Attachment J)**
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2001 Capital Fund Program 5 Year Action Plan
- Public Housing Drug Elimination Program (PHDEP) Plan **Attachment C**
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- Other (List below, providing each attachment name)
  - Attachment B – Definition of Substantial Deviation**
  - Attachment C – PHDEP Plan**
  - Attachment D – Resident Advisory Board**
  - Attachment E – Resident Membership on the PHA Board**
  - Attachment F – Progress on Mission and Goals**
  - Attachment G - Resident Police Officer**
  - Attachment H – Implementation of Public Housing Resident Community Service Program**
  - Attachment I – Pet Policy**
  - Attachment J – Annual Performance and Evaluation Report**

**Supporting Documents Available for Review**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
<b>X</b>	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
<b>X</b>	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
<b>X</b>	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
<b>X</b>	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
<b>X</b>	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
<b>X</b>	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>NA</b>	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>X</b>	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>X</b>	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
<b>NA</b>	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
<b>NA</b>	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
<b>X</b>	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
<b>X</b>	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
<b>NA</b>	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
<b>X</b>	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
<b>X</b>	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
<b>X</b>	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
<b>NA</b>	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
NA	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
NA	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
NA	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

# 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

## A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	*Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	1,244	3	3	2	1	NA	NA
Income >30% but <=50% of AMI	783	2	2	2	1	NA	NA
Income >50% but <80% of AMI	771	2	2	2	1	NA	NA
Elderly	886	2	2	2	1	NA	NA
Families with Disabilities	NA	NA	NA	2	1	NA	NA
Race/Ethnicity (White)	3,667	NA	NA	2	1	NA	NA
Race/Ethnicity (Black)	735	NA	NA	2	1	NA	NA
Race/Ethnicity (Hispanic)	20	NA	NA	2	1	NA	NA

\*Dyer County Jurisdictional Area

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s  
Indicate year: **2000 (THDA)**
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- American Housing Survey data  
Indicate year:
- Other housing market study  
Indicate year:
- Other sources: (list and indicate year of information)

## B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

<b>Housing Needs of Families on the Waiting List</b>			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	<b>33</b>		<b>83</b>
Extremely low income <=30% AMI	<b>24</b>	<b>73</b>	
Very low income (>30% but <=50% AMI)	<b>5</b>	<b>15</b>	
Low income (>50% but <80% AMI)	<b>4</b>	<b>12</b>	
Families with children	<b>13</b>	<b>39</b>	
Elderly families	<b>6</b>	<b>18</b>	
Families with Disabilities	<b>10</b>	<b>30</b>	
Race/ethnicity/White	<b>30</b>	<b>91</b>	
Race/ethnicity/Black	<b>3</b>	<b>9</b>	
Race/ethnicity/Other	<b>0</b>	<b>0</b>	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	<b>3</b>	<b>9</b>	<b>4</b>
2 BR	<b>15</b>	<b>45</b>	<b>14</b>
3 BR	<b>13</b>	<b>39</b>	<b>16</b>
4 BR	<b>2</b>	<b>6</b>	<b>46</b>
5 BR	<b>0</b>	<b>0</b>	<b>3</b>
5+ BR	<b>NA</b>	<b>NA</b>	<b>NA</b>
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### **(1) Strategies**

**Need: Shortage of affordable housing for all eligible populations**

#### **Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

#### **Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

**Need: Specific Family Types: Families at or below 30% of median**

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

**Need: Specific Family Types: Families at or below 50% of median**

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

## **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2001 grants)</b>		
a) Public Housing Operating Fund	<b>\$104,443.00</b>	<b>Operations</b>
b) Public Housing Capital Fund	<b>\$313,962.00</b>	<b>Capital Improvements</b>
c) HOPE VI Revitalization	<b>\$0.00</b>	
d) HOPE VI Demolition	<b>\$0.00</b>	
e) Annual Contributions for Section 8 Tenant-Based Assistance	<b>\$0.00</b>	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	<b>\$35,625.00</b>	<b>Drug Elimination/Security</b>
g) Resident Opportunity and Self-Sufficiency Grants	<b>\$0.00</b>	
h) Community Development Block Grant	<b>\$0.00</b>	
i) HOME	<b>\$0.00</b>	
Other Federal Grants (list below)	<b>\$0.00</b>	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
1999 PHDEP	<b>\$8,535.00</b>	<b>Drug Elimination/Security</b>
2000 PHDEP	<b>\$32,074.00</b>	<b>Drug Elimination/Security</b>
1999 CIAP	<b>\$2,069.00</b>	<b>Capital Improvements</b>
2000 CFP	<b>\$300,882.00</b>	<b>Capital Improvements</b>
<b>3. Public Housing Dwelling Rental Income</b>		
	<b>\$251,070.00</b>	<b>Operations</b>
<b>4. Other income (list below)</b>		
Excess Utilities	<b>\$7,510.00</b>	<b>Operations</b>
Investment Income	<b>\$12,156.00</b>	<b>Operations</b>
<b>5. Non-federal sources (list below)</b>		
<b>Total resources</b>	<b>\$1,068,326.00</b>	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

##### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe) **When they apply**

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe) **Credit references and character references**

c.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

e.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

##### **(2)Waiting List Organization**

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- PHA main administrative office
- PHA development site management office
- Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

1. How many site-based waiting lists will the PHA operate in the coming year?
2.  Yes  No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?
3.  Yes  No: May families be on more than one list simultaneously  
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
  - PHA main administrative office
  - All PHA development management offices
  - Management offices at developments with site-based waiting lists
  - At the development to which they would like to apply
  - Other (list below)

**(3) Assignment**

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
  - One
  - Two
  - Three or More
- b.  Yes  No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

- a. Income targeting:
  - Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- Emergencies
- Overhoused
- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1.  Yes  No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

**1 Date and Time**

Former Federal preferences:

- 1** Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
Victims of domestic violence
- 3** Substandard housing
- 3** Homelessness
- 4** High rent burden

Other preferences (select all that apply)

- 1** Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- 2** Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Occupancy**

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA’s Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list)

b. How often must residents notify the PHA of changes in family composition?  
(select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

**(6) Deconcentration and Income Mixing**

a.  Yes  No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b.  Yes  No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- Adoption of site-based waiting lists  
If selected, list targeted developments below:
- Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments  
If selected, list targeted developments below:
- Employing new admission preferences at targeted developments  
If selected, list targeted developments below:
- Other (list policies and developments targeted below)

d.  Yes  No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing

Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

Not applicable: results of analysis did not indicate a need for such efforts

List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

Not applicable: results of analysis did not indicate a need for such efforts

List (any applicable) developments below:

## **B. Section 8 Not Applicable**

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### **(1) Eligibility**

a. What is the extent of screening conducted by the PHA? (select all that apply)

Criminal or drug-related activity only to the extent required by law or regulation

Criminal and drug-related activity, more extensively than required by law or regulation

More general screening than criminal and drug-related activity (list factors below)

Other (list below)

b.  Yes  No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

c.  Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

d.  Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

e. Indicate what kinds of information you share with prospective landlords? (select all that apply)

Criminal or drug-related activity

Other (describe below)

**(2) Waiting List Organization**

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- PHA main administrative office
- Other (list below)

**(3) Search Time**

a.  Yes  No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

**(4) Admissions Preferences**

a. Income targeting

- Yes  No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1.  Yes  No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- Residents who live and/or work in your jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
- Date and time of application
  - Drawing (lottery) or other random choice technique
5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)
- This preference has previously been reviewed and approved by HUD
  - The PHA requests approval for this preference through this PHA Plan
6. Relationship of preferences to income targeting requirements: (select one)
- The PHA applies preferences within income tiers
  - Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Special Purpose Section 8 Assistance Programs**

- a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
- The Section 8 Administrative Plan
  - Briefing sessions and written materials
  - Other (list below)
- b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
- Through published notices
  - Other (list below)

## **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

#### **(1) Income Based Rent Policies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0  
 \$1-\$25  
 \$26-\$50 (**\$50.00**)

2.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

c. Rents set at less than 30% than adjusted income

1.  Yes  No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below: **Not Applicable**
- d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply) **Not Applicable**
- For the earned income of a previously unemployed household member
  - For increases in earned income
  - Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:
  
  - Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:
  
  - For household heads
  - For other family members
  - For transportation expenses
  - For the non-reimbursed medical expenses of non-disabled or non-elderly families
  - Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments
- Yes but only for some developments
- No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95<sup>th</sup> percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \_\_\_\_\_
- Other (list below)

g.  Yes  No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

**(2) Flat Rents Not Applicable**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper
- Survey of similar unassisted units in the neighborhood
- Other (list/describe below)

## B. Section 8 Tenant-Based Assistance **Not Applicable**

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### **(1) Payment Standards**

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
- 100% of FMR
- Above 100% but at or below 110% of FMR
- Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- The PHA has chosen to serve additional families by lowering the payment standard
- Reflects market or submarket
- Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- Reflects market or submarket
- To increase housing options for families
- Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually
- Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
- Rent burdens of assisted families
- Other (list below)

**(2) Minimum Rent**

a. What amount best reflects the PHA’s minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50

b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

**5. Operations and Management      Not Required**

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

**A. PHA Management Structure**

Describe the PHA’s management structure and organization.

(select one)

- An organization chart showing the PHA’s management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:

**B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

### 6. PHA Grievance Procedures Not Required

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

#### A. Public Housing

1.  Yes  No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)
- PHA main administrative office
  - PHA development management offices
  - Other (list below)

#### B. Section 8 Tenant-Based Assistance

1.  Yes  No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)
- PHA main administrative office
  - Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### **A. Capital Fund Activities**

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### **(1) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) **(See Table Library)**

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

#### **(2) Optional 5-Year Action Plan**

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a.  Yes  No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name) **(See Table Library)**

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

## B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- Yes  No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)

- Revitalization Plan under development
- Revitalization Plan submitted, pending approval
- Revitalization Plan approved
- Activities pursuant to an approved Revitalization Plan underway

- Yes  No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
- If yes, list development name/s below:

- Yes  No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
- If yes, list developments or activities below:

- Yes  No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
- If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

1.  Yes  No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

### 2. Activity Description

- Yes  No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected: 6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

**9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1.  Yes  No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

<b>Designation of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one)	Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission:	(DD/MM/YY)
5. If approved, will this designation constitute a (select one)	<input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:	
7. Coverage of action (select one)	<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## **10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

### **A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act**

1.  Yes  No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

#### 2. Activity Description

- Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

<b>Conversion of Public Housing Activity Description</b>	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

**B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

**C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

**11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1.  Yes  No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- Yes  No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>	
1a. Development name:	
1b. Development (project) number:	
2. Federal Program authority:	<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one)	<input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one)	<input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

**B. Section 8 Tenant Based Assistance      Not Applicable**

1.  Yes  No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

Yes  No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
- 26 - 50 participants
- 51 to 100 participants
- more than 100 participants

b. PHA-established eligibility criteria

- Yes  No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?

If yes, list criteria below:

## **12. PHA Community Service and Self-sufficiency Programs**

### **Not Required**

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

- Yes  No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)



**(2) Family Self Sufficiency program/s**

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2001 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

- b.  Yes  No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  
If no, list steps the PHA will take below:

**C. Welfare Benefit Reductions**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
  - Informing residents of new policy on admission and reexamination
  - Actively notifying residents of new policy at times in addition to admission and reexamination.
  - Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
  - Establishing a protocol for exchange of information with all appropriate TANF agencies
  - Other: (list below)

**D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937**

### **13. PHA Safety and Crime Prevention Measures (See Attachment C)**

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

#### **A. Need for measures to ensure the safety of public housing residents**

1. Describe the need for measures to ensure the safety of public housing residents

(select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

**B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year**

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors
- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)

2. Which developments are most affected? (list below)

**C. Coordination between PHA and the police**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

2. Which developments are most affected? (list below)

**D. Additional information as required by PHDEP/PHDEP Plan**

PHAs eligible for FY 2001 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes  No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?
- Yes  No: This PHDEP Plan is an Attachment. (Attachment Filename: **C**)

**14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

## **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

## **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1.  Yes  No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2.  Yes  No: Was the most recent fiscal audit submitted to HUD?
3.  Yes  No: Were there any findings as the result of that audit?
4.  Yes  No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? **Not Applicable**
5.  Yes  No: Have responses to any unresolved findings been submitted to HUD? **Not Applicable**  
If not, when are they due (state below)?

## **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

### **Not Required**

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1.  Yes  No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
  - Not applicable
  - Private management
  - Development-based accounting
  - Comprehensive stock assessment
  - Other: (list below)
3.  Yes  No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board Recommendations**

1.  Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)
- Attached at Attachment (File name)
- Provided below:
- 1. Potholes in street at Obion (Streets are City of Obion obligation)**
  - 2. Would like to put A/C ahead of other improvements**
  - 3. Would like a professional tutor for the after school program**
  - 4. Would like maintenance to install window A/C units until the central systems are installed.**
3. In what manner did the PHA address those comments? (select all that apply)
- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The PHA changed portions of the PHA Plan in response to comments  
List changes below:
- Other: (list below)  
**The Director discussed the comments with the Resident Advisory Board. After explaining that the streets belonged to the city of Obion, it was agreed that the housing authority had no control over that issue. The A/C is in the 1<sup>st</sup> and 2<sup>nd</sup> year of the plan. Residents now understand that is highest priority available. NHA will advertise tutor position.**

### **B. Description of Election process for Residents on the PHA Board**

1.  Yes  No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2.  Yes  No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

### 3. Description of Resident Election Process

#### a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations
- Candidates could be nominated by any adult recipient of PHA assistance
- Self-nomination: Candidates registered with the PHA and requested a place on ballot
- Other: (describe)

#### b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

#### c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

### C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here) **State of Tennessee, Tennessee Housing Development Agency**

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)  
**Not Applicable**
- Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)  
**Not Applicable**

**D. Other Information Required by HUD**

Use this section to provide any additional information requested by HUD.

## Attachments

Use this section to provide any additional attachments referenced in the Plans.

### **ATTACHMENT A: DECONCENTRATION POLICY FOR THE NEWBERN HOUSING AUTHORITY**

#### 1. DECONCENTRATION POLICY

- a. The objective of the Deconcentration Policy for the Newbern Housing Authority (NHA) is to achieve the goal that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development or census tract. The NHA will take actions as necessary to achieve the goal that no individual development has a concentration of higher income or lower income families. To ensure that the NHA does not concentrate families with higher or lower income levels in any one development, the NHA will track the status of family income, by development, on a monthly basis utilizing income reports generated by the NHA's computer system.
- b. The NHA will periodically compare the relative incomes of its developments to the relative incomes of the census tracts in which they are located. Where significant differences are identified, income targeting will be applied.

#### 2. INCOME TARGETING

- a. To accomplish the deconcentration goals, the Newbern Housing Authority will take the following actions:
  - 1) At the beginning of each fiscal year the Newbern Housing Authority will establish a numerical goal for admission of families whose incomes are at or below 30 percent of the area median income. The target annual goal will be calculated by taking 40 percent of the total number of move-ins from the previous NHA fiscal year.
  - 2) The NHA will limit the number of admissions to ensure that not less than 40 percent of admissions are families with incomes at or below 30 percent of the area median income.
  - 3) The NHA will skip families on the waiting list or skip developments to accomplish these goals.
- b. The Newbern Housing Authority will not hold units vacant to accomplish these goals.

## **ATTACHMENT B - DEFINITION OF SUBSTANTIAL DEVIATION**

PHA's definition of "Significant Amendment or Substantial Deviation" from its 5-Year and Annual Plans:

1. Changes to rent or admissions policies or organization of the waiting list.
2. Addition of non-emergency work, items (items not included in the Annual Statement or 5-Year Action Plan) or a change in the use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition or disposition, designation, or homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements.

# ATTACHMENT C: Public Housing Drug Elimination Program Plan

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

**Annual PHDEP Plan Table of Contents:**

1. **General Information/History**
2. **PHDEP Plan Goals/Budget**
3. **Milestones**
4. **Certifications**

**Section 1: General Information/History**

**A. Amount of PHDEP Grant \$35,625.00**

**B. Eligibility type (Indicate with an "x") N1        N2        R   X**

**C. FFY in which funding is requested 2001**

**D. Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

The Newbern Housing Authority PHDEP Plan is a continuation of the FY 1999 PHDEP activities. The plan includes a drug prevention program designed to reduce/eliminate drug abuse through education, recreation, employment, PHA resident involvement, and community involvement. The PHDEP will be administered by a part-time Drug Elimination Coordinator, as well as overall administrative assistance from the PHA Executive Director and staff. The target population will be PHA school age children and parents. Specific activities include; after-school tutoring; drug awareness program and monthly newsletter; referral for basic education to Newbern Technology Center and the Obion County Board of Education, parenting classes; after school recreation; adult exercise/recreation classes; supervised sports programs and summer recreation activities; job readiness and awareness classes; resident survey; neighborhood watch meetings and other resident organization fund-raising and planned activities.

**E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

<b>PHDEP Target Areas Name of development(s) or site)</b>	<b>Total # of Units within the PHDEP Target Area(s)</b>	<b>Total Population to be Served within the PHDEP Target Area(s)</b>
Everett Apartments (TN075-1)	55	114
Flower Valley Apts. (TN075-3)	60	105
Spring Valley Apts. (TN075-6)	30	77

**F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an "x" to indicate the length of program by # of months. For "Other", identify the # of months).

6 Months \_\_\_\_\_ 12 Months  X  18 Months \_\_\_\_\_ 24 Months \_\_\_ Other \_\_\_\_\_

**G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an "x" by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. For grant extensions received, place "GE" in column or "W" for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Anticipated Completion Date
FY 1995	NA				
FY 1996	\$72,500	TN43DEP0750196	\$0.00	6 mos.	Completed
FY 1997	NA				
FY1998	NA				
FY 1999	\$31,891.00	TN43DEP0750199	\$8,534.95	NA	6/01
FY 2000	\$33,237.00	N43DEP0750100	\$32,073.84		

**Section 2: PHDEP Plan Goals and Budget**

**A. PHDEP Plan Summary**

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

This PHDEP Plan will use education, recreation, employment and PHA resident involvement to address the goal of eliminating PHA resident drug and alcohol abuse. The target population will be PHA school-age children and their parents. The objective of the program is to involve at least 45 percent of the PHA residents in planned PHDP activities.

The Program Coordinator and the Drug Elimination Coordinator, along with the part-time tutors and part-time recreation leader and PHA staff, will coordinate efforts with the PHA Resident Organization and various local agencies and entities including; The Newbern Police Department (mini-precinct located within the PHA); private industry (donations for scheduled programs fund-raising activities; churches (volunteer programs and activities); Northwest Community Health Agency (drug awareness sessions); Adolescent Pregnancy activities; Northwest Safeline Domestic Violence (prevention and intervention); Dyer County Literacy Program (adult continuing education classes); and the Obion County Board of Education (adult continuing education classes).

The Newbern Housing Authority will implement a program evaluation process for monitoring and evaluating all grant-funded activities. Program staff will collect quantitative evidence of the number of persons and units served, including youth served, types of services provided, and the impact on the PHA persons served. An evaluation report will be prepared and a resident -survey will be conducted which will indicate the effectiveness of the activities and grant funds.

**B. PHDEP Budget Summary**

Enter the total amount of PHDEP funding allocated to each line item.

<b>FY <u>01</u> PHDEP Budget Summary</b>	
<b>Budget Line Item</b>	<b>Total Funding</b>
9110 - Reimbursement of Law Enforcement	\$0.00
9120 - Security Personnel	\$0.00
9130 - Employment of Investigators	\$0.00
9140 - Voluntary Tenant Patrol	\$0.00
9150 - Physical Improvements	\$0.00
9160 - Drug Prevention	\$35,625.00
9170 - Drug Intervention	\$0.00
9180 - Drug Treatment	\$0.00
9190 - Other Program Costs	\$0.00
<b>TOTAL PHDEP FUNDING</b>	<b>\$35,625.00</b>

### C. PHDEP Plan Goals and Activities

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

<b>9160 - Drug Prevention</b>					<b>Total PHDEP Funding: \$35,625.00</b>		
Goal(s) - Deter PHA residents from drug and alcohol abuse							
Objectives - Involve at least 45% of residents in planned activities							
1. Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
2. Drug Elimination Coordinator (part-time) Fringe Benefits	135	Total PHA Population	1/2002	1/2003	\$11,140	0	Resident Survey results; police calls/crime data reports
3. Resident Coordinator (part-time) Fringe Benefits	135	Total PHA Population	1/2002	1/2003	\$9,293	0	Student report cards; resident survey
4. Tutors (part-time)	53	K-12 <sup>th</sup> grade	1/2002	1/2003	\$6,000	0	Student report cards
5. Recreation Leader (part-time)	53	All youth to 12 <sup>th</sup> grade	6/2002	8/2003	\$2,000	0	Resident survey results
6. Travel	135	Total PHA Population	1/2002	1/2003	\$1,700	0	NA
7. Supplies (office and recreational/educational)	135	Total PHA Population	1/2002	1/2003	\$4,992	0	NA
8. Audit	135	Total PHA Population	1/2002	1/2003	\$250	0	NA
9. Accounting	135	Total PHA Population	1/2002	1/2003	\$250	0	NA
10. In-Kind Services form various local agencies (Adult continuing leadership developments and parenting and safety training)	135	Total PHA Population	1/2002	1/2003	\$0	\$9,000 (In-Kind sources)	Resident Survey results
11. Program income from fund raising	135	Total PHA Population	1/2002	1/2003	\$0	\$2,500 (In-Kind sources)	Resident Survey results

**Section 3: Expenditure/Obligation Milestones**

Indicate by Budget Line Item and the Proposed Activity (based on the information contained in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25% of the total grant award) and obligated (at least 50% of the total grant award) within 12 months of grant execution.

<b>Budget Line Item #</b>	<b>25% Expenditure of Total Grant Funds By Activity #</b>	<b>Total PHDEP Funding Expended (sum of the activities)</b>	<b>50% Obligation of Total Grant Funds by Activity #</b>	<b>Total PHDEP Funding Obligated (sum of the activities)</b>
<i>e.g Budget Line Item # 9120</i>	<i>Activities 1, 3</i>		<i>Activity 2</i>	
9110				
9120				
9130				
9140				
9150				
9160	Activities 1-9		Activities 1-9	\$35,625.00
9170				
9180				
9190				
<b>TOTAL</b>				\$35,625.00

**Section 4: Certifications**

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the “PHA Certifications of Compliance with the PHA Plan and Related Regulations.”

## Attachment D – Resident Advisory Board

Charlotte Permenter  
127 Jones St.  
Newbern, TN 38059

R. Inez Everett  
412A Rose Ct.  
Newbern, TN 38059

Vicky Pirtle  
705 Maple Dr.  
Newbern, TN 38059

Susan Reeves  
812 Spring Valley Dr.  
Obion, TN 38240

## ATTACHMENT E – RESIDENT MEMBERSHIP ON THE PHA

The PHA meets the exception criteria for the requirements of a resident board member.

## ATTACHMENT F – PROGRESS IN MEETING MISSION AND GOALS

1. **Goal – Expand the supply of assisted housing:** The NHA has been in contact with the surrounding communities to locate possible sites for new development. The NHA plans to apply for LITHC funding during the 2001 Plan year.
2. **Goal – Improvement the quality of assisted housing:** The NHA continues to work on improving all area of public housing management. Our physical score improved from 79.16 last year to 85.66 this year.

The NHA is continually upgrading its public housing units. With the inception of the Capital Fund Program, we are now able to better plan and implement physical improvements.

3. **Goal – Provide an improved living environment:** The NHA continues to implement the ongoing safety and security activities included in our Drug Elimination Program.
4. **Goal – Promote self-sufficiency and asset development of families and individuals:** We give referenced in admission to working families. This preference has helped us increase the number of employed families in our developments.

## ATTACHMENT G – RESIDENT POLICE OFFICER

We have currently one police officer residing in Development No. TN075-001, in unit #740. We have this officer on-site for the purpose of improving safety and security in this development.

## **ATTACHMENT H – IMPLEMENTATION OF PUBLIC HOUSING RESIDENT COMMUNITY SERVICE PROGRAM**

All families will be given a written description of the service requirement, and of the process for claiming status as an exempt person. This will include the NHAs determination identifying the family members who are subject to the service requirement, and the family members who are exempt persons. The NHA will provide a form to any family members requesting exemption from the service and will advise the member what documentation is required to support the exemption. The NHA will approve or deny the request for exemption within 30 days from receipt of a request that includes required documentation. A family member may request an exempt status at anytime.

The NHA will provide a listing of qualifying community service or self-sufficiency activities that will meet this requirement. The NHA may update this list at anytime. Each nonexempt family member will be given a community service time sheet to track the monthly volunteer hours. A supervisor must sign and date each period of work. If qualifying activities are administered by an organization other than the NHA, a family member who is required to fulfill a service requirement must provide signed community service time sheets certifying to the NHA by such other organization that the family member has performed such qualifying activities.

The NHA must review family compliance with service requirements, and must verify such compliance annually at least thirty days before the end of the twelve-month lease term. The NHA must retain reasonable documentation of service requirement performance in tenant files.

If the NHA determines that there is a family member who is required to fulfill a service requirement, but who has violated this family obligation (noncompliant resident), the NHA must notify the tenant of this determination.

If the tenant or another family member has violated the service requirement, the NHA may not renew the lease upon expiration of the term with exceptions.

In implementing the service requirement, the NHA may not substitute community service or self-sufficiency activities performed by residents for work ordinarily performed by NHA employees, or replace a job at any location where residents perform activities to satisfy the service requirement.

## ATTACHMENT I – PET POLICY

In accordance with HUD regulations, reasonable requirements for Public Housing Authority residents to own pets are established in this Pet Policy; however, PHAs may not apply or enforce this policy against service animals that assist persons with disabilities. (This exclusion applies to service animals that reside in public housing and service animals that visit the developments.)

Each family may own or have one household pet in the dwelling unit occupied by the family listed below and reflected in this Lease Addendum .

Lessee: \_\_\_\_\_ Unit/Account No. \_\_\_\_\_

Co Lessee \_\_\_\_\_

Non-refundable pet fee: \_\_\_\_\_

Name and Description of Pet \_\_\_\_\_

I, \_\_\_\_\_, and all household members agree to the following rules and statements made in this Lease Addendum as set by the **Newbern Housing Authority** (PHA). When the PHA refers to pet, that means that **only domesticated dogs**, cats, birds and fish are included. Snakes or any reptiles are prohibited. This Lease Addendum reflects the responsibilities of the PHA and the resident.

Only one pet is allowed per family. I also understand that my pet cannot be larger than:

**Dog: 15 inches tall when full grown – Cat: 10 inches tall when full grown.**

***I agree to pay \$100.00 as a non-refundable fee to cover the reasonable operating costs to the project relating to the presence of my pet ( excluding birds and fish). This fee may be used by the PHA for damages caused to units (filters, extermination, wall/floor damage, etc.)***

I understand that these deposits are paid in addition to my required Security Deposit.

### WHAT I MUST DO:

1. I must provide the PHA with all verifications of my pet's inoculations, neutering and spayed, before I can have my pet and I must bring verification of inoculations each year at the annual reexamination time.
2. I must make sure my pet receives the medical care necessary for my pet to maintain good health.
3. I must have my dog on a leash any time it is out of my own apartment. I must have my cat on a leash any time it is out of my own apartment.
4. I must exercise my pet only in the yard of the unit assigned to me.
5. I am solely responsible for cleaning up pet droppings, if any, outside the unit and on facility grounds. Droppings must be disposed of by being placed in a sack and then placed in a refuse container outside the building.
6. I must accept complete responsibility for any damages to property caused by my pet. This includes other resident's property as well as all PHA property.
7. I will hold harmless the PHA for any injuries or damages caused by my pet.

8. I must accept complete responsibility for the behavior and conduct of my pet at all times.
9. In the event of my pet's death, I must dispose of the remains according to local health regulations, but NOT on PHA property
10. I must notify the PHA, when requesting maintenance for my unit, that I have a pet and I will be present when the PHA responds to the request for maintenance or the pet will be restrained in order for maintenance to work in a safe environment.
11. I will not own or possess a "vicious" dog. A "vicious dog" means any dog which, without provocation, attacks or bites, or has attacked or bitten a human being or domestic animal; or any dog owned or harbored primarily or in part for the purpose of dog fighting.
12. I will not tie my pet to any utility (including, gas meters, electrical devices, water faucets, etc.)

WHAT THE PHA WILL NOT DO:

1. The PHA will not be responsible for my pet at any time regardless of the circumstances
2. The PHA will not be responsible for any damages or injuries caused by my pet.
3. The PHA will not permit my pet to become a nuisance to management or other residents.

WHAT THE PHA WILL DO:

1. When it is necessary for the PHA to spray for fleas, ticks or other insects caused by my pet other than at the regular appointed times, the PHA will charge me for the cost of spraying.
2. The PHA will dispose of my pet in any way necessary, if at any time I leave my pet unattended or abandoned.
3. The PHA will take appropriate actions if my pet is causing the living or working conditions in my building to be unsafe, unsanitary, or indecent.
4. The PHA will give me a Notice to Vacate and will end my Lease if there are repeated or continuous problems with my pet.

DO I UNDERSTAND THIS PET POLICY?

By signing this Pet Policy, I am saying that the PHA has gone over this policy with me. I am also saying that I understand all of it. I understand that this is an agreement between me the PHA and that it is a legally binding contract between me and the PHA.

Date: \_\_\_\_\_

\_\_\_\_\_  
Lessee

Public Housing Agency

\_\_\_\_\_  
By \_\_\_\_\_  
Executive Director

PET APPLICATION

Resident's Name \_\_\_\_\_ Unit/Apt. No \_\_\_\_\_

Type of pet \_\_\_\_\_ Age of pet \_\_\_\_\_

Name of pet \_\_\_\_\_ Weight of pet \_\_\_\_\_

\*\*\*\*\*

How long have you owned this pet? \_\_\_\_\_

Has your pet lived in rental housing before, if so where? \_\_\_\_\_

Date of last vaccinations \_\_\_\_\_ License Tag # \_\_\_\_\_

Has your pet been spayed or neutered? ( ) yes ( ) no

If your pet is a cat, has it been declawed? ( ) yes ( ) no

Name three persons responsible for your pet in case of emergency: \_\_\_\_\_

\_\_\_\_\_

Name & telephone number of Veterinarian: \_\_\_\_\_

Exterminator – Contact Person \_\_\_\_\_

Name of Insurance Company that has my liability insurance: \_\_\_\_\_

\_\_\_\_\_

I have furnished the PHA with a Veterinarian's Statement certifying that my pet has been ( ) spayed ( ) neutered and has received all vaccines required by law, and is in good health with no communicable diseases. ( ) yes ( ) no

If my pet is a service animal that assists with my disability, I have furnished a doctor's statement indicating that I am disabled and require assistance of the animal . ( ) yes ( ) no

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Lessee

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>					
<b>PHA Name:</b>  <i>Newbern Housing Authority</i>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN43P07550101</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2001</b>
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$6,225.00			
3	1408 Management Improvements Soft Costs	\$0.00			
	Management Improvements Hard Costs	\$0.00			
4	1410 Administration	\$235.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$45,817.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$8,845.00			
10	1460 Dwelling Structures	\$240,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	\$8,850.00			
12	1470 Nondwelling Structures	\$3,990.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
18	1499 Development Activities	\$0.00			
19	1502 Contingency	\$0.00			
	Amount of Annual Grant: (sum of lines.....)	\$313,962.00			
	Amount of line XX Related to LBP Activities	\$0.00			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <b>Newbern Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P07550101</b> Replacement Housing Factor Grant No:			Federal FY of Grant: <b>2001</b>
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of line XX Related to Section 504 compliance	\$0.00			
	Amount of line XX Related to Security –Soft Costs	\$0.00			
	Amount of Line XX related to Security-- Hard Costs	\$0.00			
	Amount of line XX Related to Energy Conservation Measures	\$0.00			
	Collateralization Expenses or Debt Service	\$0.00			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b><i>Newbern Housing Authority</i></b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P07550101</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2001</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost	Status of Work
PHA-Wide	Operations		1406	1		\$6,225.00		
PHA-Wide	Advertising		1410	1		\$235.00		
PHA-Wide	A/E Design Fee		1430	1		\$19,198.00		
PHA-Wide	A/E Inspection Fee		1430	1		\$12,119.00		
PHA-Wide	Clerk of the Works		1430	1		\$12,000.00		
PHA-Wide	Planning Fee		1430	1		\$2,500.00		
TN075-001	Replace parking bays		1450	4		\$8,000.00		
TN075-006	Clear drainage ditch		1450	1		\$845.00		
TN075-003	Install new central HVAC		1460	60		\$240,000.00		
TN075-001	Replace refrigerators		1465.1	0		\$0.00		
TN075-001	Replace ranges		1465.1	0		\$0.00		
TN075-003	Replace refrigerators		1465.1	15		\$4,950.00		
TN075-003	Replace ranges		1465.1	15		\$3,900.00		
TN075-006	Replace refrigerators		1465.1	0		\$0.00		
TN075-006	Replace ranges		1465.1	0		\$0.00		
TN075-001	Encapsulate Fascia		1470	210 lf.		\$1,260.00		
TN075-001	Remove and replace soffits		1470	210 sf.		\$1,470.00		
TN075-006	Encapsulate Fascia		1470	210 lf.		\$1,260.00		



**Capital Fund Program Five-Year Action Plan**

**Part I: Summary**

PHA Name: <b><i>Newbern Housing Authority</i></b>				<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: <b>2002</b> PHA FY: <b>2002</b>	Work Statement for Year 3 FFY Grant: <b>2003</b> PHA FY: <b>2003</b>	Work Statement for Year 4 FFY Grant: <b>2004</b> PHA FY: <b>2004</b>	Work Statement for Year 5 FFY Grant: <b>2005</b> PHA FY: <b>2005</b>
	Annual Statement				
PHA-Wide		\$90,892.00	\$89,887.00	\$55,562.00	\$70,812.00
TN075-001		\$31,820.00	\$66,125.00	\$258,400.00	\$0.00
TN075-003		\$33,750.00	\$78,300.00	\$0.00	\$18,000.00
TN075-006		\$157,500.00	\$79,650.00	\$0.00	\$225,150.00
Total CFP Funds (Est.)		\$313,962.00	\$313,962.00	\$313,962.00	\$313,962.00
Total Replacement Housing Factor Funds					

**Capital Fund Program Five-Year Action Plan**

**Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: <b>2002</b> PHA FY: <b>2002</b>			Activities for Year: <u>3</u> FFY Grant: <b>2003</b> PHA FY: <b>2003</b>		
	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
<b>See</b>	PHA-Wide	Operations	\$8,114.00	PHA-Wide	Operations	\$7,053.00
<b>Annual</b>	PHA-Wide	Computer Software	\$7,500.00	PHA-Wide	Advertising	\$500.00
<b>Statement</b>	PHA-Wide	Advertising	\$500.00	PHA-Wide	Fees and Costs	\$54,834.00
	PHA-Wide	Fees and Costs	\$47,078.00	PHA-Wide	Dwelling Equipment	\$0.00
	PHA-Wide	Dwelling Equipment	\$17,700.00	PHA-Wide	New maintenance truck	\$25,000.00
	PHA-Wide	Computer Hardware	\$10,000.00	PHA-Wide	Relocation	\$2,500.00
	TN075-001	Parking Bays	\$14,000.00	TN075-001	Parking Bays	\$38,000.00
	TN075-001	New shingles	\$17,820.00	TN075-001	Replace floor tile	\$10,625.00
	TN075-003	New shingles	\$33,750.00	TN075-001	Replace carpet	\$17,500.00
	TN075-006	New central HVAC	\$126,000.00	TN075-003	Replace water heaters	\$0.00
	TN075-006	Security screen doors	\$18,000.00	TN075-003	Rangehoods	\$12,000.00
	TN075-006	New gas water heaters	\$13,500.00	TN075-003	Install backsplashes	\$4,800.00
				TN075-003	Replace interior doors/hardware	\$40,500.00
				TN075-003	Replace kitchen sinks	\$12,000.00
				TN075-003	Replace faucets and drain lines	\$9,000.00
				TN075-006	Shingles	\$54,000.00
				TN075-006	Deadbolt locks	\$13,650.00
				TN075-006	Floor rubber base	\$12,000.00
<b>Total CFP Estimated Cost</b>			<b>\$313,962.00</b>			<b>\$313,962.00</b>

**Capital Fund Program Five-Year Action Plan**

**Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year : <u>4</u> FFY Grant: <b>2004</b> PHA FY: <b>2004</b>			Activities for Year: <u>5</u> FFY Grant: <b>2005</b> PHA FY: <b>2005</b>		
	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
<b>See</b>	PHA-Wide	Operations	\$6,362.00	PHA-Wide	Operations	\$15,542.00
<b>Annual</b>	PHA-Wide	Advertising	\$500.00	PHA-Wide	Advertising	\$500.00
<b>Statement</b>	PHA-Wide	Fees and Costs	\$43,700.00	PHA-Wide	Fees and Costs	\$45,770.00
	PHA-Wide	Dwelling Equipment	\$0.00	PHA-Wide	Dwelling Equipment	\$0.00
	PHA-Wide	Computer Hardware	\$5,000.00	PHA-Wide	Relocation	\$9,000.00
	PHA-Wide	New vehicle	\$0.00	TN075-003	Screen doors	\$0.00
	PHA-Wide	Relocation	\$0.00	TN075-003	Deadbolts and weatherstripping	\$18,000.00
	TN075-001	Parking Bays	\$54,000.00	TN075-006	Bathtubs	\$21,000.00
	TN075-001	New HVAC	\$4,400.00	TN075-006	Relocate drain and piping	\$12,000.00
	TN075-001	Community Building	\$200,000.00	TN075-006	Tub/shower valve	\$9,000.00
				TN075-006	Tub surround	\$15,000.00
				TN075-006	Bath accessories	\$4,500.00
				TN075-006	Water closets	\$7,500.00
				TN075-006	Lavatories	\$4,500.00
				TN075-006	Faucets, stops and drains	\$4,500.00
				TN075-006	Bathroom floors	\$14,250.00
				TN075-006	Painting	\$54,000.00
				TN075-006	Rangehoods	\$6,000.00
				TN075-006	Backsplashes	\$2,400.00
				TN075-006	Kitchen cabinets	\$60,000.00
				TN075-006	Kitchen sinks	\$6,000.00
				TN075-006	Kitchen faucets, stops and drains	\$4,500.00
<b>Total CFP Estimated Cost</b>			<b>\$313,962.00</b>			<b>\$313,962.00</b>

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary**

<b>PHA Name:</b> <i>Newbern Housing Authority</i>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN43P07550100</b> Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b>  <b>2000</b>
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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 No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$130.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements Soft Costs	\$7,500.00	\$0.00	\$0.00	\$0.00
	Management Improvements Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$51,332.00	\$0.00	\$34,832.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$119,300.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$92,175.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$27,300.00	\$0.00	\$2,040.00	\$2,040.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$10,000.00	\$0.00	\$4,815.00	\$4,815.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary</b>						
<b>PHA Name:</b> <b><i>Newbern Housing Authority</i></b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN43P07550100</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b>  <b>2000</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )						
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost		
	Amount of Annual Grant: (sum of lines.....)	\$307,737.00	\$0.00	\$0.00	\$0.00	
	Amount of line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00	
	Amount of line XX Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00	
	Amount of line XX Related to Security –Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00	
	Amount of Line XX related to Security-- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00	
	Amount of line XX Related to Energy Conservation Measures	\$17,500.00	\$0.00	\$0.00	\$0.00	
	Collateralization Expenses or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b><i>Newbern Housing Authority</i></b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P07550100</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2000</b>			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Transfer to Operating		1406		\$130.00		\$0.00	\$0.00	Pending
PHA-Wide	Purchase Computer Software		1408		\$7,500.00		\$0.00	\$0.00	Pending
PHA-Wide	A/E Design Fee		1430		\$19,965.00		\$19,624.00	\$0.00	Contracted
PHA-Wide	A/E Inspection Fee		1430		\$14,867.00		\$12,090.00	\$0.00	Contracted
PHA-Wide	Clerk of the Works		1430		\$12,000.00		\$0.00	\$0.00	Pending
PHA-Wide	Planning Fee		1430		\$4,500.00		\$2,500.00	\$0.00	Contracted
PHA-Wide	Purchase Computer Hardware		1475		\$10,000.00		\$4,815.00	\$4,815.00	Completed
TN075-001	Trim Large Trees		1450	25	\$12,500.00		\$0.00	\$0.00	Pending
TN075-001	Clear and Grub behind buildings		1450	1 LS	\$28,000.00		\$0.00	\$0.00	Pending
TN075-001	Build Driveway and 6 Parking Spaces		1450	1 LS	\$54,000.00		\$0.00	\$0.00	Pending
TN075-001	Construct Parking Bays		1450	3	\$7,500.00		\$0.00	\$0.00	Pending
TN075-001	Remove and replace sidewalks		1450	1400 SF	\$16,800.00		\$0.00	\$0.00	Pending
TN075-001	Move electric pole		1450	1 LS	\$500.00		\$0.00	\$0.00	Pending
TN075-001	Remove existing and install new shingles		1460	300 SQ	\$37,500.00		\$0.00	\$0.00	Pending
TN075-001	Replace window shades		1460	312 EA	\$7,800.00		\$0.00	\$0.00	Pending
TN075-001	Replace refrigerators		1465.1	12 EA	\$4,800.00		\$0.00	\$0.00	Pending
TN075-001	Replaces ranges		1465.1	0 EA	\$0.00		\$0.00	\$0.00	Deleted
TN075-001	Construct carport at parking area		1470	1 LS	\$0.00		\$0.00	\$0.00	Deleted
TN075-003	Remove and replace asphalt shingles		1460	175 SQ	\$21,875.00		\$0.00	\$0.00	
TN075-003	Replace water heaters		1460	35 EA	\$17,500.00		\$0.00	\$0.00	
TN075-003	Replace window shades		1460	300 EA	\$7,500.00		\$0.00	\$0.00	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b><i>Newbern Housing Authority</i></b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P07550100</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2000</b>			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories		Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
TN075-003	Replace refrigerators		1465.1	30 EA	\$12,000.00		\$0.00	\$0.00	Pending
TN075-003	Replace ranges		1465.1	30 EA	\$10,500.00		\$0.00	\$0.00	Pending



**APPENDIX J – ANNUAL STATEMENTS/PERFORMANCE AND EVALUATION REPORTS**

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <b>Newbern Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P07590499</b> Replacement Housing Factor Grant No:			Federal FY of Grant:  <b>1999 CIAP</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$2,120.00	\$2,120.00	\$0.00
2	1406 Operations	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Management Improvements Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$271.00	\$271.00	\$271.00	\$271.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$41,026.00	\$40,270.00	\$40,270.00	\$37,348.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$49,850.00	\$49,055.00	\$49,055.00	\$0.00
10	1460 Dwelling Structures	\$161,249.00	\$162,800.00	\$162,800.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$19,103.00	\$19,103.00	\$19,103.00	\$19,103.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	1502 Contingency	\$0.00			

**APPENDIX J – ANNUAL STATEMENTS/PERFORMANCE AND EVALUATION REPORTS**

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: <b>Newbern Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P07590499</b> Replacement Housing Factor Grant No:			Federal FY of Grant:  <b>1999 CIAP</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
	Amount of Annual Grant: (sum of lines.....)	\$271,499.00	\$271,499.00	\$271,499.00	\$56,722.00
	Amount of line XX Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of line XX Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of line XX Related to Security –Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of Line XX related to Security-- Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
	Amount of line XX Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00
	Collateralization Expenses or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b><i>Newbern Housing Authority</i></b>		Grant Type and Number Capital Fund Program Grant No: <b><i>TN43PO7590499</i></b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b><i>1999 CIAP</i></b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Cost of advertising for PHA staff positions and construction bids.	1410	271	271.00	271.00	271.32	271.32	Completed
PHA- Wide	A/E Design Fee	1430	1	17,344	17,344	17,344.20	17,334.20	Completed
PHA-Wide	A/E Inspection Fee	1430	1	11,182	9,936	9,935.72	8,259.33	Contracted
PHA-Wide	Clerk of the Works	1430	1	12,000	11,244	11,244	11,244.00	Completed
PHA-Wide	Planning Fee	1430	1	500.00	500.00	500.00	500.00	Completed
PHA-Wide	Purchase new maintenance vehicle	1475	1	19,103	19,103	19,102.71	19,102.71	Completed
TN37P075001	Clear property line of underbrush and debris	1450	2	1,000	1,725	1,725	0.00	Contracted
TN37P075001	Replace 6" sanitary sewer laterals from cleanouts to property line	1450	2014	18,000	18,000	18,000	0.00	Contracted
TN37P075001	Replace 8" sanitary sewer lines on PHA property	1450	380	30,850	29,330	29,330	0.00	
TN37P075001	Install new handrails at three steps risers	1460	50	0.00	0.00	0.00	0.00	Contracted
TN37P075001	Remove existing and install new asphalt, shingle roof shingles, flashing and felt	1460	463	28,950	28,950	28,950	0.00	Deleted
TN37P075001	Replace damaged sheathing and framing	1460	4980	3,600	320	320.00	0.00	Contracted
TN37P075001	Remove existing and install new asphalt shingle roof shingles, flashing and felt	1460	35	0.00	2,200	2,200	0.00	Contracted
TN37P075001	Replace window shades and brackets	1460	312	1,500	1,500	1,500	0.00	Contracted

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: <b><i>Newbern Housing Authority</i></b>		Grant Type and Number Capital Fund Program Grant No: <b><i>TN43PO7590499</i></b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b><i>1999 CIAP</i></b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
TN37P075001	Replace windows with new double hung insulated windows. Frame down opening as required	1460	100	47,400	52,180	52,180	0.00	Contracted
TN37P075001	Replace closet bi-fold doors with flush doors. Build header to obtain standard 6"-8" height	1460	75	\$34,500	34,500	34,500	0.00	Contracted
TN37P075003	Remove existing and install new asphalt shingle roof shingles, flashing and felt	1460	100	22,100	22,100	22,100	0.00	Contracted
TN37P075003	Install new water heater	1460	10	6,050	6,050	6,050	0.00	Contracted
TN37P075006	Install dryer vent and electrical connections	1460	30	15,000	15,000	15,000	0.00	Contracted
TN37P075006	Unbudgeted construction funds	1460		2,149	0.00	0.00	0.00	NA
TN37P075001	Remove existing and install new asphalt shingle roof shingles, flashing and felt	1460		0.00	2,120	2,119.94	0.00	Contracted
PHA Wide	Transfer to Operations	1406			1,246	1,246.05	0.00	Completed