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

FINAL

PHA Plans

5 Year Plan for Fiscal Years 2004 - 2008
Annual Plan for Fiscal Year 2004

Franklin Housing Authority
100 Spring Street
Franklin, TN 37065-0304

TN035v04

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

HUD 50075
OMB Approval No: 2577-0226
Expires: 03/31/2002

PHA Plan
Agency Identification

PHA Name: Franklin Housing Authority

PHA Number: TN35

PHA Fiscal Year Beginning: (mm/yyyy) 01/01/04

Public Access to Information

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

☒ Main administrative office of the PHA
☐ PHA development management offices
☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

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5-YEAR PLAN
PHA FISCAL YEARS 2004 - 2008
[24 CFR Part 903.5]

A. Mission

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

☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☒ The PHA's mission is: (state mission here)

The mission of the Franklin Housing Authority is to assist low-income families with safe, decent, and affordable housing opportunities as they strive to achieve self-sufficiency and improve the quality of their lives. The housing Authority is committed to operating in an efficient, ethical, and professional manner. The Housing Authority will create and maintain partnerships with its clients and appropriate community agencies in order to accomplish this mission.

B. Goals

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

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

☐ PHA Goal: Expand the supply of assisted housing
Objectives:
- ☐ Apply for additional rental vouchers:
- ☐ Reduce public housing vacancies:
- ☐ Leverage private or other public funds to create additional housing opportunities:
- ☐ Acquire or build units or developments
- ☐ Other (list below)

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☒ PHA Goal: Improve the quality of assisted housing

Objectives:

- ☐ Improve public housing management: (PHAS score)
- ☐ Improve voucher management: (SEMAP score)
- ☐ Increase customer satisfaction:
- ☐ Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
- ☐ Renovate or modernize public housing units:
- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☒ Other: (list below)

Manage the Franklin Housing Authority in a manner that results in full compliance with applicable statues and regulations as defined by program audit findings.

The Franklin Housing Authority shall promote a motivating work environment with a capable and efficient team of employees to operate as a customer-friendly and fiscally prudent leader in the affordable housing industry.

Deliver timely and high quality maintenance services to the residents of the Franklin Housing Authority.

The Franklin Housing Authority shall operate so that income exceeds expenses every year.

The Franklin Housing Authority will continue to ensure that there are at least two positive stories a year in the local media about the housing authority or one of its residents.

☐ PHA Goal: Increase assisted housing choices

Objectives:

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

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

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

The Franklin Housing Authority shall attempt to attract a police officer to live in its developments by December 31, 2004.

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

☐ PHA Goal: Promote self-sufficiency and asset development of assisted households
Objectives:
- ☐ Increase the number and percentage of employed persons in assisted families:
- ☐ Provide or attract supportive services to improve assistance recipients' employability:
- ☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

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

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

Other PHA Goals and Objectives: (list below)

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Annual PHA Plan
PHA Fiscal Year 2004
[24 CFR Part 903.7]

i. Annual Plan Type:
Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

Streamlined Plan:

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

☐ **Troubled Agency Plan**

ii. Executive Summary of the Annual PHA Plan
[24 CFR Part 903.7 9 (r)]
Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

Not Required

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iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

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

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Attachments

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

Required Attachments:

☒ Admissions Policy for Deconcentration **(See Attachment F)**

☒ FY 2004 Capital Fund Program Annual Statement **(See Attachment H)**

☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

☐ PHA Management Organizational Chart

☒ FY 2004 Capital Fund Program 5 Year Action Plan **(See Attachment H)**

☐ Public Housing Drug Elimination Program (PHDEP) Plan

☐ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)

☒ Other (List below, providing each attachment name)

Attachment A – Definition of Significant Amendment and Substantial Deviation
Attachment B – Summary of Pet Policy
Attachment C – Resident Membership on the PHA Governing Board
Attachment D – Membership of the Resident Advisory Board
Attachment E – Progress in meeting 5-Year Plan Mission and Goals
Attachment G – REAC Plans (Financial, Management and Physical)
Attachment I – Performance and Evaluation Reports
Attachment J – Resident Comments
Attachment K – Community Service Policy

Supporting Documents Available for Review

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

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 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 ☒ check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies

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List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
X	Public housing rent determination policies, including the method for setting public housing flat rents ☒ 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 ☒ check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
NA	Section 8 rent determination (payment standard) policies ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
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
NA	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
NA	Any required policies governing any Section 8 special housing types ☐ check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures ☐ check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
NA	Section 8 informal review and hearing procedures ☐ 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
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	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
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition

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List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, 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
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program (section _____of the Section 8 Administrative Plan)	Annual Plan: Homeownership
NA	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
NA	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
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	PHDEP-related documentation: · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · 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); · 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) ☐ check here if included in the public housing A & O Policy	Pet Policy

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List of Supporting Documents Available for Review		
Applicable & On Display	**Supporting Document**	**Related Plan Component**
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
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
NA	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	433	4	4	2	1	NA	NA
Income >30% but <=50% of AMI	465	3	3	2	1	NA	NA
Income >50% but <80% of AMI	306	2	2	2	1	NA	NA
Elderly	339	3	3	2	1	NA	NA
Families with Disabilities	NA	2	2	2	1	NA	NA
Race/Ethnicity(w)	1173	NA	NA	NA	NA	NA	NA
Race/Ethnicity(b)	507	NA	NA	NA	NA	NA	NA
Race/Ethnicity(h)	25	NA	NA	NA	NA	NA	NA
Race/Ethnicity							

SOURCE: CHAS Data, City of Franklin, Tennessee, 1990 Census

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

☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 2000
☐ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
☐ American Housing Survey data
Indicate year:
☐ Other housing market study
Indicate year:
☒ Other sources: (list and indicate year of information)
CHAS Data, Franklin City Jurisdiction area 1990 Census

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one) ☐ Section 8 tenant-based assistance ☒ Public Housing ☐ Combined Section 8 and Public Housing ☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	142		61
Extremely low income <=30% AMI	142	100%	
Very low income (>30% but <=50% AMI)	0	0%	
Low income (>50% but <80% AMI)	0	0%	
Families with children	67	47%	
Elderly families	59	42%	
Families with Disabilities	0	0%	
Race/ethnicity (Black)	99	70%	
Race/ethnicity (White)	43	30%	
Race/ethnicity (Hisp)	0	0%	
Race/ethnicity (Other)	0	0%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR/0BRr	59	42%	15
2 BR	42	29%	11
3 BR	33	23%	28
4 BR	7	5%	7
5 BR	1	1%	0

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Housing Needs of Families on the Waiting List			
5+ BR	NA	0%	NA

Is the waiting list closed (select one)? ☒ No ☐ Yes
If yes:
NA How long has it been closed (# of months)?
NA Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?
☐ No ☒ Yes

C. Strategy for Addressing Needs

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

Although the State Consolidated Plan indicates that housing affordability and quality are a problem in Tennessee, our waiting list does not reflect this need. Our current waiting time for an appointment to receive housing is approximately two months.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

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

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Strategy 2: Increase the number of affordable housing units by:
Select all that apply

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

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

Strategy 1: Target available assistance to families at or below 30 % of AMI
Select all that apply

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

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

Strategy 1: Target available assistance to families at or below 50% of AMI
Select all that apply

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

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:
Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:
Select all that apply

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

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

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

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

Strategy 2: Conduct activities to affirmatively further fair housing
Select all that apply

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

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

(2) Reasons for Selecting Strategies
Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

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

☐ Results of consultation with advocacy groups
☐ Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

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

Financial Resources: Planned Sources and Uses		
Sources	**Planned $**	**Planned Uses**
1. **Federal Grants (FY 2004 grants)**		
a) Public Housing Operating Fund	400,822	
b) Public Housing Capital Fund	449,386	
c) HOPE VI Revitalization	0	
d) HOPE VI Demolition	0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	0	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	0	
g) Resident Opportunity and Self-Sufficiency Grants	0	
h) Community Development Block Grant	0	
i) HOME	0	
Other Federal Grants (list below)	0	
2. Prior Year Federal Grants (unobligated funds only) (list below)		
2003 CFP 2nd Increment	94,914	Capital Improvements
2003 CFP	433,373	Capital Improvements
2002 CFP	15,980	Capital Improvements
2001 CFP	0	
2002 Replacement Housing	18,126	Replacement Housing
2001 Replacement Housing	13,997	Replacement Housing
2003 Replacement Housing	16.013	Replacement Housing
3. Public Housing Dwelling Rental Income	652,068	Operations
4. Other income (list below)		
Interest	8,480	Operations
Excess utility charges	73,690	Operations
5. Non-federal sources (list below)	0	
Total resources	$2,160,852	

3. PHA Policies Governing Eligibility, Selection, and Admissions

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[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

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

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

☒ Criminal or Drug-related activity
☒ Rental history
☒ Housekeeping
☒ Other (describe) **Credit history**

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

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

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

(2)Waiting List Organization

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

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

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

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

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

1. How many site-based waiting lists will the PHA operate in the coming year?

2. ☐ Yes ☒ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?

3. ☐ Yes ☒ No: May families be on more than one list simultaneously
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? **Not Applicable**

☐ PHA main administrative office
☐ All PHA development management offices
☐ Management offices at developments with site-based waiting lists
☐ At the development to which they would like to apply
☐ Other (list below)

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

☐ One
☒ Two
☐ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

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

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b. Transfer policies:
In what circumstances will transfers take precedence over new admissions? (list below)

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

c. Preferences

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

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

Former Federal preferences:

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

Other preferences: (select below)

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

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

3 Date and Time

Former Federal preferences:

1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

2 Victims of domestic violence
Substandard housing
Homelessness
High rent burden

Other preferences (select all that apply)

1 Working families and those unable to work because of age or disability
Veterans and veterans' families
Residents who live and/or work in the jurisdiction

2 Those enrolled currently in educational, training, or upward mobility programs
Households that contribute to meeting income goals (broad range of incomes)
Households that contribute to meeting income requirements (targeting)
Those previously enrolled in educational, training, or upward mobility programs
Victims of reprisals or hate crimes
Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

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

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

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

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			

B. Section 8

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

Not Applicable

(1) Eligibility

Not Applicable

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

☐ Criminal or drug-related activity only to the extent required by law or regulation
☐ Criminal and drug-related activity, more extensively than required by law or regulation
☐ More general screening than criminal and drug-related activity (list factors below)
☐ Other (list below)

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

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

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

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

☐ Criminal or drug-related activity
☐ Other (describe below)

(2) Waiting List Organization **Not Applicable**

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

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

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

☐ PHA main administrative office
☐ Other (list below)

(3) Search Time **Not Applicable**

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

If yes, state circumstances below:

(4) Admissions Preferences **Not Applicable**

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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☐ Those previously enrolled in educational, training, or upward mobility programs
☐ Victims of reprisals or hate crimes
☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)
☐ Date and time of application
☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)
☐ This preference has previously been reviewed and approved by HUD
☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)
☐ The PHA applies preferences within income tiers
☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs **Not Applicable**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)
☐ The Section 8 Administrative Plan
☐ Briefing sessions and written materials
☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?
☐ Through published notices
☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

☐ $0
☐ $1-$25
☒ $26-$50 **($50.00)**

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

3. If yes to question 2, list these policies below**:** **Not Applicable**

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

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

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

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d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

☐ For the earned income of a previously unemployed household member
☐ For increases in earned income
☐ Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

☐ For household heads
☐ For other family members
☐ For transportation expenses
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
☐ Other (describe below)

e. Ceiling rents

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

☒ Yes for all developments
☐ Yes but only for some developments
☐ No

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

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

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

☐ Market comparability study
☒ Fair market rents (FMR)
☐ 95th percentile rents
☐ 75 percent of operating costs
☐ 100 percent of operating costs for general occupancy (family) developments
☐ Operating costs plus debt service
☐ The “rental value” of the unit
☐ Other (list below)

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f. Rent re-determinations:

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

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

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

(2) Flat Rents

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

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

B. Section 8 Tenant-Based Assistance Not Applicable

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

(1) Payment Standards

Describe the voucher payment standards and policies.

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

☐ At or above 90% but below100% of FMR
☐ 100% of FMR
☐ Above 100% but at or below 110% of FMR
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

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

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

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

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

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

☐ Annually
☐ Other (list below)

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

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

(2) Minimum Rent

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

☐ $0
☐ $1-$25
☐ $26-$50

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

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

☐ An organization chart showing the PHA's management structure and organization is attached.
☒ A brief description of the management structure and organization of the PHA follows:

1. **Executive Director**
2. **Assistant Director**
3. **Administrative Assistant**
4. **Maintenance Supervisor (Mechanics and Aides under Supervisor)**
5. **Applications Clerk**
6. **CFP Grant Coordinator**
7. **Clerk-of-the Works**

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B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	297	75
Section 8 Vouchers	NA	NA
Section 8 Certificates	NA	NA
Section 8 Mod Rehab	NA	NA
Special Purpose Section 8 Certificates/Vouchers (list individually)	NA	NA
Public Housing Drug Elimination Program (PHDEP)	NA	NA
Other Federal Programs(list individually)	NA	NA

C. Management and Maintenance Policies

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

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

ACOP
Affirmative Action Policy
Disposition Policy
Dwelling Lease Policy
Grievance Policy
Investment Policy
Occupancy Policy
One-Strike-Your-Out Policy
Painting Policy
Personnel Policy
Pest Control Policy
Pet Policy
Preventative Maintenance Policy
Procurement Policy
Rent Collection Policy
Safety PolicyTransfer Policy
Transfer Policy
Travel Policy

(2) Section 8 Management: (list below) **Not Applicable**

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6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

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

A. Public Housing

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

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

☒ PHA main administrative office
☐ PHA development management offices
☐ Other (list below)

B. Section 8 Tenant-Based Assistance Not Applicable

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

If yes, list additions to federal requirements below:

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

☐ PHA main administrative office
☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

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

A. Capital Fund Activities

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

(1) Capital Fund Program Annual Statement

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

Select one:

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

-or-

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

(2) Optional 5-Year Action Plan

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

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

b. If yes to question a, select one:

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

-or-

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

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

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

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

b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
   - ☐ Revitalization Plan under development
   - ☐ Revitalization Plan submitted, pending approval
   - ☐ Revitalization Plan approved
   - ☐ Activities pursuant to an approved Revitalization Plan underway

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

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

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

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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

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

2. Activity Description

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

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

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

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

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10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

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

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

2. Activity Description **Not Applicable**

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

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

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(B) Voluntary Conversion Initial Assessments

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

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? **Five (all)**

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

Development Name	Number of Units
None	

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

2. Activity Description **Not Applicable**

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

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

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

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

2. Program Description: **Not Applicable**

a. Size of Program

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

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

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

b. PHA established eligibility criteria

☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
If yes, list criteria below:

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12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]
Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

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

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

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

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

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

☐ Public housing rent determination policies
☐ Public housing admissions policies
☐ Section 8 admissions policies
☐ Preference in admission to section 8 for certain public housing families
☒ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
☐ Preference/eligibility for public housing homeownership option participation
☐ Preference/eligibility for section 8 homeownership option participation
☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

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☒ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Headstart Program	30	Anyone	121 Spring Street PHA Unit	Public Housing
Adult Education	40	Anyone	161 Spring Street PHA Unit	Public Housing

(2) Family Self Sufficiency program/s

a. Participation Description **Not Applicable**

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2000 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

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

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
☒ Informing residents of new policy on admission and reexamination
☐ Actively notifying residents of new policy at times in addition to admission and reexamination.

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☐ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
☐ Establishing a protocol for exchange of information with all appropriate TANF agencies
☐ Other: (list below)

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

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

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

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

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

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

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

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

3. Which developments are most affected? (list below) **TN035-002 & -004 (Natchez, Short Court)**

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

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

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

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

C. Coordination between PHA and the police

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

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

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

D. Additional information as required by PHDEP/PHDEP Plan Not Applicable

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

☐ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?
☐ Yes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename:

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14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

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

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

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

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

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

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock , including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

☐ Not applicable
☐ Private management
☐ Development-based accounting
☐ Comprehensive stock assessment
☒ Other: (list below) **See Attachment G**

3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

☐ Attached at Attachment (File name)

☒ Provided below:

See Attachment J

3. In what manner did the PHA address those comments? (select all that apply) **NA**

☐ Considered comments, but determined that no changes to the PHA Plan were necessary.

☒ The PHA changed portions of the PHA Plan in response to comments

List changes below:

See Attachment J

☐ Other: (list below) **NA**

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

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

See Attachment C

2. ☐ Yes ☒ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process **Not Applicable**

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

☐ Candidates were nominated by resident and assisted family organizations

☐ Candidates could be nominated by any adult recipient of PHA assistance

☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot

☐ Other: (describe)

b. Eligible candidates: (select one)

☐ Any recipient of PHA assistance

☐ Any head of household receiving PHA assistance

☐ Any adult recipient of PHA assistance

☐ Any adult member of a resident or assisted family organization

☐ Other (list)

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c. Eligible voters: (select all that apply)

☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)

☐ Representatives of all PHA resident and assisted family organizations

☐ Other (list)

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)
   2000 State of Tennessee Housing and Community Development Consolidated Plan

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

☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

☐ Other: (list below)

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

D. Other Information Required by HUD

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

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Attachments

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

ATTACHMENT A - DEFINITION OF SUBSTANTIAL DEVIATION

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

1. Changes to rent or admissions policies or organization of the waiting list.

2. Addition of non-emergency work items (items not included in the Annual Statement or 5-Year Action Plan) or a change in the use of replacement reserve funds under the Capital Fund.

3. Any change with regard to demolition or disposition, designation, or homeownership programs or conversion activities.

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

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ATTACHMENT B – SUMMARY OF PET POLICY

LEASE ADDENDUM TO ALLOW FOR PETS

Lessee: _____ Account No. _____
Co Lessee: _____ Pet Deposit: _____
Name and Description of Pet: _____

I, _____, agree to the following rules and statement made in this Lease Addendum as set by the Franklin Housing Authority. When Franklin Housing Authority refers to pets, that means that only dogs, cats, birds and fish are included. This Lease Addendum tell me that I a, responsible for and what Franklin Housing Authority is responsible for concerning my dog or cat.

Only one pet is allowed per family.

I also understand that me pet cannot be larger than; (a) Dog – 15 inches tall when full grown; and (b) Cat – 10 inches tall when full grown.

I agree to pay $100.00 as a pet deposit. I must pay this amount in full before I can have my pet in my apartment. The Franklin Housing Authority can use this money to pay for damages "beyond normal wear and tear" caused by my pet, or for any other damages to Franklin Housing Authority property caused by my pet while I am a resident. I understand that this pet deposit is paid in addition to my required Security Deposit, and this amount must remain in my account during my tenancy as a resident or as long as I have a pet.

<u>What I Must Do:</u>

1. I must provide Franklin Housing Authority with all verification of my pet's inoculations, neutering, etc. before I can have my pet and I must bring verification of inoculations each year at the annual reexamination time.

2. I must make sure my pet receives the medical care necessary for my pet to maintain good health.

3. I must have my dog on a leash and muzzle any time it is out of my own apartment. I must have my cat on a leash any time it is out of my own apartment.

4. I must not walk or exercise m pet anywhere in the building. I will exercise my pet in the areas Franklin Housing Authority grounds that are marked as exercise areas.

5. I must accept complete responsibility for any damages to property caused by my pet. This includes other residents' property as well as all Franklin Housing Authority property.

6. I will hold harmless Franklin Housing Authority for any injuries or damages caused by my pet.

7. I must accept complete responsibility for the behavior and conduct of my pet at all times.

8. In the event of my pet's death, I must dispose of the remains according to local health regulations.

<u>What Franklin Housing Authority Will Not Do:</u>

1. When it is necessary for Franklin Housing Authority to spray for fleas and ticks or other insects caused by my pet other than at the regular appointed time, Franklin Housing Authority will charge me for the cost of spraying.

2. Franklin Housing Authority will dispose of my pet in any way necessary, if at any time I leave my pet unattended or abandoned.

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3. Franklin Housing Authority will take appropriate actions if my pet is causing the living or working conditions in my building to be unsafe, unsanitary or indecent.

4. Franklin Housing Authority will give me a Notice to Vacate and will end my Lease if there are repeated or continuous problems with my pet.

Do I Understand This Lease Addendum

By signing this Lease Addendum, I am saying that Franklin Housing Authority has gone over it with me. I am also saying that I understand all of it. I understand that this is an agreement me and the Housing Authority and that it is a legally binding contract between me and Franklin Housing Authority.

We signed this Lease Addendum on _____, 20, _____.

_____	_____
Lessee	Franklin Housing Authority
_____	By:_____
	Title:_____

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ATTACHMENT C – RESIDENT MEMBERSHIP ON THE PHA GOVERNING BOARD OF COMMISSIONERS

Ethel Scruggs
635 Cherokee Place
Franklin, TN 37064

ATTACHMENT D – MEMBERSHIP OF RESIDENT ADVISORY BOARD

Janice Booker
115 Natchez Street
Franklin, TN 37064

Georgia Crowder
641 Cherokee Place
Franklin, TN 37064

Ethel Scruggs
635 Cherokee Place
Franklin, TN 37064

Tambera Egan
1147 Park Street
Franklin, TN 37064

James Biggers
110 Natchez Street
Franklin, TN 37064

ATTACHMENT E – PROGRESS IN MEETING 5-YEAR PLAN MISSION AND GOALS

1. **GOAL – Expand the supply of assisted housing:** The FHA will continue its efforts to expand the supply of assisted housing in order to increase the availability of decent, safe and affordable housing. Due to limited level of HUD funding for new housing construction, the FHA continues to seek other funding opportunities.

2. **GOAL – Improve the quality of assisted housing:** The FHA continues to manage the authority in a manner that is in full compliance with all applicable federal regulations. The FHA has been working hard at the promotion of a motivating work environment in an effort to operate as a customer-friendly housing provider.

   The FHA continues to improve on the provision of timely and quality maintenance services to all residents. All emergency work orders are handled immediately. The FHA is in the process of creating a preventative maintenance plan.

3. **GOAL – Provide an improved living environment through a police officer resident in the FHA developments:** The FHA continues to solicit a police officer(s) to reside in the public housing developments.

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ATTACHMENT F - DECONCENTRATION POLICY

1. DECONCENTRATION POLICY

   a. The objective of the Deconcentration Policy for the Franklin Housing Authority (FHA) 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 FHA 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 FHA does not concentrate families with higher or lower income levels in any one development, the FHA will track the status of family income, by development, on a monthly basis utilizing income reports generated by the FHA's computer system.

   b. The FHA 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 Franklin Housing Authority will take the following actions:

      1) At the beginning of each fiscal year the Franklin 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 FHA fiscal year.
      2) The FHA 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 FHA will skip families on the waiting list or skip developments to accomplish these goals.

   b. The Franklin Housing Authority will not hold units vacant to accomplish these goals.

ATTACHMENT G – REAC MANAGEMENT, FINANCIAL AND PHYSICAL PLANS

The Franklin Housing Authority continues to make progress in our efforts to increase our Management, Financial and Physical Assessment component scores.

Management Component

The FHA intends to improve the management component score of 26 through the reduction of vacant unit turn-around time. Administrative staff tracks the status of each vacant unit and works closely with the FHA maintenance crew.

The FHA is also in the process of renovating vacant public housing units. These efforts will greatly improve the occupancy totals as well as the marketability of the renovated units.

Physical Component

The renovation of public housing units as discussed above in the Management Plan will also improve the FHA's physical component total score of 18.

In addition to these major renovation activities of various developments, the FHA's maintenance staff will be replacing inoperable smoke detectors and GFI receptacles in all developments. The FHA will also identify and repair other safety and health deficiencies observed in the units. These efforts will be repeated on an ongoing scheduled basis.

Financial Component

The FHA intends to improve the financial component score of 25 through the maximization of rental revenues by reducing vacancies and unit turn-around time. The FHA will also improve expense management through monitoring and staff control measures. In addition, the FHA will strive to collect tenant receivables in a timely fashion.

The implementation of the above discussed measures will improve the scores for the Management, Physical and Financial components of the REAC assessment system, as well as improve the overall condition of the FHA, thus enabling the FHA is achieve high performer status again.

Attachment H

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program: TN43P03550104 Capital Fund Program Replacement Housing Factor Grant No:	FY 2004

☒ 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	$89,800.00			
3	1408 Management Improvements	$14,500.00			
4	1410 Administration	$500.00			
5	1411 Audit	$0.00			
6	1415 liquidated Damages	$0.00			
7	1430 Fees and Costs	$106,500.00			
8	1440 Site Acquisition	$0.00			
9	1450 Site Improvement	$45,380.00			
10	1460 Dwelling Structures	$129,950.00			
11	1465.1 Dwelling Equipment—Nonexpendable	$0.00			
12	1470 Nondwelling Structures	$0.00			
13	1475 Nondwelling Equipment	$41,000.00			
14	1485 Demolition	$0.00			
15	1490 Replacement Reserve	$0.00			
16	1492 Moving to Work Demonstration	$0.00			
17	1495.1 Relocation Costs	$1,000.00			
18	1498 Mod Used for Development	$0.00			
19	1502 Contingency	$20,756.00			
20	Amount of Annual Grant: (sum of lines 2-19)	$449,386.00			
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 **Attachment H**
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Franklin Housing Authority		**Grant Type and Number** Capital Fund Program #: TN43P03550104 Capital Fund Program Replacement Housing Factor #:				**Federal FY of Grant:** FY 2004		
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	Operating expenses	1406	1	$89,800.00				
	Purchase computer software	1408	1	$1,000.00				
	Salary for Resident Services Coordinator	1408	1	$12,500.00				
	Training for maintenance staff	1408	1	$1,000.00				
	Advertising for bids	1410	1	$500.00				
	A/E design fees	1430	1	$30,000.00				
	A/E inspection fees	1430	1	$15,000.00				
	CFP Plan preparation	1430	1	$6,000.00				
	Full-time clerk cost	1430	1	$20,000.00				
	Salary for Modernization Coordinator	1430	1	$30,000.00				
	Physical needs assessment preparation	1430	1	$5,000.00				
	Revise utility allowance	1430	1	$500.00				
	Purchase computer hardware	1475	1	$1,000.00				
	Purchase pickup truck for maintenance	1475	1	$20,000.00				
	Purchase vehicle for management	1475	1	$20,000.00				
	Resident relocation	1495	1	$1,000.00				
	Contingencies	1502	1	$11,756.00				
TN37P035001	Trim large trees	1450	10	$5,000.00				
TN37P035003	Trim large trees	1450	10	$5,000.00				
TN37P035003	Install clean-outs on sewer laterals	1450	16	$4,000.00				
TN37P035003	Remove existing and install new 4" sanitary sewer laterals.	1450	302	$7,550.00				
TN37P035003	Remove existing and install new 6" sanitary sewer laterals.	1450	661	$19,830.00				
TN37P035003	Replace deteriorated sidewalks.	1450	500	$4,000.00				
TN37P035005	Install new backsplash at range.	1460	30	$2,550.00				
TN37P035005	Install new ducted range hood.	1460	30	$7,050.00				

Annual Statement/Performance and Evaluation Report

Attachment H

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Franklin Housing Authority	Grant Type and Number Capital Fund Program #: TN43P03550104 Capital Fund Program Replacement Housing Factor #:	Federal FY of Grant: FY 2004

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	
TN37P035005	Replace base cabinets.	1460	30	$30,000.00				
TN37P035005	Replace countertops.	1460	30	$9,000.00				
TN37P035005	Replace wall cabinets	1460	30	$27,000.00				
TN37P035005	Install new plywood access panel at washing machine box.	1460	30	$2,250.00				
TN37P035005	Install additional electrical outlet at kitchen countertop.	1460	30	$1,800.00				
TN37P035005	Install GFI protected outlet within 6' of sink.	1460	30	$2,250.00				
TN37P035005	Replace refrigerator outlet with single pole dedicated circuit.	1460	30	$2,250.00				
TN37P035005	Install new kitchen sink drain lines to tee in wall.	1460	30	$2,250.00				
TN37P035005	Install new kitchen sink faucet.	1460	30	$4,500.00				
TN37P035005	Install new kitchen sink stops and supply lines.	1460	30	$1,050.00				
TN37P035005	Install new double-bowl kitchen sink.	1460	30	$6,000.00				
TN37P035005	Replace washing machine box, supplies and drain line to stack.	1460	30	$4,500.00				
TN37P035005	Replace electric water heater.	1460	50	$17,500.00				
TN37P035005	Scrape, patch and paint all walls and ceilings.	1460	25000	$10,000.00				

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

PHA Name: Franklin Housing Authority	**Grant Type and Number** Capital Fund Program #: TN43P03550104 Capital Fund Program Replacement Housing Factor #:	**Federal FY of Grant:** FY 2004

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	
TN37P035001 Harpeth Homes	6/30/06			6/30/08			
TN37P035002 Reddick	6/30/06			6/30/08			
TN37P035003 Johnson Circle	6/30/06			6/30/08			
TN37P035004 Scattered	6/30/06			6/30/08			
TN37P035005 Scattered	6/30/06			6/30/08			
Software	6/30/06			6/30/08			
Resident Service Coord.	6/30/06			6/30/08			
Maintenance Training	6/30/06			6/30/08			

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

Attachment H

PHA Name: **Franklin Housing Authority**

☒ **Original 5-Year Plan**
☐ **Revision No:**

Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2005 PHA FY: 2005	Work Statement for Year 3 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 4 FFY Grant: 2007 PHA FY: 2007	Work Statement for Year 5 FFY Grant: 2008 PHA FY: 2008
	Annual Statement				
PHA-Wide		$8,524.00	$24,266.00	$14,196.00	$1,971.00
TN37P035001 Harpeth Homes		$48,625.00	$0.00	$82,182.00	$52,235.00
TN37P035002 Reddick		$0.00	$218,820.00	$0.00	$0.00
TN37P035003 Johnson Circle		$13,950.00	$0.00	$0.00	$0.00
TN37P035004 Scattered		$0.00	$0.00	$142,008.00	$186,880.00
TN37P035005 Scattered		$177,626.00	$0.00	$0.00	$0.00
CFP Funds Listed for 5-year planning		$248,725.00	$243,086.00	$238,386.00	$241,086.00
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Attachment H

Activities for Year 1	Activities for Year : 2 FFY Grant: 2005 PHA FY: 2005			Activities for Year: 3 FFY Grant: 2006 PHA FY: 2006		
	Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
See	PHA-Wide		$8,524.00	PHA-Wide		$24,266.00
Annual	TN37P035001	Bathroom Renovations	$5,100.00	TN37P035002	Bathroom Renovations	$6,600.00
Statement		Mechanical	$5,950.00		Mechanical	$7,700.00
		Nondwelling Structures	$1,900.00		Paint	$8,750.00
		Paint	$8,750.00		Site Improvements	$57,800.00
		Site Improvements	$26,925.00		Windows	$137,970.00
	TN37P035003	Bathroom Renovations	$2,400.00			
		Mechanical	$2,800.00			
		Paint	$8,750.00			
	TN37P035005	Bathroom Renovations	$65,120.00			
		Building Exterior	$1,500.00			
		Carpentry	$4,080.00			
		Doors	$27,250.00			
		Electrical	$27,730.00			
		Finishes	$21,906.00			
		HVAC	$14,000.00			
		Paint	$9,940.00			
		Plumbing	$600.00			
		Site Improvements	$5,500.00			
Total CFP Estimated Cost			$248,725.00			$243,086.00

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Attachment H

Activities for Year: 4 FFY Grant: 2007 PHA FY: 2007			Activities for Year: 5 FFY Grant: 2008 PHA FY: 2008		
Development Name/Number	**Major Work Categories**	**Estimated Cost**	**Development Name/Number**	**Major Work Categories**	**Estimated Cost**
PHA-Wide		$14,196.00	PHA-Wide		$1,971.00
TN37P035001	Site Improvements	$82,182.00	TN37P035001	Building Exterior	$52,235.00
TN37P035004	Bathroom Renovations	$13,500.00	TN37P035004	Windows	$186,880.00
	Mechanical	$15,750.00			
	Paint	$8,750.00			
	Site Improvements	$104,008.00			
Total CFP Estimated Cost		$238,386.00			$241,086.00

Annual Statement/Performance and Evaluation Report
Attachment H

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03550104	FY 2004

☒ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	$0.00		0.00	0.00
2	1406 Operations	$0.00		0.00	0.00
3	1408 Management Improvements	$0.00		0.00	0.00
4	1410 Administration	$0.00		0.00	0.00
5	1411 Audit	$0.00		0.00	0.00
6	1415 Liquidated Damages	$0.00		0.00	0.00
7	1430 Fees and Costs	$0.00		0.00	0.00
8	1440 Site Acquisition	$0.00		0.00	0.00
9	1450 Site Improvement	$0.00		0.00	0.00
10	1460 Dwelling Structures	$0.00		0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	$0.00		0.00	0.00
12	1470 Nondwelling Structures	$0.00		0.00	0.00
13	1475 Nondwelling Equipment	$0.00		0.00	0.00
14	1485 Demolition	$0.00		0.00	0.00
15	1490 Replacement Reserve	$0.00		0.00	0.00
16	1492 Moving to Work Demonstration	$0.00		0.00	0.00
17	1495.1 Relocation Costs	$0.00		0.00	0.00
18	1499 Development Activities	$16,013.00		0.00	0.00
19	1501 Collaterization or Debt Service	$0.00		0.00	0.00
20	1502 Contingency	$0.00		0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	$16,013.00		0.00	0.00
22	Amount of line 21 Related to LBP Activities	$0.00		0.00	0.00

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

PHA Name: Franklin Housing Authority		**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03550104				**Federal FY of Grant:** FY 2004		
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	
TN035-005	Development Activities	1499	1	$16,013.00		0.00	0.00	

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

PHA Name: Franklin Housing Authority	**Grant Type and Number** Capital Fund Program No: Replacement Housing Factor No: TN43R03550104	**Federal FY of Grant:** FY 2004

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	
TN035-005	06/30/06			06/30/08			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03550103	FY 2003

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 06/30/03 ☐ 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
2	1406 Operations	$0.00		0.00	0.00
3	1408 Management Improvements	$0.00		0.00	0.00
4	1410 Administration	$0.00		0.00	0.00
5	1411 Audit	$0.00		0.00	0.00
6	1415 Liquidated Damages	$0.00		0.00	0.00
7	1430 Fees and Costs	$0.00		0.00	0.00
8	1440 Site Acquisition	$0.00		0.00	0.00
9	1450 Site Improvement	$0.00		0.00	0.00
10	1460 Dwelling Structures	$0.00		0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	$0.00		0.00	0.00
12	1470 Nondwelling Structures	$0.00		0.00	0.00
13	1475 Nondwelling Equipment	$0.00		0.00	0.00
14	1485 Demolition	$0.00		0.00	0.00
15	1490 Replacement Reserve	$0.00		0.00	0.00
16	1492 Moving to Work Demonstration	$0.00		0.00	0.00
17	1495.1 Relocation Costs	$0.00		0.00	0.00
18	1499 Development Activities	$16,013.00		0.00	0.00
19	1501 Collaterization or Debt Service	$0.00		0.00	0.00
20	1502 Contingency	$0.00		0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	$16,013.00		0.00	0.00
22	Amount of line 21 Related to LBP Activities	$0.00		0.00	0.00

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

PHA Name: Franklin Housing Authority		**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03550103				**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 Work
				Original	Revised	Funds Obligated	Funds Expended	
TN035-005	Development Activities	1499	1	$16,013.00		0.00	0.00	

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

PHA Name: Franklin Housing Authority	**Grant Type and Number** Capital Fund Program No: Replacement Housing Factor No: TN43R03550103	**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	
TN035-005	06/30/05			06/30/07			

Annual Statement/Performance and Evaluation Report
Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part 1: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program: TN43P03550103 Capital Fund Program Replacement Housing Factor Grant No:	FY 2003

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: 06/30/03 ☐ 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
2	1406 Operations	$86,674.00		$0.00	$0.00
3	1408 Management Improvements	$13,500.00		$0.00	$0.00
4	1410 Administration	$1,000.00		$0.00	$0.00
5	1411 Audit	$0.00		$0.00	$0.00
6	1415 liquidated Damages	$0.00		$0.00	$0.00
7	1430 Fees and Costs	$109,000.00		$0.00	$0.00
8	1440 Site Acquisition	$0.00		$0.00	$0.00
9	1450 Site Improvement	$10,000.00		$0.00	$0.00
10	1460 Dwelling Structures	$143,570.00		$0.00	$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	$0.00		$0.00	$0.00
12	1470 Nondwelling Structures	$0.00		$0.00	$0.00
13	1475 Nondwelling Equipment	$30,000.00		$0.00	$0.00
14	1485 Demolition	$0.00		$0.00	$0.00
15	1490 Replacement Reserve	$0.00		$0.00	$0.00
16	1492 Moving to Work Demonstration	$0.00		$0.00	$0.00
17	1495.1 Relocation Costs	$1,000.00		$0.00	$0.00
18	1498 Mod Used for Development	$38,629.00		$0.00	$0.00
19	1502 Contingency	$0.00		$0.00	$0.00
20	Amount of Annual Grant: (sum of lines 2-19)	$433,373.00		$0.00	$0.00
21	Amount of line 20 Related to LBP Activities	$0.00		$0.00	$0.00
22	Amount of line 20 Related to Section 504 Compliance	$0.00		$0.00	$0.00
23	Amount of line 20 Related to Security	$0.00		$0.00	$0.00
24	Amount of line 20 Related to Energy Conservation Measure	$0.00		$0.00	$0.00

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

PHA Name: Franklin Housing Authority		**Grant Type and Number** Capital Fund Program #: TN43P03550103 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	Operating expenses	1406	1	$86,674.00		$0.00	$0.00	
	Salary for Resident Services Coordinator	1408	1	$12,500.00		$0.00	$0.00	
	Training for maintenance staff	1408	1	$1,000.00		$0.00	$0.00	
	Advertising for bids	1410	1	$1,000.00		$0.00	$0.00	
	A/E design fees	1430	1	$30,000.00		$0.00	$0.00	
	A/E inspection fees	1430	1	$14,500.00		$0.00	$0.00	
	CFP Plan preparation	1430	1	$6,500.00		$0.00	$0.00	
	Full-time clerk cost	1430	1	$20,000.00		$0.00	$0.00	
	Salary for Modernization Coordinator	1430	1	$28,000.00		$0.00	$0.00	
	Development Manager Services	1430	1	$10,000.00		$0.00	$0.00	
	Resident relocation	1495	1	$1,000.00		$0.00	$0.00	
	Drainage, landscaping & sidewalks	1450	1	$10,000.00		$0.00	$0.00	
	Purchase trailer for maintenance	1475	1	$5,000.00		$0.00	$0.00	
	Purchase vehicle for management staff	1475	1	$25,000.00		$0.00	$0.00	
TN37P035001	Add handrails at steps w/three or more risers at porches	1460	64	$2,240.00		$0.00	$0.00	
TN37P035002	Add handrails at steps w/three or more risers at porches	1460	64	$2,240.00		$0.00	$0.00	
TN37P035003	Add handrails at steps w/three or more risers at porches	1460	90	$3,150.00		$0.00	$0.00	
TN37P035004	Add handrails at steps w/three or more risers at porches	1460	44	$1,540.00		$0.00	$0.00	
TN37P035004	Replace existing handrails at porches	1460	190	$6,650.00		$0.00	$0.00	
TN37P035005	Add handrails at steps w/three or more risers at porches	1460	90	$3,150.00		$0.00	$0.00	
TN37P035005	Install new backsplash at range	1460	40	$3,400.00		$0.00	$0.00	
TN37P035005	Install new ducted range hood	1460	40	$9,400.00		$0.00	$0.00	

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Franklin Housing Authority	Grant Type and Number Capital Fund Program #: TN43P03550103 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	
TN37P035005	Replace base cabinets	1460	40	$36,000.00		$0.00	$0.00	
TN37P035005	Replace countertops	1460	40	$8,000.00		$0.00	$0.00	
TN37P035005	Replace wall cabinets	1460	40	$32,000.00		$0.00	$0.00	
TN37P035005	Install new plywood access panel at washing machine box.	1460	40	$3,000.00		$0.00	$0.00	
TN37P035005	Install additional electrical outlet at kitchen countertop	1460	40	$2,400.00		$0.00	$0.00	
TN37P035005	Install GFI protected outlet within 6' of sink	1460	40	$3,000.00		$0.00	$0.00	
TN37P035005	Replace refrigerator outlet with single-pole dedicated circuit	1460	40	$3,000.00		$0.00	$0.00	
TN37P035005	Install new kitchen sink drain lines to tee in wall	1460	40	$3,000.00		$0.00	$0.00	
TN37P035005	Install new kitchen sink faucet	1460	40	$6,000.00		$0.00	$0.00	
TN37P035005	Install new kitchen sink stops and supply lines.	1460	40	$1,400.00		$0.00	$0.00	
TN37P035005	Install new double-bowl kitchen sink	1460	40	$8,000.00		$0.00	$0.00	
TN37P035005	Replace washing machine box, supplies and drain line to stack	1460	40	$6,000.00		$0.00	$0.00	
TN37P035005	Construct new dwelling units to replace units removed through the demolition program	1498	1	$38,629.00		$0.00	$0.00	

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

PHA Name: Franklin Housing Authority	**Grant Type and Number** Capital Fund Program #: TN43P03550103 Capital Fund Program Replacement Housing Factor #:	**Federal FY of Grant:** FY 2003

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	
TN37P035001 Harpeth Homes	12/31/05			6/30/07			
TN37P035002 Reddick	12/31/05			6/30/07			
TN37P035003 Johnson Circle	12/31/05			6/30/07			
TN37P035004 Scattered	12/31/05			6/30/07			
TN37P035005 Scattered	12/31/05			6/30/07			
Res. Services Coordinator	12/31/05			6/30/07			
Maintenance Training	12/31/05			6/30/07			

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

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program: TN43P03550203 Capital Fund Program Replacement Housing Factor Grant No:	FY 2003

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☒ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	$0.00	$0.00	$0.00	$0.00
2	1406 Operations	$18,980.00	$0.00	$0.00	$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	$35,934.00	$0.00	$0.00	$0.00
8	1440 Site Acquisition	$0.00	$0.00	$0.00	$0.00
9	1450 Site Improvement	$5,000.00	$0.00	$0.00	$0.00
10	1460 Dwelling Structures	$35,000.00	$0.00	$0.00	$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	$0.00	$0.00	$0.00	$0.00
12	1470 Nondwelling Structures	$0.00	$0.00	$0.00	$0.00
13	1475 Nondwelling Equipment	$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	1498 Mod Used for Development	$0.00	$0.00	$0.00	$0.00
19	1502 Contingency	$0.00	$0.00	$0.00	$0.00
20	Amount of Annual Grant: (sum of lines 2-19)	$94,914.00	$0.00	$0.00	$0.00
21	Amount of line 20 Related to LBP Activities	$0.00	$0.00	$0.00	$0.00
22	Amount of line 20 Related to Section 504 Compliance	$0.00	$0.00	$0.00	$0.00
23	Amount of line 20 Related to Security	$0.00	$0.00	$0.00	$0.00
24	Amount of line 20 Related to Energy Conservation Measures	$0.00	$0.00	$0.00	$0.00

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

PHA Name: Franklin Housing Authority	Grant Type and Number Capital Fund Program #: TN43P03550203 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	Operations	1406	LS	$18,980.00				
PHA-Wide	A&E Design and Inspections	1430	LS	$20,934.00				
PHA-Wide	Mod Coordinator	1430	LS	$15,000.00				
TN035-05	Kitchen Renovations	1460	LS	$15,000.00				
TN035-05	Exterior Renovations	1460	LS	$20,000.00				
PHA-Wide	Drainage, Landscaping, Walks and Handrails	1450	LS	$5,000.00				
	TOTAL PROGRAM			**$94,914.00**				

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

PHA Name: Franklin Housing Authority	Grant Type and Number Capital Fund Program #: TN43P03550203 Capital Fund Program Replacement Housing Factor #:	Federal FY of Grant: FY 2003

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	
PHA-Wide	2/14/2006			2/13/2007			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: TN43P03550102 Replacement Housing Factor Grant No:	FY 2002

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: 2)
☒ Performance and Evaluation Report for Period Ending: 06/30/03 ☐ 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	0	0	0
2	1406 Operations	111,000.00	111,000.00	111,000.00	111,000.00
3	1408 Management Improvements	14,500.00	0	0	0
4	1410 Administration	1,000.00	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	100,700.00	16,179.95	8,125.00	1,625.00
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	283,999.00	431,019.05	431,019.05	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	20,000.00	0	0	0
13	1475 Nondwelling Equipment	2,000.00	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	25,000.00	0	0	0
19	1501 Collaterization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	**$ 558,199.00**	**$ 558,199.00**	**$ 550,144.05**	**$ 112,625.00**
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	20,000.00	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	23,125.00	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measure	0	0	0	0

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: **Franklin Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: **TN43P03550102** 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	Operating Funds	1406	LS	111,000.00	111,000.00	111,000.00	111,000.00	
PHA Wide	Computer Software	1408	LS	1,000.00	0	0	0	Deleted
PHA Wide	Resident Services Coordination	1408	LS	12,500.00	0	0	0	Deleted
PHA Wide	Maintenance Staff Training	1408	LS	1,000.00	0	0	0	Deleted
PHA Wide	Advertisements	1410	LS	1,000.00	0	0	0	Deleted
PHA Wide	A/E Design Services	1430	LS	29,700.00	0	0	0	Deleted
PHA Wide	A/E Inspection Services	1430	LS	14,500.00	0	0	0	Deleted
PHA Wide	Agency Plan	1430	LS	3,000.00	8,125.00	8,125.00	1,625.00	In Process
PHA Wide	Clerk of the Works	1430	LS	20,000.00	3,000.00	0	0	Planning
PHA Wide	Mod Coordinator	1430	LS	28,000.00	5,054.95	0	0	Planning
PHA Wide	Utility Allowance Study/Energy Audit	1430	LS	5,000.00	0	0	0	Deleted
PHA Wide	Utility Allowance Revision	1430	LS	500.00	0	0	0	Deleted
PHA Wide	Computer Hardware	1475	LS	2,000.00	0	0	0	Deleted
PHA Wide	Resident Relocation	1495	LS	5,000.00	0	0	0	Deleted
TN035-02	Replace Windows and Screens	1460	378	132,300.00	0	0	0	Deleted
TN035-02	Install New Shade/Curtain Rod Brackets	1460	378	5,670.00	0	0	0	Deleted
TN035-02	Convert a 5-Br. Unit Into Community Center	1470	LS	20,000.00	0	0	0	Deleted
TN035-03	Replace Windows and Screens	1460	16 DU	53,200.00	25,135.00	25,135.00	0	In Process
TN035-03	Install New Shade/Curtain Rod Brackets	1460	152	2,280.00	0	0	0	Deleted
TN035-05	Replace Hose Bibs with Frost Proof Type	1460	15 EA	1,500.00	2,400.00	2,400.00	0	In Process
TN035-05	Paint Exterior Handrails	1460	30 DU	300.00	500.00	500.00	0	In Process
TN035-05	Construct New Porches	1460	15 Bldg.	9,450.00	58,350.00	58,350.00	0	In Process
TN035-05	Install Rain Diverters	1460	15	30.00	0	0	0	In **Roofing**
TN035-05	Install New **Roofing** Shingles, Felt, Diverters	1460	30 DU	10,228.00	28,410.00	28,410.00	0	In Process
TN035-05	Replace Damaged Sheathing	1460	525 sq. ft.	2,785.00	525.00	525.00	0	In Process

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: **Franklin Housing Authority**		**Grant Type and Number** Capital Fund Program Grant No: **TN43P03550102** 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	
TN035-05	Cover Porch Ceilings With Aluminum	1460	2126	7,441.00	0	0	0	In **Siding**
TN035-05	Cover Existing Wood Trim With Aluminum	1460	15 Bldg.	11,942.00	8,520.00	8,520.00	0	In Process
TN035-05	Remove/Replace Soffit & Wall Sheathing. Install new Aluminum & Vinyl **Siding.**	1460	15 Bldg.	9,338.00	53,850.00	53,850.00	0	In Process
TN035-05	**Gutters,** Downspouts & Splash Blocks	1460	670	3,350.00	9,645.00	9,645.00	0	In Process
TN035-05	Install Splash Blocks	1460	26	390.00	0	0	0	In **Gutters**
TN035-05	Wrap Wood Porch Columns With Aluminum	1460	2	100.00	0	0	0	Deleted
TN035-05	Replace Flashings At Plumbing Vent Stacks	1460	82	2,870.00	0	0	0	In **Roofing**
TN035-05	Replace Gable Vents	1460	17	1,275.00	0	0	0	In **Roofing**
TN035-05	Replace Roof Exhaust Vent Caps	1460	27	2,025.00	0	0	0	In **Roofing**
TN035-05	Install Interchangeable Core Ext. Locksets	1460	25	1,875.00	0	0	0	In **Doors**
TN035-05	Insulated Ext. Steel **Doors,** Frames & Hdwr.	1460	60 DU	13,750.00	53,640.00	53,640.00	0	In Process
TN035-05	Install Security Screen Doors	1460	60 DU	7,500.00	15,120.00	15,120.00	0	In Process
TN035-05	Install Clothes Dryer Outlet and Vent	1460	12	2,400.00	0	0	0	Deleted
TN035-05	Replace Porch Light Fixtures	1460	60 EA	2,000.00	16,920.00	16,920.00	0	In Process
	From FY 2001 Plan							
TN035-04	Replace Roofs/ Porch Improvements	1460	3 Bldgs.	0	31,914.05	31,914.05	0	In Process
TN035-05	Windows & Trim	1460	15 Bldgs.	0	126,090.00	126,090.00	0	In Process

Annual Statement/Performance and Evaluation Report **Attachment I**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: **Franklin Housing Authority**		**Grant Type and Number** Capital Fund Program Grant No: **TN43P03550102** 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	
	TOTAL PROGRAM			**558,199.00**	**558,199.00**	**550,144.05**	**112,625.00**	

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

PHA Name: Franklin Housing Authority	Grant Type and Number Capital Fund Program No: TN43P03550102 Replacement Housing Factor No:	Federal FY of Grant: FY 2002

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	
PHA-WIDE	06/30/2003		06/30/2003	06/30/2004			
TN035-01	06/30/2003		06/30/2003	06/30/2004			
TN035-04	06/30/2003		06/30/2003	06/30/2004			
TN035-05	06/30/2003		06/30/2003	06/30/2004			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: TN43R03550102 Replacement Housing Factor Grant No: TN43R03550102	FY 2002

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☒ Revised Annual Statement (revision no: 2)
☒ 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	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	2,500.00	2,500.00	2,500.00
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	0	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	20,626.00	18,126.00	0	0
19	1501 Collaterization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	**$ 20,626.00**	**$ 20,626.00**	**$ 2,500.00**	**$ 2,500.00**
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

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

PHA Name: **Franklin Housing Authority**		**Grant Type and Number** Capital Fund Program Grant No: **TN43R03550102** Replacement Housing Factor Grant No: TN43R03550102				**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	
TN035-05	Dwelling Unit Reconstruction	1499	11 DU	20,626.00	18,126.00	0	0	
TN035-05	Program Coordination	1430	11 DU	0	2,500.00	2,500.00	2,500.00	Complete
	TOTAL PROGRAM			**$ 20,626.00**	**$ 20,626.00**	**$ 2,500.00**	**$ 2,500.00**	

Annual Statement/Performance and Evaluation Report **Attachment I**

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: **Franklin Housing Authority**	**Grant Type and Number** Capital Fund Program No: **TN43R03550102** Replacement Housing Factor No: TN43R03550102	**Federal FY of Grant: FY 2002**

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	
TN035-05	06/30/2004			06/30/2005			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: TN43P03550101 Replacement Housing Factor Grant No:	FY 2001

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: 2)
☒ Performance and Evaluation Report for Period Ending: 06/30/03 ☐ 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	0	0	0
2	1406 Operations	115,000.00	115,000.00	115,000.00	115,000.00
3	1408 Management Improvements	12,500.00	40,000.00	40,000.00	34,435.02
4	1410 Administration	750.00	360.90	360.90	360.90
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	122,605.75	155,941.01	155,941.01	119,174.21
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	50,600.00	0	0	0
10	1460 Dwelling Structures	244,855.25	216,238.95	216,238.95	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	36,692.00	59,462.14	59,462.14	59,462.14
13	1475 Nondwelling Equipment	2,000.00	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	4,000.00	2,000.00	2,000.00	0
18	1499 Development Activities	0	0	0	0
19	1501 Collaterization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	$589,003.00	$589,003.00	$589,003.00	$328,432.27
22	Amount of line 21 Related to LBP Activities	0	177,613.95	177,613.95	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

Annual Statement/Performance and Evaluation Report

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Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: **Franklin Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: **TN43P03550101** 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	
PHA Wide	Operating Funds	1406	LS	115,000.00	115,000.00	115,000.00	115,000.00	In Process
PHA Wide	Computer Software	1408	LS	0	0	0	0	Deleted
PHA Wide	Resident Services Coordination	1408	LS	12,500.00	40,000.00	40,000.00	34,435.02	In Process
PHA Wide	Maintenance Staff Training	1408	LS	0	0	0	0	Deleted
PHA Wide	Advertisements	1410	LS	750.00	360.90	360.90	360.90	Complete
PHA Wide	A/E Design Services	1430	LS	29,829.00	36,519.25	36,519.25	36,519.25	Complete
PHA Wide	A/E Inspection Services	1430	LS	14,276.75	16,546.76	16,546.76	1,679.96	In Process
PHA Wide	Agency Plan	1430	LS	12,500.00	10,875.00	10,875.00	10,875.00	Complete
PHA Wide	Clerk of the Works	1430	LS	28,000.00	30,000.00	30.000.00	23,100.00	In Process
PHA Wide	Mod Coordinator	1430	LS	32,000.00	56,000.00	56,000.00	45,000.00	In Process
PHA Wide	Utility Allowance Study/Energy Audit	1430	LS	6,000.00	6,000.00	6,000.00	2,000.00	In Process
PHA Wide	Computer Hardware	1475	LS	2,000.00	0	0	0	Deleted
PHA Wide	Resident Relocation	1495	LS	4,000.00	2,000.00	2,000.00	0	In Process
PHA Wide	Contingencies	1502	LS	0	0	0	0	Deleted
TN035-01	Replace Deteriorated Sidewalks	1450	3,000 ft.	18,000.00	0	0	0	Deleted
TN035-02	Replace Deteriorated Sidewalks	1450	4,000 ft.	24,000.00	0	0	0	Deleted
TN035-04	Convert 4-Br. Unit to two smaller units	1460	LS	40,000.00	0	0	0	Deleted
TN035-05	Clear Brush & Debris from Fence Row	1450	LS	5,000.00	0	0	0	Deleted
TN035-05	Replace Deteriorated Sidewalks	1450	600 ft.	3,600.00	0	0	0	Deleted
TN035-05	Install New 4" Address Numbers	1460	27	945.00	0	0	0	Deleted
TN035-05	Replace Rotten Fascia	1460	107	107.00	0	0	0	Deleted
TN035-05	Replace Rotten Wood Underlayment	1460	107	214.00	0	0	0	Deleted
TN035-05	Rework Siding @ Recessed Windows	1460	9	5,400.00	0	0	0	Deleted
TN035-05	Construct New Porches	1460	18	6,300.00	0	0	0	Deleted

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: **Franklin Housing Authority**	**Grant Type and Number** Capital Fund Program Grant No: **TN43P03550101** 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	
TN035-05	Install Rain Diverters	1460	15	30.00	0	0	0	Deleted
TN035-05	Install New Roofing Shingles & Felt	1460	223	27,875.00	0	0	0	Deleted
TN035-05	Replace Damaged Sheathing	1460	2228	2,785.00	0	0	0	Deleted
TN035-05	Cover Porch Ceilings With Aluminum	1460	2126	7,441.00	0	0	0	Deleted
TN035-05	Cover Existing Wood Trim With Aluminum	1460	3412	11,942.00	0	0	0	Deleted
TN035-05	Remove Existing Shingles. Install Vinyl Siding on Vertical Walls.	1460	1360	6,800.00	0	0	0	Deleted
TN035-05	Remove Existing Soffit. Install New Vinyl.	1460	2668	9,338.00	0	0	0	Deleted
TN035-05	Replace Gutters & Downspouts	1460	670	3,350.00	0	0	0	Deleted
TN035-05	Install Splash Blocks	1460	26	390.00	0	0	0	Deleted
TN035-05	Wrap Wood Porch Columns With Aluminum	1460	2	100.00	0	0	0	Deleted
TN035-05	Treat Buildings For Termites	1460	43	1,843.25	0	0	0	Deleted
TN035-05	Replace Flashings At Plumbing Vent Stacks	1460	82	2,870.00	0	0	0	Deleted
TN035-05	Replace Gable Vents	1460	17	1,275.00	0	0	0	Deleted
TN035-05	Replace Roof Exhaust Vent Caps	1460	27	2,025.00	0	0	0	Deleted
TN035-05	Add Attic Insulation	1460	76200	30,480.00	0	0	0	Deleted
TN035-05	Add Insulation Baffles @ Soffit	1460	43	5,375.00	0	0	0	Deleted
TN035-05	Replace Windows With Double-Hung Insulated Windows/Insect Screens	1460	226	74,580.00	0	0	0	Deleted
TN035-05	Install New Shade and Curtain Rod Brackets	1460	226	3,390.00	0	0	0	Deleted

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: **Franklin Housing Authority**		**Grant Type and Number** Capital Fund Program Grant No: **TN43P03550101** 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	
	From FY 2000 CFP							
TN035-05	Office Renovation	1470	LS	36,692.00	59,462.14	59,462.14	59,462.14	Complete
	From 5-Year Plan							
TN035-04	Roofs/Porches (LBP)	1460	37 Bldgs.	0	177,613.95	177,613.95	0	In Process
TN035-05	Remove/Replace Subfloor & Finish Floor (inc. Drains)	1460	4 DU	0	15,088.00	15,088.00	0	In Process
TN035-05	Drywall/Patch/Paint Interiors	1460	4 DU	0	11,312.00	11,312.00	0	In Process
TN035-05	Bath Renovations	1460	4 DU	0	12,225.00	12,225.00	0	In Process
	TOTAL PROGRAM			**589,003.00**	**589,003.00**	**589,003.00**	**328,432.27**	

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

PHA Name: Franklin Housing Authority	Grant Type and Number Capital Fund Program No: TN43P03550101 Replacement Housing Factor No:	Federal FY of Grant: FY 2001

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	
PHA-WIDE	06/30/2003		06/30/2003	06/30/2004			
TN035-01	06/30/2003		06/30/2003	06/30/2004			
TN035-04	06/30/2003		06/30/2003	06/30/2004			
TN035-05	06/30/2003		06/30/2003	06/30/2004			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03550101	FY 2001

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☒ Revised Annual Statement (revision no: 2)
☒ 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	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	7,777.00	7,777.00	7,777.00
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	0	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	21,774.00	13,997.00	0	0
19	1501 Collaterization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	**$ 21,774.00**	**$ 21,774.00**	**$ 7,777.00**	**$ 7,777.00**
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

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

PHA Name: **Franklin Housing Authority**		**Grant Type and Number** Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03550101				**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	
TN035-05	Dwelling Unit Reconstruction	1499	11 DU	21,774	13,997.00	0	0	
TN035-05	Project Design (Bal.)	1430	11 DU	0	5,277.00	5,277.00	5,277.00	Complete
TN035-05	Program Coordination	1430	11 DU	0	2,500.00	2,500.00	2,500.00	
	TOTAL PROGRAM			**$ 21,774.00**	**$ 21,774.00**	**$ 7,777.00**	**$ 7,777.00**	

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

PHA Name: **Franklin Housing Authority**	**Grant Type and Number** Capital Fund Program No: Replacement Housing Factor No: TN43R03550101	**Federal FY of Grant: FY 2001**

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	
TN035-05	06/30/2003			06/30/2004			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name:	Grant Type and Number	Federal FY of Grant:
Franklin Housing Authority	Capital Fund Program Grant No: TN43R03550100 Replacement Housing Factor Grant No:	FY 2000

☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☒ Revised Annual Statement (revision no: 1)
☒ 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	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	20,051	20,051	20,051
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	0	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	21,341	1,290	0	0
19	1501 Collaterization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	**$ 21,341**	**$ 21,341**	**$ 20,051**	**$ 20,051**
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measure	0	0	0	0

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

PHA Name: **Franklin Housing Authority**		**Grant Type and Number** Capital Fund Program Grant No: **TN43R03550100** Replacement Housing Factor Grant No:				**Federal FY of Grant: FY 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 Work
				Original	Revised	Funds Obligated	Funds Expended	
TN035-05	Dwelling Unit Reconstruction	1499	11 DU	21,341	1,290	0	0	
TN035-05	Project Design	1430	11 DU	0	20,051	20,051	20,051	Complete
	TOTAL PROGRAM			**$ 21,341**	**$ 21,341**	**$ 20,051**	**$ 20,051**	

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

PHA Name: **Franklin Housing Authority**	**Grant Type and Number** Capital Fund Program No: **TN43R03550100** Replacement Housing Factor No:	**Federal FY of Grant: FY 2000**

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	
TN035-05	03/31/2002		03/31/02	03/31/2004		06/30/2003	

ATTACHMENT J – RESIDENT COMMENTS

1. Comment: Need driveways or additional parking.
   Response: Space is very limited in some areas. The FHA will review areas when parking can be addressed and include in future plans as appropriate.

2. Comment: Need wheelchair ramps for elderly.
   Response: The FHA has a number of handicapped accessible units available. The FHA will provide reasonable accommodations to residents on an as-requested basis.

3. Comment: Need dryer hookups in all developments.
   Response: The FHA will consider the addition of dryer connections where dwellings are being comprehensively modernized.

4. Comment: Need showers in all developments.
   Response: The FHA has begun adding showers to bathrooms when they are renovated.

5. Comment: Need central HVAC for all developments.
   Response: The FHA will consider central heating/cooling in the future after other basic needs are

6.. Comment: Interim painting.
   Response: The FHA has included painting of all units on a five-year cycle in its CFP Plan.

7. Comment: Need storm doors.
   Response: Because the FHA has installed insulated steel doors, storm doors are not needed for energy conservation.

8. Comment: Need weather stripping around doors and windows.
   Response: The FHA will generally address this item through maintenance work orders. Doors and windows have been replaced in most developments.

9. Comment: Need insulation around kitchen water pipes at Development 04.
   Response: This item will be addressed as a part of future modernization for this development.

10. Comment: Need street lights along property line between Developments 03 and 05.
    Response: The FHA will review the need for additional lighting and include it in future plans, as appropriate.

ATTACHMENT K – COMMUNITY SERVICE POLICY

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

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

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

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

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

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