

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

PHA Plans

5 Year Plan for Fiscal Years 2005 - 2009

Annual Plan for Fiscal Year 2007

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

PHA Plan Agency Identification

PHA Name: Knox County Housing Authority
PHA Number: TN111

PHA Fiscal Year Beginning: (mm/yyyy) 04/2007

PHA Programs Administered:

Public Housing and Section 8
 Section 8 Only
 Public Housing Only
 Number of public housing units: 197
 Number of S8 units:
 Number of public housing units:
 Number of S8 units: 564

PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

Public Access to Information

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

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

Display Locations For PHA Plans and Supporting Documents

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

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

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

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

5-YEAR PLAN
PHA FISCAL YEARS 2005 - 2009
[24 CFR Part 903.5]

A. Mission

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

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

B. Goals

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

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

- PHA Goal: Expand the supply of assisted housing
Objectives:
- Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
- Improve public housing management: (PHAS score) 73
 - Improve voucher management: (SEMAP score)
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units:
 - Demolish or dispose of obsolete public housing:

- Provide replacement public housing:
- Provide replacement vouchers:
- Other: (list below)

PHA Goal: Increase assisted housing choices

Objectives:

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

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

PHA Goal: Provide an improved living environment

Objectives:

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

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

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

Objectives:

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

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

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

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2008
[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

- Standard Plan**
- 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.

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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18. Other Information

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 (tn111a02)
- FY 2005 Capital Fund Program Annual Statement (tn111b02)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY) (tn111c02)
- List of Resident Advisory Board Members (tn111d02)
- List of Resident Board Member (tn111e02)
- Community Service Description of Implementation (tn111f02)
- Information on Pet Policy (tn111g02)
- Section 8 Homeownership Capacity Statement, if applicable (tn111h02)
- Description of Homeownership Programs, if applicable

Optional Attachments:

- PHA Management Organizational Chart (tn111i02)
- FY 2005 Capital Fund Program 5 Year Action Plan (tn111k02)
- 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)
Grievance Procedure (tn111j02)

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	Applicable 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	5 Year and Annual Plans
x	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
x	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
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), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
x	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
x	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
x	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
x	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
	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
	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for	Annual Plan: Capital Needs

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
	any active CIAP grant	
x	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	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
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
	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
x	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	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	980	2	3	3	3	3	3
Income >30% but <=50% of AMI	325	2	2	2	2	2	2
Income >50% but <80% of AMI	40	2	2	2	2	2	2
Elderly	140	4	4	4	5	4	5
Families with Disabilities	40						
Race/Ethnicity	428	2	3	3	3	3	3
Race/Ethnicity							
Race/Ethnicity							
Race/Ethnicity							

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: 1999
- 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)
KCHA waiting list

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)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance			
<input type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	374		75
Extremely low income <=30% AMI	345	92.24	
Very low income (>30% but <=50% AMI)	27	7.21	
Low income (>50% but <80% AMI)	2	.053	
Families with children	349	93%	
Elderly families	5	1%	
Families with Disabilities	20	6%	
Race/ethnicity	White/273	73%	
Race/ethnicity	Black/99	36%	
Race/ethnicity	Hispanic/2	1%	
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			

Housing Needs of Families on the Waiting List			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/> Section 8 tenant-based assistance			
<input checked="" type="checkbox"/> Public Housing			
<input type="checkbox"/> Combined Section 8 and Public Housing			
<input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional)			
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	42		20
Extremely low income <=30% AMI	35	83.33%	
Very low income (>30% but <=50% AMI)	6	14.28%	
Low income (>50% but <80% AMI)	1	2.38%	
Families with children	32	92%	
Elderly families	2	7%	
Families with Disabilities	1	1%	
Race/ethnicity	34 White	81%	
Race/ethnicity	8 Black	19%	
Race/ethnicity			
Race/ethnicity			

Housing Needs of Families on the Waiting List			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	11	27%	
2 BR	17	41%	
3 BR	12	31%	
4 BR	2	1%	
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy. Due to a high turnover rate KCHA will keep the waiting list open for the near to the mid future. The public housing will work with tenants to help retain them through repayment agreements and counseling them of potential problems/lease violations.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

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

Select all that apply

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

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

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

Select all that apply

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

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

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

Select all that apply

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

Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

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

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

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

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

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

Select if applicable

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

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

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

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

(2) Reasons for Selecting Strategies

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

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

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

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

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2005 grants)		
a) Public Housing Operating Fund	468,000	Operations
b) Public Housing Capital Fund	264,114	Operations/Modern.
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	2,688,000	Operations
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	288,000	Operations
Excess Utilities	17,000	Operations
4. Other income (list below)		
Interest	2,500	Operations
Other	4,000	Operations
4. Non-federal sources (list below)		
Total resources		

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

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

(1) Eligibility

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

When families are within a certain number of being offered a unit: (state number)

When families are within a certain time of being offered a unit: (state time)

Other: (describe) At application updated prior to offer if over 90 days.

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)

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

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

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

(2)Waiting List Organization

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

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

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

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

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

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

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

3. Yes No: May families be on more than one list simultaneously
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

(3) Assignment

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

(4) Admissions Preferences

- a. Income targeting:
- Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:
- In what circumstances will transfers take precedence over new admissions? (list below)
- Emergencies
 - Overhoused
 - Underhoused
 - Medical justification
 - Administrative reasons determined by the PHA (e.g., to permit modernization work)
 - Resident choice: (state circumstances below)
 - Other: (list below)

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

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

Other preferences: (select below)

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

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

2 Date and Time

Former Federal preferences:

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

4. Relationship of preferences to income targeting requirements:

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

(5) Occupancy

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

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

b. How often must residents notify the PHA of changes in family composition?

(select all that apply)

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

(6) Deconcentration and Income Mixing

a. Yes No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the

need for measures to promote deconcentration of poverty or income mixing?

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

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

Adoption of site-based waiting lists
If selected, list targeted developments below:

Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:

Employing new admission preferences at targeted developments
If selected, list targeted developments below:

Other (list policies and developments targeted below)

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

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

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

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

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

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

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

B. Section 8

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

(1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- Criminal or drug-related activity only to the extent required by law or regulation
 - Criminal and drug-related activity, more extensively than required by law or regulation
 - More general screening than criminal and drug-related activity (list factors below)
 - Other (list below)

Prior subsidized housing.

- b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
 - Other (describe below)

Previous landlord name, address and phone number.

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- None
 - Federal public housing
 - Federal moderate rehabilitation
 - Federal project-based certificate program
 - Other federal or local program (list below)

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

- PHA main administrative office
 Other (list below)

(3) Search Time

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

If yes, state circumstances below:

Delays caused by medical reasons and HQS repairs.

(4) Admissions Preferences

a. Income targeting

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

b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
 Veterans and veterans' families

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

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

2 Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- Date and time of application
- Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- This preference has previously been reviewed and approved by HUD
 The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

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

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- The Section 8 Administrative Plan
 Briefing sessions and written materials
 Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- Through published notices
 Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

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

(1) Income Based Rent Policies

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

a. Use of discretionary policies: (select one)

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

---or---

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

b. Minimum Rent

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

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

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

Death of the sole income provider.

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

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

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

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

Ceiling Rents.

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)

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)
- Any income decrease.
- 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)

HCV FMR

B. Section 8 Tenant-Based Assistance

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

(1) Payment Standards

Describe the voucher payment standards and policies.

- a. What is the PHA's payment standard? (select the category that best describes your standard)
- At or above 90% but below 100% of FMR
 - 100% of FMR
 - Above 100% but at or below 110% of FMR
 - Above 110% of FMR (if HUD approved; describe circumstances below)

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

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

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

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

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

- Annually
- Other (list below)

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

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

(2) Minimum Rent

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

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

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

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

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

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

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

B. HUD Programs Under PHA Management

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

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	171	75
Section 8 Vouchers	489	60
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

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

- (1) Public Housing Maintenance and Management: (list below)
ACOP, Lease, Grievance, Preventative Maintenance
- (2) Section 8 Management: (list below)
Administrative Plan

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

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 903.79 (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) tn111b02

-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)(tn111k02)

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

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

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

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

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

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

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

2. Activity Description

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

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

<input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:)
<input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent
<input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units
<input type="checkbox"/> Other: (describe below)

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

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

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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

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

2. Activity Description

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

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

B. Section 8 Tenant Based Assistance

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

2. Program Description:

a. Size of Program

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

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

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

b. PHA-established eligibility criteria

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

If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (1)]

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

- 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)

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation
--

Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

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

C. Welfare Benefit Reductions

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

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

13. PHA Safety and Crime Prevention Measures

[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)

Virginia Walker Apts. TN111001
Bakertown Apts TN111002

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)

Virginia Walker Apts. TN111001

Bakertown Apts TN111002

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)

Virginia Walker Apts. TN111001

Bakertown Apts TN111002

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2005 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 2005 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: ____)

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? 2
5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)? 3/15/2007

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)
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:

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

- Considered comments, but determined that no changes to the PHA Plan were necessary.
- The PHA changed portions of the PHA Plan in response to comments
List changes below:

- Other: (list below)

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

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

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

3. Description of Resident Election Process

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

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

b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

Other (list)

C. Statement of Consistency with the Consolidated Plan

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

1. Consolidated Plan jurisdiction: (provide name here)
Knox County Community Development
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)

D. Other Information Required by HUD

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

Attachments

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

PHA Plan Table Library

Component 7

Capital Fund Program Annual Statement

Parts I, II, and II

Annual Statement

Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number TN37P11150107 FFY of Grant Approval: (MM/YYYY)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	0
2	1406 Operations	25,000
3	1408 Management Improvements	25,000
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	10,000
8	1440 Site Acquisition	
9	1450 Site Improvement	10,000
10	1460 Dwelling Structures	180,000
11	1465.1 Dwelling Equipment-Nonexpendable	15,000
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	265,000
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

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Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
TN111-001/002	Operations	1406	25,000
TN111-001/002	Computer Software	1408	10,000
TN111-001/002	File Quality Person	1408	10,000
TN111-001/002	Income Verification Person	1408	5,000
TN111-001/002	A&E Fees	1430	10,000
TN111-001	Paint Sheetrock Force Acct	1460	12,500
TN111-002	Paint Sheetrock Force Acct	1460	12,500
TN11-001/002	Erosion Control	1450	1,000
TN111-001/002	Replace window glass/hardware	1460	20,000
TN111-001	Bathroom Vanity Replacement	1460	30,000
TN111-001	Replacement of sliding glass doors	1460	30,000
TN111-002	Kitchen Upgrades	1460	80,000
TN111-001/002	Refrigerators	1465.1	8,000
TN111-001/002	Ranges	1465.1	7,000

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
TN111-001 TN111-002	7/31/2008 7/31/2008	7/31/2009 7/31/2009

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Total estimated cost over next 5 years				

ATTACHMENT A

Knox County Housing Authority

Minutes of Board Meeting

June 17, 1999

The Board of Commissioners of Knox County Housing Authority met at 10:00 AM on February 18, 1999 at 6333 Pleasant Ridge Road. The meeting was held in compliance with Chapter 442 of the Public Acts (Sunshine Law). On Roll Call those attending were:

Present

Mr. Earl Julian

Mr. Joseph Guess

Ms. Henrietta Grant*

Mr. Leon Silvey

Absent

Mr. Aubrey Jenkins

The minutes of the February 18, 1999 meeting were moved for approval by Mr. Julian and seconded by Mr. Silvey. On Roll Call the Votes were:

Ayes

Mr. Julian

Mr. Guess

Ms. Grant*

Mr. Silvey

Nays

None

Resolution A

5/99 PH

Whereas HUD regulations require PHA's to prepare and submit Public Housing Management Assessment Program (PHMAP) Certification for FY 3/31/99, and

Whereas KCHA staff has prepared the PHMAP certification:

Now Therefore Be It Resolved That the PHMAP certification be approved and submitted to HUD.

Mr. Julian made such a motion and it was seconded by Mr. Guess. On Roll Call The Votes Were:

Ayes

Mr. Julian

Mr. Guess

Ms. Grant*

Mr. Silvey

Nays

None

Resolution B
6/99 PH

Whereas HUD has issued regulation that require PHA's to take steps to insure that their tenants were no concentrated in developments of one income level, and

Whereas HUD has issued guidance on implementing the Deconcentration Policy,

Now Therefore Be It Resolved That KCHA takes the required steps necessary to comply with HUD's Deconcentration Policy.

Mr. Julian made such a motion and it was seconded by Mr. Silvey. On Roll Call The Votes Were:

Ayes	Nays
Mr. Julian	None
Mr. Guess	
Ms. Grant*	
Mr. Silvey	

There Being No Additional Business, the meeting was adjourned.

- Phone

Earl Julian

William Pierce

Annual Statement/Performance and Evaluation Report

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

PHA Name: Knox County Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN1137P111501106 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006
---	--	-------------------------------------

Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2006
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	18,964		18,964	
3	1408 Management Improvements	6,500		6,500	
4	1410 Administration	14,600		14,600	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,000		10,000	
8	1440 Site Acquisition				
9	1450 Site Improvement	9,000			
10	1460 Dwelling Structures	193,500		193,500	24000
11	1465.1 Dwelling Equipment—Nonexpendable	11,550		11,550	
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	264,114		255,114	24,0000
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Knox County Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P1150105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2006 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	180000		180000	180000
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	101,677		101,677	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	281,677		281,677	
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

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

PHA Name: Knox County Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P11150104 Replacement Housing Factor Grant No:	Federal FY of Grant: 2004
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 12/31/2006
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	180,16	180,166	180,166	180,166
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000	20,000	20,000	20,000
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	45,000	95,000	95,000	95,000
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	50,000	0	0	0
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	295,166	295,166	295,166	295,166
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

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

PHA Name: Knox County Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P11150103 Replacement Housing Factor Grant No:	Federal FY of Grant: 2003
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	0	151,238	151,238	151,238
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	50,000	50,000	50,000	50,000
8	1440 Site Acquisition				
9	1450 Site Improvement	6,000	0		
10	1460 Dwelling Structures	182,238	51,000	51,000	51,000
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	14,000	0		
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	252,238	252,238	252,238	252,238
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

KNOX COUNTH HOUSING AUTHORITY OPERATING BUDGET PUBLIC HOUSING

Knox County Housing Authority 6333 Pleasant Ridge Road Knoxville, TN 37921 FY 3/31/2008			Original Actuals Last FY 2006	2364 Unit Mo Estimate FY 07 PUM	Unit Mo FY2008 Budget PUM
60	3110	Dwelling Rent	122.81	122.67	126.65
70	3120	Excess Utility	8.14	2.96	3.13
80	3190	Non-dwelling Rent		0.00	0.00
90	Total Rental Income		130.95	125.63	129.62
100	8020	HUD Subsidy	241.13	228.43	0.00
110	3610	Interest on General Fund	0.78	0.83	0.90
120	3690	Other Income	78.92	8.40	0.00
130	Total Operating Income		451.78	363.29	130.51
Operating Expenditures-Administrative					
140	911	Administrative Salaries	65.83	53.20	0.00
150	915	Adm Emp Ben	27.43	24.44	0.00
160	916	Staff Training	2.27	1.97	0.00
170	916	Travel	3.86	1.29	0.00
180	916	Accounting Fee	3.47	3.85	2.79
190	916	Auditing Fee	2.02	1.69	0.00
200	916	Other Administrative Exper	29.91	12.92	0.00
210	Total Administrative Expenditures		134.80	99.36	2.79
Tenant Services					
220	4210	Salaries			
230	4220	Recreational, Publications	4.55	0.57	0.00
240	4230	Contract Costs			
250	Total Tenant Services		4.55	0.57	0.00
Utilities:					
260	4310	Water	16.71	16.5	0.00
270	932	Electricity	77.14	82.49	0.00
280	938	Sewer	24.90	27.5	0.00
290	Total Utilities sum of lines 260, 270 and 280)		118.74	126.49	0.00
Maintenance and Operations					
300	941	Labor	36.16	34.44	0.00
310	942	Materials	36.61	13.92	0.00
320	943	Contract Costs	34.30	23.2	0.00
	945	Maint BeNEFIT	14.77	16.82	0.00
330	Total Ordinary Maintenance & Operation Expense		121.84	88.38	0.00
General Expense					
340	4510	Insurance	11.59	20.67	0.00
350	4520	PILOT			
360	4530	Terminal Leave Pmt			
380	4570	Collection Losses	14.66	8.46	8.46
390	Total General Expense		26.257	29.13	8.46
400	Total Routine Expense (sum of lines 210,250,290,330, and 390)		406.19	343.93	11.25
410	4610	Extraordinary Maintenance	4.19	0	0.00
420	7520	Replacement of Nonexpendible Equipment			
430	7540	Property Betterments and Additions			
440	Total Nonroutine Expenditures (sum of lines 410, 420 and 430)		4.1878	0	0.00
450	Total Operating Expenditures (sum of lines 400 and 440)		410.38	343.93	11.25
460	Surplus/Defecit		41.41	19.36	119.26

nths
Original

AMOUNT
299,400
7,400
0.00
306,800
0
2,125
0
308,925

0
0
0
0
6,600
0
0
6,600

0
0

0
0
0
-

0
0
0
0
0

0
20,000
20,000
26,600
0
0
26,600
282,325

ATTACHMENT D

KNOX COUNTY HOUSING AUTHORITY RESIDENT ADVISORY BOARDS

DEVELOPMENT-TN111-001 VIRGINIA WALKER APARTMENTS

RAB MEMBERS

MARTHA HAUN	VIRGINIA WALKER APARTMENTS
WILLIAM TURNER	VIRGINIA WALKER APARTMENTS
ARTHUR MITCHELL	VIRGINIA WALKER APRATMENTS

DEVELOPMENT-TN111-002 BAKERTOWN APARTMENTS

RAB MEMBERS BAKERTOWN APARTMENTS

MICHELLE WILLIS	BAKERTOWN APARTMENTS
DARLENE HARLESS	BAKERTOWN APARTMENTS
IRENE PROFFITT	BAKERTOWN APARTMENTS

Elected by residents for a one year term.

This election is held in the month of July of each year.

ATTACHMENT E

Resident Board Member

Knox County Housing Authority Resident Board Member:

This position is vacant as of this submission

The term is for one year and can be reappointed.

The Resident Board Member is elected from the combined Resident Advisory Board* from each complex.

*See Attachment B

Attachment F

POLICIES.1

PH-ACOP

KNOX COUNTY HOUSING AUTHORITY

ADMISSION AND CONTINUED OCCUPANCY POLICY

ACOP

STATEMENT OF POLICIES GOVERNING **ADMISSION TO AND CONTINUED
OCCUPANCY (ACOP)** OF HUD-AIDED LOW INCOME HOUSING
DEVELOPMENTS OPERATED BY KNOX COUNTY HOUSING AUTHORITY
WITH THE ASSISTANCE OF THE UNITED STATES DEPARTMENT OF HOUSING
AND URBAN DEVELOPMENT (HUD)

RESOLUTION NO. B PH 2/94 DATE 2/17/94

REVISION NO. 1 C PH 18/94 DATE 11/17/94
REVISION NO. 2 A PH 4/95 DATE 4/20/95
REVISION NO. 3 A PH 1/97 DATE 2/20/97
REVISION NO. 4 D PH 4/00 DATE 2/17/00
REVISION NO. 5 E PH 5/03 DATE 5/21/03
REVISION NO. 6 C PH 23/04 DATE 8/18/04
REVISION NO. 7 A PH 24/04 DATE 10/20/04
REVISION NO. 8 B PH 11/05 DATE 7/20/05
REVISION NO. 9 A PH 14/05 DATE 8/17/05
REVISION NO. 10 A ADM 16/05 DATE 8/31/05
REVISION NO. 11 A ADM 11/06 DATE 8/16/06
REVISION NO. 12 A PH 12/06 DATE 9/20/06

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1. CONDITIONS GOVERNING CONTINUED OCCUPANCY	27
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3. INTERIM REPORTING	28
4. MISREPRESENTATION AFFECTING ELIGIBILITY AND/OR RENT	28
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<u>6. COMMUNITY SERVICE PROCEDURES</u>	29
7. ENTERPRISE INCOME VERIFICATION (EIV) POLICY STATEMENT	31
8. ENTERPRISE INCOME VERIFICATION (EIV) POLICY PROCEDURES	34

6. COMMUNITY SERVICE PROCEDURES

The public housing community service and self-sufficiency requirement authorized under Section 12 of the United States Housing Act of 1937, as amended, (the Act).

The community service and self-sufficiency requirement is intended to assist adult public housing residents in improving their own economic and social well-being and give those residents a greater stake in their community. The community service and self-sufficiency requirement allows residents an opportunity to “give something back” to their community and facilitates upward mobility.

Section 12 © of the Act, enacted on October 12, 1998 as Section 512 of the Quality Housing and Work Responsibility Act (QHWRA) of 1998, contained a community service and self-sufficiency requirement that every adult resident of public housing contribute eight (8) hours of community service each month, or participate in an economic self-sufficiency program for eight (8) hours each month. Regulations for this provision are provided in 24 CFR Subpart F @ 960 600-609.

Procedures

1. Knox County Housing Authority (KCHA) will require a minimum of eight (8) hours of community service per month, or 96 hours per year. The hours can be accumulated in any amount per month, but a minimum of 96 hours will be needed on a yearly basis to fill the Community Service requirement.
2. Have the family head and members sign the Lease Addendum for Community Service.
3. Input the proper code into the computer to reflect the proper status for Community Service for each family member in each apartment – either qualify for Community Service or exempt from Community Service.
4. Record any Community Service activity when the tenant brings in verification to the manager’s office. This can be input into the software program.
5. Provide a copy of the amount of hours contributed for Community Service to the tenant/family member on a yearly basis. The year will be counted from the anniversary date of the Lease.
6. If a family member is in arrears on their hours of Community Service, then a “repayment agreement” will be executed. This repayment agreement will give the family member one year to catch up their Community Service in arrears, plus keep their current Community Service hours up to date.
7. If, after th 2nd year, the hours are not caught up, the family will be eligible for Eviction.
8. A new move-in’s Community Service requirement will begin the first full month after the Lease effective date.

Exemptions

The public housing tenants exempt from the community service and self-sufficiency requirement are those:

- Age 62 years, or older.

- Blind or disabled (as defined under 216(i)(1) or 1614 of the Social Security Act (42 U.S.C. 416(i)(1); 1382C) and who certify that because of this disability, they are unable to comply with the service provisions, or are the primary caretakers of such individuals.
 - Engaged in work activities as defined in Section 407(d) of the Social Security Act {(42U.S.C.607(d)}, as specified below
1. Unsubsidized employment
 2. Subsidized private sector employment
 3. Subsidized public-sector employment
 4. Work experience (including work associated with the refurbishing of publicly assisted housing), if sufficient private sector employment is not available
 5. On-the-job-training
 6. Job search and job readiness assistance
 7. Community Service programs
 8. Vocational education training (not to exceed 12 months with respect to any individual)
 9. Job skills training directly related to employment
 10. Education directly related to employment in the case of a recipient who has not received a high school diploma or a certificate of high school equivalency
 11. Satisfactory attendance at secondary school or in a course of study leading to a certificate of general equivalency, in the case of a recipient who has not completed secondary school or received such a certificate
 12. The provision of child care services to an individual who is participating in a community service program

Note: A resident that vacates with a debit balance of required Community Service hours and re-applies will be ineligible for housing.

ATTACHMENT G
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 statements made in this Lease Addendum as set by the Knox County Housing Authority.

When Knox County Housing Authority refers to pets, that means that only dogs, cats, birds, and fish are included. This Lease Addendum tells me what I am responsible for and what Knox County Housing Authority is responsible for concerning my dog or cat.

Only one pet is allowed per family.

I also understand that my pet cannot be larger than:

- (a) Dog – 15 inches tall when full grown
- (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 the apartment. The Knox County Housing Authority can use this money to pay for damages “beyond normal wear and tear” caused by my pet, or for other damages to Knox County 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.

WHAT I MUST DO:

1. I must provide Knox County 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 my pet anywhere in the building. I will exercise my pet only in the areas on Knox County 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 Knox County Housing Authority property.
6. I will hold harmless Knox County 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 event of my pet’s death, I must dispose of the remains according to local health regulations.

WHAT KNOX COUNTY HOUSING AUTHORITY WILL NOT DO

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

WHAT KNOX COUNTY HOUSING AUTHORITY WILL DO

1. When it is necessary for Knox County Housing Authority to spray for fleas and ticks or other insects caused by my pet other than at regular appointed time, Knox County Housing Authority will charge me for the cost of spraying.
2. Knox County Housing Authority will dispose of my pet in any way necessary, if at any time I leave my pet unattended or abandoned.
3. Knox County 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. Knox County 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 Knox County 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 between me and the Housing Authority and that it is a legally binding contract between me and Knox County Housing Authority.

We signed this Lease Addendum on _____, _____,

Lessee

Knox County Housing Authority

By _____

Title _____

ATTACHMENT H

CAPACITY STATEMENT

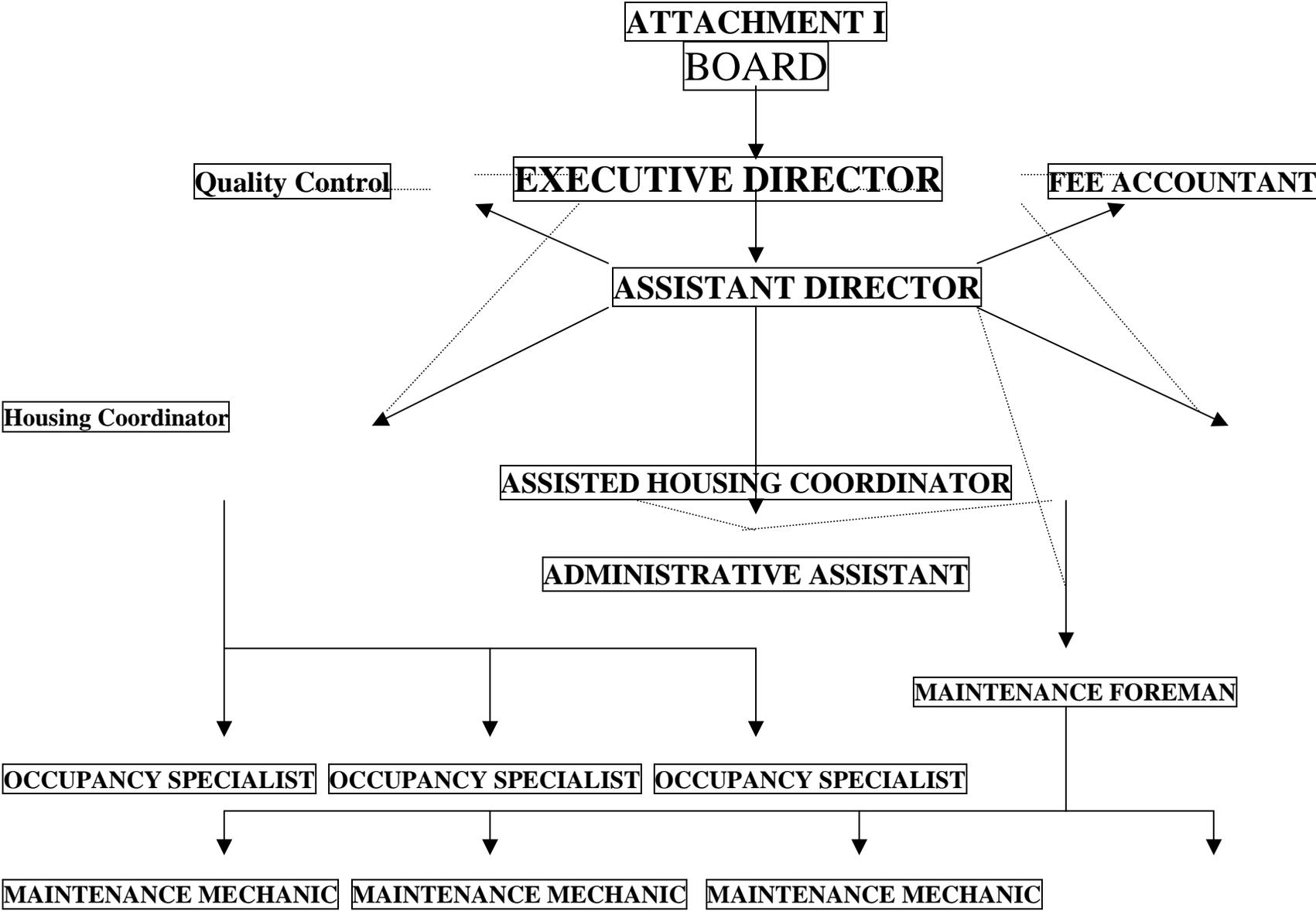
KNOX COUNTY HOUSING AUTHORITY

As stated in final rule at 982.625, Knox County Housing Authority has demonstrated its capacity to administer the Section 8 Homeownership Program by meeting the following criteria:

Requiring that financing for purchase of a home under its section 8 home ownership program will: be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

If a mortgage is not FHA-insured, KCHA will require the lender to comply with generally accepted mortgage underwriting standards consistent with those of HUD/FHA, Ginnie Mae, Fannie Mae, Freddie Mac, Tennessee Housing Development Agency (THDA), USDA Rural Housing Services, the Federal Home Loan Bank, or other private lending institutions.

KNOX COUNTY HOUSING AUTHORITY STRUCTURE



LEGEND	
—————	SUPERVISORY RELATIONSHIP
- - - - -	PROVIDES ADMINISTRATIVE SUPPORT

Attachment J

GRIEVANCE PROCEDURE

KNOX COUNTY HOUSING AUTHORITY

1. PURPOSE

This grievance procedure provides a means for residents to seek the just, effective and efficient settlement of grievances against Knox County Housing Authority (KCHA). It was adopted after compliance with 24 CFR 966.52(c) which requires 30 days notice to residents and resident organizations and due consideration by KCHA of all written comments received. This grievance procedure will be incorporated by reference in all resident leases, and a copy will be posted on the bulletin board at the apartment offices. The laws governing this grievance procedure are in Section 6(k) of the U. S. Housing Act of 1937 (42 U.S.C. ~ 1437d (k) and sub-part B of 24 Code of Federal Regulations part 966 (24 CFR ~ 966.50 - 966.57).

2. GENERAL PROVISIONS

A) DEFINITIONS

1. Grievance: Any dispute with respect to KCHA action or failure to act in accordance with the lease or KCHA regulations which affects the rights, duties, welfare, or status of the resident filing the complaint.
2. Resident: The adult person(s), other than a live-in aide:
 - a. Who lives in the unit and who executed the lease with KCHA as lessee, or if no such persons reside in the unit;
 - b. The person who resides in the unit, and who is the remaining head of the household with the legal capacity to assume tenancy.
3. Complainant: Any resident who presents a grievance, in the manner allowed by the procedure, to the apartment office where the resident lives.
4. Community Association: An organization of KCHA residents.
5. Notice: The term "notice," unless otherwise specifically stated, means written notice.
6. Business Days: Monday through Friday of each week, except for holidays recognized by KCHA.

7. Grievance Panel: An impartial panel of residents appointed by KCHA, in consultation with the Community Association, to hear grievances and make decisions regarding the grievance.
8. Drug-related Criminal Activity: The illegal manufacture, sale, distribution, use, or possession with the intent to manufacture, sell, distribute, or use a controlled substance, as defined in ~ 102 of the Controlled Substances Act (21 U.S.C. ~ 802) as from time to time amended.
9. Elements of Due Process: Procedural safeguard in an eviction action or termination of tenancy in a state or local court. They are:
 - a. Adequate notice to the Resident of the grounds for lease termination or eviction;
 - b. Right of the Resident to be represented by counsel;
 - c. Opportunity for the Resident to discredit the evidence presented by KCHA, including the right to confront and cross examine witnesses and to present any defense which the resident may have;
 - d. A decision based on the merits of the case.
10. Guest: A person present in the apartment with the consent of a household member.

B) WHEN THE GRIEVANCE PROCEDURE MAY BE USED

An adult Resident in the assisted family may use the grievance procedure to settle any dispute which the Resident has about KCHA's action or a failure to act which the Resident believes has a negative effect on the Resident's rights, duties, welfare, or status as provided for by the lease or KCHA regulations.

C) WHEN THE GRIEVANCE PROCEDURE DOES NOT APPLY

The grievance procedure does not apply;

1. To disputes between residents which do not involve KCHA;
2. To class grievances involving groups of residents;
3. To beginning or negotiating policy changes between a Resident, or groups of residents, and KCHA's Board of Commissioners; or
4. To the matters described in paragraph D (1 and 2) below.

D) MATTERS REFERRED DIRECTLY TO COURT

The Department of Housing and Urban Development (HUD) has determined that the law of the State of Tennessee requires that all courts give the Resident the opportunity for a hearing which provides the basic elements of due process [defined in Part 2, A(9)] before eviction from a unit. Therefore, KCHA has elected that the grievance procedure will not apply to any termination of tenancy or eviction that involves:

1. Any criminal activity that threatens the health, safety, or right to peaceful enjoyment of the premises of other residents or employees of KCHA, or
2. Any drug-related criminal activity, on or near, KCHA premises.

E) SETTLEMENT OF GRIEVANCES

The settlement of a grievance is a two-part process. The first part is an informal conference between the Resident, or the Resident's representative, and KCHA. In most cases the grievance can be settled in the informal conference. However, if the Resident is not satisfied with the results of the informal conference, a formal grievance can be requested. The procedures for the informal conference and the formal grievance hearing are provided below.

1. INFORMAL CONFERENCE

Requesting the Conference: The Resident must personally present the request for an informal conference to the apartment office or the KCHA office within ten (10) days after the event which is the subject of the grievance. The request may be verbal or written, and in either case, the Resident must clearly state that a conference is being requested in accordance with this grievance procedure. The informal conference is not available in cases of termination of tenancy or eviction to which the grievance procedure does not apply (Part 2 (C) and (D) above).

INFORMAL SETTLEMENT CONFERENCE: Within a reasonable time after the request for the conference, KCHA will informally discuss the grievance with the Resident, and/or the Resident's representative, in an attempt to settle the dispute without a formal grievance hearing.

SUMMARY OF THE OUTCOME OF THE INFORMAL CONFERENCE: Within a reasonable time after the informal settlement conference, KCHA will prepare a written summary of the informal discussion. A copy of the summary will be provided to the Resident and a copy will be placed in the Resident's file. The summary will give the names of those participating in the discussion, the date of the discussion, the proposed means for resolving the grievance, and the specific reason for resolving the grievance as proposed. The summary will also specify the procedures the Resident may take to obtain a formal grievance hearing if the Resident is not satisfied with the proposed resolution of the grievance.

2. FORMAL GRIEVANCE PROCEDURE

REQUESTING THE HEARING: If the Resident is not satisfied with the results of the informal settlement conference, a written request may be submitted for a formal grievance hearing. The request must be submitted to the apartment office or the KCHA office within ten (10) days after the date the Resident receives the summary of the informal settlement conference. The written request must include the reasons for the grievance and the action or relief sought by the Resident.

FAILURE TO REQUEST A HEARING: If the Resident fails to request a hearing within ten (10) days after receiving the written summary of the informal settlement conference, KCHA's decision at the informal conference becomes final and KCHA is not obligated to offer the complainant a formal hearing. However, failure to request the hearing does not forfeit the Resident's right to later take court action to contest KCHA's decision on the grievance.

RIGHTS TO A FORMAL GRIEVANCE HEARING: To have the right to a formal grievance hearing, the Resident must have completed the following prerequisites:

- a) The Resident has completed the informal settlement conference procedure or has requested to by-pass the informal conference for good cause;
- b) The Resident has requested a hearing in writing;
- c) If the dispute involves the amount of rent which KCHA claims the resident owes, the complainant must pay KCHA an amount of rent equal to that due and payable on the first of the month before the month in which the grievance took place. If the formal grievance hearing is delayed for any reason, the Resident must continue to deposit the same amount in an escrow account each month until the dispute is resolved by decision of the grievance panel. The failure of the Resident to pay the required rent will result in the termination of the grievance procedure, unless KCHA has given the Resident a written waiver because of extreme and undue hardship to the complainant.

F) SELECTION OF THE GRIEVANCE PANEL

1. Appointment of the Grievance Panel

All grievance hearings will be conducted by an impartial panel of residents appointed by KCHA. Written comments, or objections, to the appointment of a person will be considered by KCHA before appointments are finally made. The names of persons who are appointed to serve as the grievance panel are posted in the office and are hereby incorporated by reference. This list will be updated as changes occur.

2) Assignment of the Grievance Panel

The assignment of the grievance panel for a particular grievance hearing will be made as follows:

- a) Assignment to a particular hearing will be made by KCHA subject to the availability of the members to serve for the hearing.
- b) Panel members must disqualify themselves from hearing grievances that involve personal friends, relatives, persons with whom they have any business relationship, or grievances in which they have some personal interest. Also, members are expected to disqualify themselves if the circumstances of a grievance give a significant perception that the member could show partiality.

If a complainant wishes to object to the assignment of a particular member on the grounds of partiality, the objection must be made before the hearing starts, otherwise the right to object is waived, and cannot be made thereafter. If a member fails to disqualify himself or herself as required in this section, KCHA will remove the member from the list of persons appointed to hear grievances; invalidate the results of the grievance hearing in which the person should have, but did not, disqualify himself or herself; and schedule a new hearing with another member.

G) PROCEDURES GOVERNING FORMAL GRIEVANCE HEARINGS

1. Time, Place, and Notice

KCHA will determine a time and place for the hearing that is convenient to the complainant, the grievance panel, and KCHA, within a reasonable time after the complainant has completed all the prerequisites described in Part 2, E(2). KCHA will give written notice to the complainant and the grievance panel specifying the time and place, and the procedures governing the hearing.

If the complainant or KCHA fails to appear at the scheduled hearing, the grievance panel may either postpone the hearing for a period not to exceed five business days or declare that the party failing to attend has waived the right to a hearing. In either case, the grievance panel must notify the complainant and KCHA of the determination. Failure to attend a grievance hearing does not constitute a waiver of the resident's right to contest KCHA's disposition of the grievance in a judicial proceeding.

2. The Hearing

The hearing will be held before a grievance panel assigned as described in Part 2, F(1). The grievance panel may render a decision without proceeding with the hearing if they determine that the issue has been decided in another proceeding. Otherwise, the hearing will be conducted informally by the grievance panel. The grievance panel may receive oral or documentary evidence pertinent to the facts and issues raised by the complaint without regard to admissibility under the rules of evidence applicable to judicial proceedings.

ORDERLY CONDUCT: The grievance panel will require KCHA, the complainant, counsel, and other participants or spectators to conduct themselves in an orderly fashion.

Failure to comply with directions of the grievance committee to maintain order may result in exclusion from the hearing or in an unfavorable decision influenced by the disorderly conduct of the party.

ENTITLEMENT TO RELIEF: At the beginning of the hearing the complainant must first make a showing of an entitlement to the relief sought. KCHA must justify its action or failure to act on the matter(s) which is the subject of the hearing.

FAIR HEARING: The resident will be given a fair hearing which includes:

- a) The opportunity, before the hearing, to examine and copy, for a nominal fee, any KCHA documents, including records and regulations that are directly relevant to the hearing. Documents that were not made available to the complainant cannot be used by KCHA during the grievance hearing.
- b) The right to be represented by counsel or another person chosen as the complainant's representative and to have that person make statements on the complainant's behalf.
- c) The right to a private hearing unless the complainant requests a public hearing.
- d) The right to present evidence and arguments relevant to the grievance, to counter evidence relied on by KCHA and to confront and cross examine all witnesses who provide testimony or information in behalf of KCHA's position in the grievance.
- e) A decision based solely and exclusively on the facts presented at the hearing.

TRANSCRIPT OF THE HEARING: The complainant or KCHA may arrange in advance, at the expense of the party making the arrangement, for a transcript of the hearing. Any interested party may purchase a copy of the transcript.

ACCOMODATION TO PERSONS WITH A DISABILITY: KCHA will provide reasonable accomodation for persons with disabilities to participate in grievance hearings. Reasonable accomodations may include qualified sign language interpreters, readers, accessible locations, or attendants.

H. DECISION OF THE GRIEVANCE PANEL

Within a reasonable time after the completion of the hearing, the grievance panel will make a determination as to the merits of the grievance.

WRITTEN DECISION: The grievance panel will prepare a written decision which gives the reasons for the decision. A copy of the decision will be sent to the complainant and to KCHA. KCHA will keep a copy of the decision in the complainant's resident file. An additional copy of the decision, with all names and identifying references deleted, will be kept by KCHA and may be reviewed by any prospective complainant, his or her representative, or grievance panel.

EFFECT OF THE DECISION: KCHA will be obligated by the written decision to take all actions, or refrain from any actions necessary to carry out the decision, unless the

KCHA Board of Commissioners determine within a reasonable time, and promptly notify the complainant that:

- a) The grievance does not concern action or failure to act on the part of KCHA which adversely affects the complainant's rights duties, welfare or status as provided for in the complainant's lease or KCHA's regulations, or
- b) The decision of the grievance panel is contrary to applicable Federal, State, or local law, HUD regulations or requirements of the Annual Contributions Contract between HUD and KCHA.

In the case of a hearing where the grievance panel upholds KCHA's proposal to evict the complainant, KCHA may not take action to regain possession of the unit until after the Resident's right to use and/or occupy the premises has been terminated by lawful notice. Such notice will not be given before the date the grievance panel's decision is delivered or mailed to the complainant. The notice to vacate must be in writing and must inform the Resident that:

- a) If the Resident fails to move from the unit within the time identified by law, or on the date stated in the Notice of Termination from KCHA, whichever is later, KCHA will take legal action against the Resident; and
- b) The Resident may be required to pay court costs and attorney fees.

RIGHT OF THE COMPLAINANT TO JUDICIAL PROCEEDINGS: A decision by the grievance panel or Board of Commissioners in favor of KCHA or which denies the relief requested by the complainant, in whole or in part, does not constitute a waiver of, nor affect in any way the rights of the complainant to a trial or judicial review in any judicial proceedings he or she may wish to pursue.

3. NOTICES

All notices under this grievance procedure will be considered delivered:

- a) When personally given to the complainant or adult member of the complainant's household,
- b) On the date received for or refused by the addressee, in the case of certified or registered U.S. Mail, or
- c) On the second day after placing the postage prepaid notice in the U.S. Postal Service, if mailed by first class mail other than certified or registered mail.

If the Resident is visually impaired, any notice delivered will be in as accessible format.

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name					<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2008 PHA FY: 2009	Work Statement for Year 3 FFY Grant: 2009 PHA FY: 2010	Work Statement for Year 4 FFY Grant: 2010 PHA FY: 2011	Work Statement for Year 5 FFY Grant: 2011 PHA FY: 2012	
	Annual Statement					
		Kitchen Upgrade 002	Kitchen Upgrade 002	Insulate Attics	Roof Replacement 1	
		Computer upgrade office	Office Upgrade	Washer Dryer Conn	Washer Dryer CONn	
		Grass and Erosion Control -Survey	Grass Erosion Control	Roofing	Grass Erosion Control	
		A&E COST	A&E	A&E	A&E	
		Operations	Operaions	Operations	Operations	
		Management Imp	Management Imp	Management Imp	Management Imp	
		Range Replacement	Range Replacement	Range Replacement	Range Replacement	
		Refrigerator Replacement	Refrigerator Replacement	Refrigerator Replacement	Refrigerator Replacement	
		Paint Sheet Rock	Paint Sheet Rock	Flooring		
		Roofs		Security Screens		
CFP Funds Listed for 5-year planning						
Replacement Housing Factor Funds						

