

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

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

Lexington Housing Authority
100 Willow Courts
Lexington, TN 38351

TN040v02

**NOTE: THIS PHA PLAN TEMPLATE (HUD50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHAName: Lexington Housing Authority

PHANumber: TN040

PHAFiscalYearBeginning:(mm/yyyy) 01/2003

PHA Plan Contact Information:

Name: Mr. Will Rogers, Executive Director

Phone: (731) 967-7506

TDD: NA

Email(if available): lexhousaut@netease.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 20 03
 [24CFR 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 filename in parentheses in the space to the right of the title.

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ii.ExecutiveSummary

[24CFRPart903.79(r)]

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

Not Required

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.

The PHA is not proposing any policy or program changes for the upcoming year.

2.Capital Improvement Needs

[24CFRPart903.79(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? \$220,000.00

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

[24CFRPart903.79(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

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
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: (DD/MM/YY)	
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

[24CFR Part 903.79(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
Not Applicable

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

- Establishing a minimum homeowner down payment requirement of at least 3 percent and requiring that at least 1 percent of the down payment 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 **Not Applicable**

[24CFR Part 903.7(m)]

Exemptions Section 8 Only PHA may skip to the next component PHA 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? \$ _____ **Not Applicable**

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. **Not Applicable**

D. Yes No: The PHDEP Plan is attached at Attachment _____ **Not Applicable**

6. Other Information

[24CFR Part 903.79(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 (Filename)

The residents requested the addition of outside electrical outlets and faucets, as well as handrails at some front porches.

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
 - Yes No: at the end of the RAB Comments in Attachment ____.
- Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the end of the RAB Comments in Attachment ____.
- Other: (list below) **The requested items will be addressed by the maintenance staff through the operating budget.**

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: (provide name here)

Tennessee Housing and 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 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)

Not Applicable

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:

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.

B. Significant Amendment or Modification to the Annual Plan:

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 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.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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 jurisdiction 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 checked="" 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 checked="" 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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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 HOPEVI applications or, if more recent, approved or submitted HOPEVI 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 home ownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
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"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHA participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHA participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · 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. 	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 result 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 result of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

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

PHAName: Lexington Housing Authority	Grant Type and Number Capital Fund Program: TN43P04050103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2003
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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			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$6,000.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$33,000.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$25,000.00			
10	1460 Dwelling Structures	\$153,000.00			
11	1465.1 Dwelling Equipment — Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$3,000.00			
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	1498 Mod Used for Development	\$0.00			
19	1502 Contingency	\$0.00			
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$220,000.00			
21	Amount of line 20 Related to LBP Activities	\$0.00			
22	Amount of line 20 Related to Section 504 Compliance	\$0.00			
23	Amount of line 20 Related to Security	\$0.00			
24	Amount of line 20 Related to Energy Conservation Measures	\$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: Lexington Housing Authority			Grant Type and Number Capital Fund Program #: TN43P04050103 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FY 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 Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Security	1408	1 LS	\$6,000.00				
PHA Wide	Consulting Agency Plan	1430	1 LS	\$4,500.00				
PHA Wide	A/E Fees	1430	1 LS	\$28,500.00				
TN040-001	Concrete replacement	1450	1 LS	\$9,000.00				
TN040-001	Painting (interior)	1460	1 LS	\$10,000.00				
TN040-001	Shrubbery and trees	1450	1 LS	\$1,500.00				
TN040-001	Tub surround w/vents and lights	1460	1 LS	\$15,000.00				
TN040-002	Concrete replacement	1450	1 LS	\$6,000.00				
TN040-002	Painting (interior)	1460	1 LS	\$10,000.00				
TN040-002	Shrubbery and trees	1450	1 LS	\$1,000.00				
TN040-002	Sewer cleanouts	1450	1 LS	\$9,000.00				
TN040-003	Replace floor tile	1460	1 LS	\$118,000.00				
TN040-003	Shrubbery, trees and sod	1450	1 LS	\$1,500.00				
	TOTAL			\$220,000.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Lexington Housing Authority		Grant Type and Number Capital Fund Program#: TN43P04050103 Capital Fund Program Replacement Housing Factor#:				Federal FY of Grant: FY 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	
Security	6/30/04			6/30/06			
TN040-001	6/30/04			6/30/06			
TN040-002	6/30/04			6/30/06			
TN040-003	6/30/04			6/30/06			

Capital Fund Program Five - Year Action Plan
Part I: Summary

PHAName: Lexington Housing Authority				<input checked="" type="checkbox"/> Original 5 - Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year1	Work Statement for Year2 FFY Grant: 2004 PHAFY: 2004	Work Statement for Year3 FFY Grant: 2005 PHAFY: 2005	Work Statement for Year4 FFY Grant: 2006 PHAFY: 2006	Work Statement for Year5 FFY Grant: 2007 PHAFY: 2007
	Annual Statement				
PHA-Wide		\$39,000.00	\$39,000.00	\$74,000.00	\$89,500.00
TN040-001		\$18,000.00	\$74,500.00	\$20,000.00	\$38,500.00
TN040-002		\$45,000.00	\$74,500.00	\$20,000.00	\$50,700.00
TN040-003		\$118,000.00	\$32,000.00	\$106,000.00	\$41,300.00
CFP Funds Listed for 5-year planning		\$220,000.00	\$220,000.00	\$220,000.00	\$220,000.00
Replacement Housing Factor Funds		\$0.00	\$0.00	\$0.00	\$0.00

Capital Fund Program Five - Year Action Plan					
Part II: Supporting Pages — Work Activities					
Activities for Year: <u>4</u> FFY Grant: 2006 PHAFY: 2006			Activities for Year: <u>5</u> FFY Grant: 2007 PHAFY: 2007		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
PHA Wide	Security	\$6,000.00	PHA-Wide	Security	\$8,000.00
PHA Wide	Consulting Agency Plan	\$4,500.00	PHA-Wide	Consulting Agency Plan	\$4,500.00
PHA Wide	A/E Fees	\$28,500.00	PHA-Wide	A/E Fees	\$30,000.00
PHA Wide	New maintenance truck	\$20,000.00	PHA-Wide	Upgrade computer system	\$25,000.00
PHA Wide	Police security	\$15,000.00	PHA-Wide	LHA Operations	\$22,000.00
TN040-001	Interior painting	\$10,000.00	TN040-001	Exterior/interior painting	\$10,000.00
TN040-001	Appliance replacement	\$10,000.00	TN040-001	Appliance replacement	\$8,000.00
TN040-002	Interior painting	\$10,000.00	TN040-001	Shrubbery, trees, sod	\$2,500.00
TN040-002	Appliance replacement	\$10,000.00	TN040-001	Repairs to kitchen cabinets and countertops	\$8,000.00
TN040-003	Roof replacement	\$81,000.00	TN040-001	Screen door replacements	\$10,000.00
TN040-003	Interior painting	\$13,000.00	TN040-002	Exterior/interior painting	\$7,000.00
TN040-003	Concrete replacement program	\$2,000.00	TN040-002	Appliance replacement	\$6,000.00
TN040-003	Appliance replacement program	\$10,000.00	TN040-002	Shrubbery, trees, sod	\$1,800.00
			TN040-002	Tub surrounds with vents	\$20,000.00
			TN040-002	Repairs to kitchen cabinets and countertops	\$8,000.00
			TN040-002	Screen door replacements	\$7,900.00
			TN040-003	Exterior/interior painting	\$15,000.00
			TN040-003	Appliance replacement	\$10,000.00
			TN040-003	Shrubbery, trees, sod	\$4,300.00
			TN040-003	Repairs to kitchen cabinets and countertops	\$12,000.00
Total CFPEstimatedCost		\$220,000.00			\$220,000.00

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: **Ms. Anne M. Evans**

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

- Elected
 Appointed

C. The term of appointment is (include the date term expires):

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

- 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: **November 14, 2002**

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

Mayor Bennie Scott

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.)

Mary Greer
101 Parkview Court
Lexington, TN 38351

Maxine Rutledge
148 Willow Court
Lexington, TN 38351

Stella Hollingsworth
104 Montgomery Court
Lexington, TN 38351

William D. Fiddler
137 Willow Court
Lexington, TN 38351

Attachment F: Voluntary Conversion – Initial Assessment

- a. How many of the PHA's developments are subject to the Required Initial Assessments? **All three**
- 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)? **None**
- c. How many Assessments were conducted for the PHA's covered developments? **All (three)**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development Name	Number of Units
Not Applicable	

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments. **Not Applicable**

Attachment G: Performance and Evaluation Reports

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

PHAName: Lexington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04050102 Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2002
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: One)
 Performance and Evaluation Report for Period Ending: **06/30/02**
 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	\$50,000.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$22,800.00	\$0.00	\$22,800.00	\$0.00
3	1408 Management Improvements	\$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	\$42,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$28,000.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$95,279.00	\$0.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment — Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non dwelling Structures	\$40,000.00	\$0.00	\$0.00	\$0.00
13	1475 Non dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
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	1501 Collateralization 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 I: Summary					
PHA Name: Lexington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P04050102 Replacement Housing Factor Grant No:		Federal FY of Grant: FY 2002	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: One)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 20 - 26)	\$228,079.00	\$0.00	\$22,800.00	\$0.00
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security - Soft Costs	\$8,000.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 21 Related to Security - Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 21 Related to Energy Conservation Measures	\$10,000.00	\$0.00	\$0.00	\$0.00

Attachment G continued

Annual Statement/Performance and Evaluation Report								
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)								
Part II: Supporting Pages								
PHA Name: Lexington Housing Authority			Grant Type and Number Capital Fund Program Grant No: TN43P04050102 Replacement Housing Factor Grant No:			Federal FY of Grant: FY 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	
PHA Wide	Complete capital work			\$50,000.00		\$0.00	\$0.00	
PHA Wide	Operations	1406		\$22,800.00		\$22,800.00	\$0.00	
PHA Wide	Security	1430		\$8,000.00		\$0.00	\$0.00	
PHA Wide	Consultant Agency Plan	1430		\$4,000.00		\$0.00	\$0.00	
PHA Wide	A/E fees – Design	1430		\$15,000.00		\$0.00	\$0.00	
PHA Wide	A/E fees – Construction	1430		\$10,000.00		\$0.00	\$0.00	
PHA Wide	A/E fees - closeout	1430		\$5,000.00		\$0.00	\$0.00	
TN040-001	Sewer cleanouts	1450		\$0.00		\$0.00	\$0.00	
TN040-001	Concrete replacement	1450		\$0.00		\$0.00	\$0.00	
TN040-002	Sewer cleanouts	1450		\$0.00		\$0.00	\$0.00	
TN040-001	Concrete replacement	1450		\$28,000.00		\$0.00	\$0.00	
TN040-001	Paint program	1460		\$0.00		\$0.00	\$0.00	
TN040-001	Replace roofs	1460		\$95,279.00		\$0.00	\$0.00	
TN040-002	Paint program	1460		\$0.00		\$0.00	\$0.00	
TN040-002	Tub surrounds and vents	1460		\$0.00		\$0.00	\$0.00	
TN040-002	Window and security screens	1460		\$0.00		\$0.00	\$0.00	
TN040-003	Window replacement	1470		\$10,000.00		\$0.00	\$0.00	
TN040-003	Maintenance shop and storage space	1470		\$30,000.00		\$0.00	\$0.00	

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Lexington Housing Authority		Grant Type and Number Capital Fund Program No: TN43P04050102 Replacement Housing Factor No:				Federal FY of Grant: FY 2002	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	03/30/04			09/30/05			
TN040-001	03/30/04			09/30/05			
TN040-002	03/30/04			09/30/05			
TN040-003	03/30/04			09/30/05			

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

PHAName: Lexington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04050101 Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2001
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 6/30/02
 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	\$27,742.00	\$27,742.00	\$27,742.00	\$27,742.00
2	1406 Operations	\$24,000.00	\$24,000.00	\$24,000.00	\$24,000.00
3	1408 Management Improvements	\$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	\$30,000.00	\$30,000.00	\$30,000.00	\$29,821.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$184,766.00	\$184,766.00	\$184,766.00	\$163,316.00
11	1465.1 Dwelling Equipment — Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Non dwelling Structures	\$1,988.00	\$1,988.00	\$1,988.00	\$1,988.00
13	1475 Non dwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
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	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 -20)	\$240,754.00	\$240,754.00	\$240,754.00	\$219,125.00

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Lexington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P04050101 Replacement Housing Factor Grant No:		Federal FY of Grant: FY 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: 6/30/02 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 21 Related to Energy Conservation Measures	\$186,754.00	\$186,754.00	\$186,754.00	\$114,269.00

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Lexington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P04050101 Replacement Housing Factor Grant No:				Federal FY of Grant: FY 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 Work
				Original	Revised	Funds Obligated	Funds Expended	
TN040-003	Non-Capital funds		1 LS	\$27,742.00	\$27,742.00	\$27,742.00	\$27,742.00	
TN040-003	Operations	1406	1 LS	\$24,000.00	\$24,000.00	\$24,000.00	\$24,000.00	
TN040-003	A/E Design Fees	1430	1 LS	\$22,523.00	\$22,523.00	\$22,523.00	\$22,523.00	
TN040-003	A/E Bid Fees	1430	1 LS	\$3,904.00	\$3,904.00	\$3,904.00	\$3,904.00	
TN040-003	A/E Construction Fees	1430	1 LS	\$3,573.00	\$3,573.00	\$3,573.00	\$3,394.00	
TN040-003	Security	1430	1 LS	\$0.00	\$0.00	\$0.00	\$0.00	
TN040-001	Roof at Parkview	1460	1 LS	\$0.00	\$0.00	\$0.00	\$0.00	
TN040-001	Window and security screen installation	1460	1 LS	\$97,632.00	\$97,632.00	\$97,632.00	\$87,869.00	
TN040-002	Install new windows w/security screens	1460	1 LS	\$87,134.00	\$87,134.00	\$87,134.00	\$75,447.00	
TN040-001	Roof installation	1470	1 LS	\$0.00	\$0.00	\$0.00	\$0.00	
TN040-001	Install new windows w/security screens	1470	1 LS	\$1,988.00	\$1,988.00	\$1,988.00	\$1,988.00	

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)					
Part I: Summary					
PHAName: Lexington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P04050100 Replacement Housing Factor Grant No:			Federal FY of Grant: FY 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: 3/31/02 <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	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$30,430.00	\$30,430.00	\$30,430.00	\$30,430.00
3	1408 Management Improvements	\$3,281.00	\$3,281.00	\$3,281.00	\$3,281.00
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	\$15,079.00	\$15,079.00	\$15,079.00	\$8,126.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$187,200.0	\$187,200.0	\$187,200.0	\$187,200.0
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	\$0.00	\$0.00	\$0.00	\$0.00
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	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 -20)	\$235,990.00	\$235,990.00	\$235,990.00	\$229,037.00
22	Amount of line 21 Related to LBP Activities	\$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 I: Summary

PHAName: Lexington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04050100 Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2000
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Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: **3/31/02**
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security – Soft Costs	\$6,000.00	\$11,029.00	\$11,029.00	\$4,076.00
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 21 Related to Energy Conservation Measures	\$187,200.00	\$187,200.00	\$187,200.00	\$187,200.00

Attachment H: Deconcentration Policy

1. DECONCENTRATION POLICY
 - a. The objective of the Deconcentration Policy for the Lexington Housing Authority (LHA) 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 LHA 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 LHA does not concentrate families with higher or lower income levels in any one development, the LHA will track the status of family income, by development, on a monthly basis utilizing income reports generated by the LHA's computer system.
 - b. The LHA 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 Lexington Housing Authority will take the following actions:
 - 1) At the beginning of each fiscal year, the Lexington 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 LHA fiscal year.
 - 2) The LHA 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 LHA will skip families on the waiting list or skip developments to accomplish these goals.
 - b. The Lexington Housing Authority will not hold units vacant to accomplish these goals.

Attachment I: Deconcentration and Income Mixing

Component 3, (6) Deconcentration and Income Mixing

- a. Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name :	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
None			