

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

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Small PHA Plan Update  
Annual Plan for Fiscal Year: 2003

Jellico Housing Authority  
tn034v01 – Version 1  
Submitted to HUD on March 26, 2003

**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:** JELLICO HOUSING AUTHORITY

**PHA Number:** TN034

**PHA Fiscal Year Beginning: (mm/yyyy)** 07/2003

### PHA Plan Contact Information:

Name: Joe N. Brown

Phone: 423-784-8809

TDD: 423-784-8809

Email (if available): jellicoha@ccdi.net

### 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

### 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
- Main administrative office of the local, county or 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)

### PHA Programs Administered:

- Public Housing and Section 8       Section 8 Only       Public Housing Only

**Annual PHA Plan  
Fiscal Year 2003**  
[24 CFR Part 903.7]

**i. Table of Contents**

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

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<input checked="" type="checkbox"/> Attachment B : Capital Fund Program Annual Statement		
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<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan		
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<input checked="" type="checkbox"/> Attachment G : Voluntary Conversion Initial Assessment		
<input checked="" type="checkbox"/> P & E Report , as of 12/31/2002 for TN37-PO34-501-00 ( <b>tn034a01</b> )		
<input checked="" type="checkbox"/> P & E Report , as of 12/31/2002 for TN37-PO34-501-01 ( <b>tn034b01</b> )		
<input checked="" type="checkbox"/> P & E Report , as of 12/31/2002 for TN37-PO34-501-02 ( <b>tn034c01</b> )		
<input checked="" type="checkbox"/> Deconcentration Policy ( <b>tn034d01</b> )		

## **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

### **1. Summary of Policy or Program Changes for the Upcoming Year**

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

N/A

### **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A.  Yes  No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ **225,714 (Estimate – FY2002 amount)**

C.  Yes  No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

#### **(1) Capital Fund Program 5-Year Action Plan**

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

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

The Capital Fund Program Annual Statement is provided as Attachment B

### **3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability: 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 next component ; if "yes", complete one activity description for each development.)

2. Activity Description

<b>Demolition/Disposition Activity Description</b> <b>(Not including Activities Associated with HOPE VI or Conversion Activities)</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. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for      units <input type="checkbox"/> Public housing for      units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for      units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

**4. Voucher Homeownership Program**

[24 CFR Part 903.7 9 (k)]

A.  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 next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

**B. Capacity of the PHA to Administer a Section 8 Homeownership Program**

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources

- Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

### **5. Safety and Crime Prevention: PHDEP Plan**

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A.  Yes  No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
  
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_
  
- C.  Yes  No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
  
- D.  Yes  No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

### **6. Other Information**

[24 CFR Part 903.7 9 (r)]

#### **A. Resident Advisory Board (RAB) Recommendations and PHA Response**

- 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 Attached at Attachment F
  
- 3. In what manner did the PHA address those comments? (select all that apply)
  - The PHA changed portions of the PHA Plan in response to comments  
A list of these changes is included  
 Yes  No: below or  
 Yes  No: at the end of the RAB Comments in Attachment F
  - Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment \_F\_.
  
  - Other: (list below)

## B. 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: **(STATE OF TENNESSEE)**
  
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 specific initiatives contained in the Consolidated Plan. (list such initiatives below)
  - Other: (list below)
  
3. PHA Requests for support from the Consolidated Plan Agency
  - Yes  No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
  
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

**Please refer to the Executive Summary of the Consolidated Plan for the State of Tennessee**

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan:**

The following are considered to be significant amendments or modifications:

- 1) **Changes to rent or admissions policies or organization of the waiting list**
- 2) **Additions of non-emergency work items (items not included in the current Annual Statement or 5-year Action plan) or change in use of replacement reserve funds under the Capital Fund**
- 3) **Additions of new activities not included in the current PHDEP Plan (if applicable)**
- 4) **Any change with regard to demolition or disposition, designation, 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; such changes will not be considered significant amendments by HUD.**

**B. Significant Amendment or Modification to the Annual Plan:**

Same as “A” above.

## Attachment A Supporting Documents Available for Review

PHAs are to 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>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: 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
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	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
N/A	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	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
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	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
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	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, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of 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
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents (optional) (list individually; use as many lines as necessary)  Deconcentration Information - tn034d01	(specify as needed)  Annual Plan: Deconcentration



<b>Annual Statement/Performance and Evaluation Report</b>					
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> JELLICO HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37-PO34-501-03 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2003
<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	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	500			
3	1408 Management Improvements	28,500			
4	1410 Administration	1,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	54,730			
10	1460 Dwelling Structures	130,484			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	1,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	1,000			
21	Amount of Annual Grant: (sum of lines 2 – 20)	225,714			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Jellico Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37-PO34-501-03 Replacement Housing Factor Grant No:				Federal FY of Grant: 2003		
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	
HA-Wide	Operations	1406	LS	500				
	VISTA	1408	1 position	12,500				
	Computer Upgrade	1408	LS	15,000				
	Training	1408	LS	1,000				
	Advertising	1410	LS	1,000				
	Agency Plan Update	1430	LS	2,500				
	Environmental Review	1430	LS	1,000				
	A/E Fees	1430	LS	5,000				
TN34-001	Dumpster Pads	1450	LS	10,000				
	Replace Handrails/Guardrails	1450	LS	14,730				
	Resurface parking	1450	LS	30,000				
TN34-002	Repair/Replace concrete porches	1460	LS	18,000				
	Guttering/downspouts	1460	LS	18,000				
	HVAC	1460	9 units	54,484				
	Re-Roof flat roofs	1460		40,000				
HA-Wide	Office Equipment	1475	LS	1,000				
	Contingency	1502	LS	1,000				

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

PHA Name: Jellico Housing Authority		Grant Type and Number Capital Fund Program No: TN37-PO34-501-03 Replacement Housing Factor No:				Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	06/30/2005			12/31/2006			
TN34-001	06/30/2005			12/31/2006			
TN34-002	06/30/2005			12/31/2006			
TN34-003	06/30/2005			12/31/2006			



## Capital Fund Program Five-Year Action Plan

### Part I: Summary

PHA Name Jellico Housing Authority		<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>			
Development Number/Name/H A-Wide	Year 1	Work Statement for Year 2 FFY Grant: TN37-PO34-501-04 PHA FY: 2004	Work Statement for Year 3 FFY Grant: TN37-PO34-501-05 PHA FY: 2005	Work Statement for Year 4 FFY Grant: TN37-PO34-501-06 PHA FY: 2006	Work Statement for Year 5 FFY Grant: TN37-PO34-501-07 PHA FY: 2007
	Annual Statement				
HA-WIDE		40,500	40,500	53,100	45,500
TN34-0001		35,000	35,552	25,000	30,000
TN34-002		223,552	30,500	10,000	147,500
TN34-003		0	107,000	143,952	97,500
CFP Funds Listed for 5-year planning		299,052	213,552	232,052	320,500
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan

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

Activities for Year 1	Activities for Year :_2_ FFY Grant: TN37-PO34-501-04 PHA FY: 2004			Activities for Year: _3_ FFY Grant: TN37-PO34-501-05 PHA FY: 2005		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	HA-WIDE	Operations	500		Operations	500
<b>See</b>		VISTA	12,500	HA-WIDE	VISTA	12,500
<b>Annual</b>		Advertising	1,000		Advertising	1,000
<b>Statement</b>		Agency Plan Update	2,500		Agency Plan Update	2,500
		Environmental Review	1,000		Environmental Review	1,000
		Computer Upgrade	15,000		Computer Upgrade	15,000
		A/E Fees	5,000		A/E Fees	5,000
		Contingency	1,000		Contingency	1,000
		Training	1,000		Training	1,000
		Office equipment	1,000		Office equipment	1,000
		<b>Subtotal</b>	<b>40,500</b>		<b>Subtotal</b>	<b>40,500</b>
	TN34-001	Weatherstripping	5,000	TN34-001	Termite Treatment	500
		Tot lot	25,000		New base cabinets	35,052
		Sidewalk repair	5,000		<b>Subtotal</b>	<b>35,552</b>
		<b>Subtotal</b>	<b>35,000</b>			
				TN34-002	Tot Lot	25,000
	TN34-002	HVAC – 27 units	162,000		Termite Treatment	500
		Replace VCT – 23 units	54,000		Weatherstripping	5,000
		Sidewalk repair	7,552		<b>Subtotal</b>	<b>30,500</b>
				TN34-003	2”ball valve/ eld.bldg.	2,000
					Weatherstripping	5,000
					Tot lot	25,000
				Elderly Bldg. @ 34-003	New kitchen cabinets	50,000
					Bathroom Renovations	25,000
		<b>Subtotal</b>	<b>223,552</b>		<b>Subtotal</b>	<b>107,000</b>
	<b>Total CFP Estimated Cost</b>		<b>\$299,052</b>			<b>\$213,552</b>

Capital Fund Program Five-Year Action Plan

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

Activities for Year : _4_ FFY Grant: TN37-PO34-501-06 PHA FY: 2006			Activities for Year: _5_ FFY Grant: TN37-PO34-501-07 PHA FY: 2007		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
HA-WIDE	Operations	500	HA-WIDE	Operations	500
	VISTA	12,500		VISTA	12,500
	Advertising	1,000		Advertising	1,000
	Agency Plan Update	2,500		Agency Plan Update	2,500
	Environmental Review	1,000		Environmental Review	1,000
	Computer Upgrade	15,000		Computer Upgrade	15,000
	A/E Fees	5,000		A/E Fees	5,000
	Contingency	1,000		Contingency	1,000
	Training	1,000		Training	1,000
	Office equipment	1,000		Office equipment	1,000
	Appliances	12,600		Maintenance equipment	1,000
	Maintenance equipment	1,000		Energy Audit	3,000
	<b>Subtotal</b>	<b>53,100</b>		Lead-Based Paint Testing	2,000
				<b>Subtotal</b>	<b>45,500</b>
TN34-001	Guttering/downspouts	15,000			
	Replace handrails/guardrails	10,000			
	<b>Subtotal</b>	<b>25,000</b>	TN34-001	Install Individual water meters	30,000
TN34-002	Replace handrails/guardrails	10,000	TN34-002	Insulation	37,500
				Install Individual water meters	30,000
				Front and Rear Doors/Frames	80,000
				<b>Subtotal</b>	<b>147,500</b>
TN34-003	HVAC	103,952	TN34-003	Insulation	37,500
	Acquisition of property	40,000			
				Self-Contained Unit Ventilators – Comm. Room – Fourth st.	15,000
				Run gas lines to 102 units	45,000
	<b>Subtotal</b>	<b>143,952</b>		<b>Subtotal</b>	<b>97,500</b>
<b>Total CFP Estimated Cost</b>		<b>\$232,052</b>			<b>\$320,500</b>

## PHA Public Housing Drug Elimination Program Plan (N/A)

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

### Section 1: General Information/History

**A. Amount of PHDEP Grant \$** \_\_\_\_\_

**B. Eligibility type (Indicate with an “x”)**      N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_

**C. FFY in which funding is requested** \_\_\_\_\_

### **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

### **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. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

### **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).

**12 Months** \_\_\_\_\_    **18 Months** \_\_\_\_\_    **24 Months** \_\_\_\_\_

### **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. The Fund Balances should reflect the

balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. 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	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY 1998						
FY 1999						

**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.

**B. PHDEP Budget Summary**

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

FFY _____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	

9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
<b>TOTAL PHDEP FUNDING</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>9110 – Reimbursement of Law Enforcement</b>						<b>Total PHDEP Funding: \$</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

<b>9115 - Special Initiative</b>	<b>Total PHDEP Funding: \$</b>
----------------------------------	--------------------------------

Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)	Performance Indicators
1.							
2.							
3.							

<b>9116 - Gun Buyback TA Match</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9120 - Security Personnel</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9130 – Employment of Investigators</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							

3.							
----	--	--	--	--	--	--	--

<b>9140 – Voluntary Tenant Patrol</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9150 - Physical Improvements</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9160 - Drug Prevention</b>					<b>Total PHDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9170 - Drug Intervention</b>					<b>Total PHDEP Funding: \$</b>		
---------------------------------	--	--	--	--	--------------------------------	--	--

Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9180 - Drug Treatment</b>					<b>Total PHEDEP Funding: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

<b>9190 - Other Program Costs</b>					<b>Total PHEDEP Funds: \$</b>		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							



**Required Attachment D: Resident Member on the PHA Governing Board**

1.  Yes  No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: **Josephine Siler**

B. How was the resident board member selected: (select one)?

- Elected  
 Appointed

C. The term of appointment is (include the date term expires): 4 years, term expires 2/18/2006

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis  
 the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.  
 Other (explain):

B. Date of next term expiration of a governing board member: 2/28/2004

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

**John Clifton – Mayor of Jellico**

**Required Attachment E: Membership of the Resident Advisory Board  
or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Stephanie Halcomb  
Shirley Ivey  
Joie Leach  
Patsy Vielma

## **Required Attachment F: Comments of Resident Advisory Board and Explanation of PHA Response**

A meeting of the Resident Advisory Board was held on February 10, 2003 to hear comments on this year's Agency Plan. There was a Public Hearing held on March 24, 2003 to hear comments on the FY2003 Agency Plan.

Below is a list of comments and how they have been addressed (**in bold**):

- Dryer hook-ups @ elderly building

**No space for dryers in these small apartments**

- Kitchen vents @ elderly building

**Nowhere to run exhaust to outside in these small apartments**

- Bathroom floors @ elderly building

**Already in 5-year plan to do bathroom renovations, which include new flooring**

- Concrete porches @ elderly building

**Jellico Housing Authority will look into the best way to correct the chipping concrete.**

- Tree-trimming @ elderly building

**Already in 5-year plan as part of the general landscaping at TN34-003**

- New kitchen sinks @ TN34-001

**Already in 5-year plan**

The comments made by the residents were appreciated by the Jellico Housing Authority. The lack of space in the elderly apartments makes having a dryer hook-up impossible at this time. The JHA will look at this issue at a later time, should it become feasible.

## **Required Attachment G: Voluntary Conversion Initial Assessment**

- a. How many of the PHA's developments are subject to the Required Initial Assessments?

**Three (3)**

- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?

**Zero (0)**

- c. How many Assessments were conducted for the PHA's covered developments?

**One, the initial assessment**

- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

**At this time, there are no developments that are appropriate for conversion at this time**



<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> Jellico Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: TN37-PO34-501-00 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2000	
<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: 12/31/2002		<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					
2	1406 Operations	2,282	19,391	19,391.00	0	
3	1408 Management Improvements	22,322	13,840	13,840.00	13,840.33	
4	1410 Administration	1,000	0	0	0	
5	1411 Audit					
6	1415 liquidated Damages					
7	1430 Fees and Costs	9,318	1,000	1,000.00	1,000.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	0	0	0	0	
10	1460 Dwelling Structures	185,300	185,300	185,300.00	156,215.92	
11	1465.1 Dwelling Equipment—Nonexpendable	12,600	13,291	13,291.00	13,291.00	
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1498 Mod Used for Development					
19	1502 Contingency					
20	Amount of Annual Grant: (sum of lines 2-19)	232,822	232,822	232,822.00	184,347.25	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security					
24	Amount of line 20 Related to Energy Conservation Measures					

<b>Annual Statement/Performance and Evaluation Report</b>								
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>								
<b>Part II: Supporting Pages</b>								
PHA Name: Jellico Housing Authority		Grant Type and Number Capital Fund Program #: TN37-PO34-501-00 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Operations	1406		2,282	19,391	19,391	0.00	In Progress
	VISTA	1408	1	12,500	10,664	10,664	10,664.02	Complete
	Hand-held computer software and training	1408	LS	9,822	3,176	3,176	3,176.31	Complete
	Advertising	1410		1,000	0	0	0.00	Deleted
	A/E Services	1430		9,318	1,000	1,000	1,000.00	Complete
	Update Agency Plan	1430		0	0	0	0.00	Deleted
TN34-001	Replace handrails/guardrails (DEFERRED)	1450	LS	0	0	0	0.00	Deferred
TN34-002	Replace handrails/guardrails (DEFERRED)	1450	LS	0	0	0	0.00	Deferred
TN34-003	Replace handrails/guardrails (DEFERRED)	1450	LS	0	0	0	0.00	Deferred
TN34-001	Re-wire and vent for dryers	1460	30 units	4,500	4,500	4,500	4,500.00	Complete
	Re-roofing	1460	30 units	45,000	45,000	45,000	19,809.93	In Progress
	Guttering/downspouts (DEFERRED)	1460	30 units	0	0	0	0.00	Deferred
	Repair subfloor/new VCT in kitchen (DEFERRED)	1460	30 units	0	0	0	0.00	Deferred
	HVAC @ \$3,500 ea.	1460	30 units	105,000	105,000	105,000	105,000.00	Complete
	Renovate bathrooms	1460	7 units	20,000	20,000	20,000	20,000.00	Complete
TN34-002	Re-wire and vent for dryers	1460	36 units	5,400	5,400	5,400	3,665.99	In Progress
TN34-003	Re-wire and vent for dryers	1460	36 units	5,400	5,400	5,400	3,240.00	In Progress

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name: Jellico Housing Authority			<b>Grant Type and Number</b> Capital Fund Program #: TN37-PO34-501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Appliances – 12 ea. ranges, refrigerators, water heaters	1465.1		12,600	13,291	13,291	13,291.00	Complete

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Jellico Housing Authority		<b>Grant Type and Number</b> Capital Fund Program #: TN37-PO34-501-00 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	03/31/2002	06/30/2002		09/30/2003	12/31/2003		
TN34-001	03/31/2002	06/30/2002		09/30/2003	12/31/2003		
TN34-002	03/31/2002	06/30/2002		09/30/2003	12/31/2003		
TN34-003	03/31/2002	06/30/2002		09/30/2003	12/31/2003		

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name: Jellico Housing Authority			Grant Type and Number Capital Fund Program #: TN37-PO34-501-00 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2000	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	

tn034a01

<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> Jellico Housing Authority		<b>Grant Type and Number</b> Capital Fund Program: TN37-PO34-501-01 Capital Fund Program Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2001
<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: 12/31/2002		<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				
2	1406 Operations	322	322	0.00	0.00
3	1408 Management Improvements	17,500	27,500	24,772.55	24,772.55
4	1410 Administration	1,000	1,000	0.00	0.00
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	8,000	7,400	2,400.00	2,400.00
8	1440 Site Acquisition	40,000	0	0.00	0.00
9	1450 Site Improvement	15,000	15,000	0.00	0.00
10	1460 Dwelling Structures	154,730	184,730	107,500.00	19,510.56
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency	1,000	1,600	0.00	0.00
20	Amount of Annual Grant: (sum of lines 2-19)	237,552	237,552	134,672.55	46,683.11
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				

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

PHA Name: Jellico Housing Authority		Grant Type and Number Capital Fund Program #: TN37-PO34-501-01 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	Operations	1406		322	322	0.00	0.00	No Work
	VISTA	1408	1	12,500	12,500	12,500.00	12,500.00	Complete
	Computer Upgrade	1408	LS	5,000	15,000	12,272.55	12,272.55	In Progress
	Advertising	1410	LS	1,000	1,000	0.00	0.00	No Work
	Agency Plan Update	1430	LS	2,000	2,000	2,000.00	2,000.00	Complete
	Environmental Review	1430	LS	1,000	400	400.00	400.00	Complete
	A/E Fees	1430	LS	5,000	5,000	0.00	0.00	No Work
	Site Acquisition – property adjoining TN34-003 (Myrtle St.) (DEFERRED)	1440	LS	40,000	0	0.00	0.00	No Work
TN34-001	Guttering/downspouts	1460	30 units	19,730	19,730	0.00	0.00	No Work
	Repair subfloor/new VCT in kitchen	1460	30 units	50,000	50,000	0.00	0.00	No Work
	Renovate bathrooms	1460	23 units	0	62,500	62,500.00	10,632.25	In Progress
TN34-002	Landscaping	1450	LS	15,000	15,000	0.00	0.00	No Work
	Re-Roof/ shingles	1460	20 units	30,000	30,000	30,000.00	0.00	No Work
	Re-Roof flat roofs (DEFERRED)	1460	16 units	40,000	0	0.00	0.00	Deferred
	New storm doors	1460	30 units	15,000	15,000	15,000.00	8,878.31	In Progress
	Repair cracks @ ceiling	1460	LS	0	7,500	0.00	0.00	No Work
HA-WIDE	Contingency	1502	LS	1,000	1,600	0.00	0.00	No work





<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> JELLICO HOUSING AUTHORITY		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37-PO34-501-02 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2002
<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: 12/31/2002 <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				
2	1406 Operations	7,248		0.00	0.00
3	1408 Management Improvements	27,500		0.00	0.00
4	1410 Administration	1,000		0.00	0.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	8,500		3,495.00	3,495.00
8	1440 Site Acquisition				
9	1450 Site Improvement	13,000		0.00	0.00
10	1460 Dwelling Structures	114,466		12,305.98	7,549.29
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	53,000		21,929.29	21,929.29
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency	1,000		0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	225,714		37,730.27	32,973.58
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Jellico Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37-PO34-501-02 Replacement Housing Factor Grant No:			Federal FY of Grant: 2002			
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	
HA-Wide	Operations	1406	LS	7,248		0.00	0.00	No Work
	VISTA	1408	1 position	12,500		0.00	0.00	No Work
	Computer Upgrade	1408	LS	15,000		0.00	0.00	No Work
	Advertising	1410	LS	1,000		0.00	0.00	No Work
	Agency Plan Update	1430	LS	2,500		2,500.00	2,500.00	Complete
	Environmental Review	1430	LS	1,000		995.00	995.00	Complete
	A/E Fees	1430	LS	5,000		0.00	0.00	No Work
TN34-001	Dumpster Pads	1450	LS	10,000		0.00	0.00	No Work
	Sidewalk repair/replacement	1450	LS	1,000		0.00	0.00	No Work
TN34-002	Sidewalk repair/replacement	1450	LS	1,000		0.00	0.00	No Work
	HVAC	1460	18 units	102,466		12,305.98	7,549.29	In Progress
	Exterior doors, frames, hardware (front & rear)	1460	12 units	12,000		0.00	0.00	No Work
TN34-003	Sidewalk repair/replacement	1450	LS	1,000		0.00	0.00	No Work
HA-Wide	Maintenance Truck	1475	2	44,000		21,929.29	21,929.29	In Progress
	Computer Lab	1475	LS	5,000		0.00	0.00	No Work
	Utility bed for truck	1475	1	4,000		0.00	0.00	No Work
	Contingency	1502	LS	1,000		0.00	0.00	No Work

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

PHA Name: Jellico Housing Authority	Grant Type and Number Capital Fund Program No: TN37-PO34-501-02 Replacement Housing Factor No:	Federal FY of Grant: 2002
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA-Wide	06/30/2004			12/31/2005			
TN34-001	06/30/2004			12/31/2005			
TN34-002	06/30/2004			12/31/2005			
TN34-003	06/30/2004			12/31/2005			

## JELICO HOUSING AUTHORITY DECONCENTRATION POLICY

The Jellico Housing Authority's policy to provide for deconcentration of poverty will consist of the following:

- A. Targeting: The income levels of families on the waiting list will be analyzed so that not less than 40% of admissions in any fiscal year will be families whose income does not exceed 30% of median income for the area.
- B. Income Mixing: Prior to the beginning of each fiscal year the JHA will analyze the income levels of families residing in each development to bring higher income families into lower income developments and lower income families into higher income developments.

The JHA will strive to insure that no individual development has a concentration of higher or lower income families. The JHA may skip families on the waiting list to reach other families with a lower or higher income. This will be accomplished in a uniform and non-discriminatory manner.

The JHA will affirmatively market public housing to all eligible income groups. If necessary, the JHA will determine the level of additional marketing strategies and deconcentration incentives to implement the objective of this policy.