

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: _____ PHA Code: _____ PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): _____					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: _____ Number of HCV units: _____					
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<b>Mission.</b> 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 for the next five years:					
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.					
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.					
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>					
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.					
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.					
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.					
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.					
<b>9.0</b>	<b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.					

9.1	<p><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <ul style="list-style-type: none"> <li>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</li> <li>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</li> </ul>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</li> <li>(g) Challenged Elements</li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

**Privacy Act Notice.** The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

## Instructions form HUD-50075

**Applicability.** This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

### 1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

### 2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

### 3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

### 4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

### 5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

**5.1 Mission.** A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

**5.2 Goals and Objectives.** Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

**6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

#### PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.
7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**
8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.
12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
13. **Violence Against Women Act (VAWA).** A description of: **1)** Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; **2)** Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and **3)** Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

**7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers**

- (a) **Hope VI or Mixed Finance Modernization or Development.** **1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>
- (b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: **(1)** A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and **(2)** A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: [http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm)  
**Note:** This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.
- (c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: **1)** A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

- (d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

**8.0 Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

**8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;
2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
3. Upon completion or termination of the activities funded in a specific capital fund program year.

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

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

**8.3 Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

**9.0 Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**9.1 Strategy for Addressing Housing Needs.** Provide a 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. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

**10.0 Additional Information.** Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

**11.0 Required Submission for HUD Field Office Review.** In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

## **ATTACHMENT TO 2008 PHA PLAN IN ACCORDANCE WITH INSTRUCTIONS FOR PHA PLAN TEMPLATE form HUD-50075**

### 6.0 PHA Plan Update

- (a) Identification of PHA Plan elements that have been revised by Knoxville's Community Development Corporation (KCDC) since its last Annual Plan Submission:

KCDC's proposal to prepare and submit to HUD during this Plan Year (7/1/08 – 6/30/09) a request for approval to demolish some buildings/units at Western Heights (TN 3-1) and Montgomery Village (TN 3-13). Specific building/unit information is included in table below for section 7.0 of the template.

- (b) Identification of specific locations where the public may obtain copies of the 5-Year and Annual PHA Plan:

- KCDC Main Office located at 901 N. Broadway, Knoxville, TN;
- All KCDC Asset Management Property offices;
- KCDC's Section 8 Office at 400 Harriet Tubman Street, Knoxville, TN
- Knox County Public Library, Lawson McGhee information desk located at 500 W. Church Avenue, Knoxville, TN;
- City of Knoxville's Community Development Division located at the City-County Building, 5<sup>th</sup> floor, 400 Main Avenue, Knoxville, TN;
- Luther T. Ross Building located at 2247 Western Avenue, Knoxville, TN; and
- On KCDC's website at [www.kcdc.org](http://www.kcdc.org).

**Template Section 7.0 BUILDINGS/UNITS PROPOSED FOR DEMOLITION**

<b>Western Heights TN 3-1</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
304-0413	WA100	1724 Reed Street	4	N
304-0414	WA100	1722 Reed Street	4	N
304-0415	WA100	1720 Reed Street	4	N
304-0416	WA100	1718 Reed Street	4	N
304-0417	WA101	1716 Reed Street	3	Y
304-0418	WA101	1714 Reed Street	3	N
304-0419	WA102	1710 Reed Street	4	N
304-0420	WA102	1708 Reed Street	4	N
304-0421	WA102	1706 Reed Street	4	N
304-0422	WA102	1704 Reed Street	4	N
304-0427	WA105	1107 Bonnyman Drive	3	N
304-0428	WA105	1109 Bonnyman Drive	3	N
304-0429	WA106	1115 Bonnyman Drive	2	Y
304-0430	WA106	1117 Bonnyman Drive	2	N
304-0431	WA106	1119 Bonnyman Drive	3	N
304-0432	WA106	1121 Bonnyman Drive	3	N
304-0433	WA106	1123 Bonnyman Drive	2	N
304-0434	WA106	1125 Bonnyman Drive	2	N
304-0435	WA107	1127 Bonnyman Drive	4	N
304-0436	WA107	1129 Bonnyman Drive	4	N
304-0437	WA107	1131 Bonnyman Drive	4	N
304-0438	WA107	1133 Bonnyman Drive	4	N
304-0439	WA108	1135 Bonnyman Drive	2	N
304-0440	WA108	1137 Bonnyman Drive	2	N
304-0441	WA108	1139 Bonnyman Drive	3	N
304-0442	WA108	1141 Bonnyman Drive	3	N
304-0443	WA108	1143 Bonnyman Drive	2	N
304-0444	WA108	1145 Bonnyman Drive	2	Y
304-0469	WA113	1250 Bonnyman Drive	1	N
304-0470	WA113	1248 Bonnyman Drive	1	N
304-0471	WA113	1246 Bonnyman Drive	2	N
304-0472	WA113	1244 Bonnyman Drive	3	N
304-0473	WA113	1242 Bonnyman Drive	3	N
304-0474	WA113	1240 Bonnyman Drive	2	N

<b>Western Heights TN 3-1</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
304-0475	WA113	1238 Bonnyman Drive	1	N
304-0476	WA113	1236 Bonnyman Drive	1	N
304-0477	WA114	1230 Bonnyman Drive	5	N
304-0478	WA114	1228 Bonnyman Drive	5	N
304-0479	WA115	1226 Bonnyman Drive	2	N
304-0480	WA115	1224 Bonnyman Drive	2	N
304-0481	WA115	1222 Bonnyman Drive	3	N
304-0482	WA115	1220 Bonnyman Drive	3	N
304-0483	WA115	1218 Bonnyman Drive	2	N
304-0484	WA115	1216 Bonnyman Drive	2	N
304-0485	WA116	1214 Bonnyman Drive	3	N
304-0486	WA116	1212 Bonnyman Drive	3	N
304-0487	WA117	1210 Bonnyman Drive	2	N
304-0488	WA117	1208 Bonnyman Drive	2	N
304-0489	WA117	1206 Bonnyman Drive	3	N
304-0490	WA117	1204 Bonnyman Drive	3	N
304-0491	WA117	1202 Bonnyman Drive	2	N
304-0492	WA117	1200 Bonnyman Drive	2	N
304-0493	WA118	1166 Bonnyman Drive	4	N
304-0494	WA118	1164 Bonnyman Drive	4	N
304-0495	WA118	1162 Bonnyman Drive	4	N
304-0496	WA118	1160 Bonnyman Drive	4	N
304-0497	WA119	1158 Bonnyman Drive	5	N
304-0498	WA119	1156 Bonnyman Drive	5	N
304-0499	WA120	1154 Bonnyman Drive	5	N
304-0500	WA120	1152 Bonnyman Drive	5	N
304-0501	WA121	1150 Bonnyman Drive	3	Y
304-0502	WA121	1148 Bonnyman Drive	3	N
304-0503	WA122	1142 Bonnyman Drive	2	N
304-0504	WA122	1140 Bonnyman Drive	2	N
304-0505	WA122	1138 Bonnyman Drive	3	N
304-0506	WA122	1136 Bonnyman Drive	3	N
304-0507	WA122	1134 Bonnyman Drive	2	N
304-0508	WA122	1132 Bonnyman Drive	2	N
304-0509	WA123	1124 Bonnyman Drive	4	N
304-0510	WA123	1126 Bonnyman Drive	4	N

<b>Western Heights TN 3-1</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
304-0511	WA123	1128 Bonnyman Drive	4	Y
304-0512	WA123	1130 Bonnyman Drive	4	N
304-0513	WA124	1122 Bonnyman Drive	1	N
304-0514	WA124	1120 Bonnyman Drive	1	Y
304-0515	WA124	1118 Bonnyman Drive	2	N
304-0516	WA124	1116 Bonnyman Drive	3	N
304-0517	WA124	1114 Bonnyman Drive	3	N
304-0518	WA124	1112 Bonnyman Drive	2	N
304-0519	WA124	1110 Bonnyman Drive	1	Y
304-0520	WA124	1108 Bonnyman Drive	1	N
304-0521	WA125	1106 Bonnyman Drive	4	N
304-0522	WA125	1104 Bonnyman Drive	4	N
304-0523	WA125	1102 Bonnyman Drive	4	N
304-0524	WA125	1100 Bonnyman Drive	4	N
304-0525	WA126	1111 W. Oldham Avenue	2	Y
304-0526	WA126	1109 W. Oldham Avenue	2	N
304-0527	WA126	1107 W. Oldham Avenue	3	N
304-0528	WA126	1105 W. Oldham Avenue	3	N
304-0529	WA126	1103 W. Oldham Avenue	2	N
304-0530	WA126	1101 W. Oldham Avenue	2	N
304-0531	WA127	1601 McSpadden Street	2	N
304-0532	WA127	1603 McSpadden Street	2	N
304-0533	WA127	1605 McSpadden Street	3	N
304-0534	WA127	1607 McSpadden Street	3	N
304-0535	WA127	1609 McSpadden Street	2	N
304-0536	WA127	1611 McSpadden Street	2	N
304-0537	WA128	1613 McSpadden Street	2	N
304-0538	WA128	1615 McSpadden Street	2	N
304-0539	WA128	1617 McSpadden Street	3	N
304-0540	WA128	1619 McSpadden Street	3	N
304-0541	WA128	1621 McSpadden Street	2	N
304-0542	WA128	1623 McSpadden Street	2	N
304-0543	WA129	1635 McSpadden Street	2	N
304-0544	WA129	1633 McSpadden Street	2	N
304-0545	WA129	1631 McSpadden Street	3	N
304-0546	WA129	1629 McSpadden Street	3	N

<b>Western Heights TN 3-1</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
304-0547	WA129	1627 McSpadden Street	2	N
304-0548	WA129	1625 McSpadden Street	2	N
304-0549	WA130	1637 McSpadden Street	2	N
304-0550	WA130	1639 McSpadden Street	2	N
304-0551	WA130	1641 McSpadden Street	3	N
304-0552	WA130	1643 McSpadden Street	3	N
304-0553	WA130	1645 McSpadden Street	2	N
304-0554	WA130	1647 McSpadden Street	2	N
304-0555	WA131	1701 McSpadden Street	2	N
304-0556	WA131	1703 McSpadden Street	2	N
304-0557	WA131	1705 McSpadden Street	3	N
304-0558	WA131	1707 McSpadden Street	3	N
304-0559	WA131	1709 McSpadden Street	2	N
304-0560	WA131	1711 McSpadden Street	2	N
304-0561	WA132	1713 McSpadden Street	2	N
304-0562	WA132	1715 McSpadden Street	2	N
304-0563	WA132	1717 McSpadden Street	3	N
304-0564	WA132	1719 McSpadden Street	3	N
304-0565	WA132	1721 McSpadden Street	2	N
304-0566	WA132	1723 McSpadden Street	2	N
304-0567	WA133	1725 McSpadden Street	2	N
304-0568	WA133	1727 McSpadden Street	2	N
304-0569	WA133	1729 McSpadden Street	3	N
304-0570	WA133	1731 McSpadden Street	3	N
304-0571	WA133	1733 McSpadden Street	2	N
304-0572	WA133	1735 McSpadden Street	2	N
304-0573	WA134	1737 McSpadden Street	2	N
304-0574	WA134	1739 McSpadden Street	2	N
304-0575	WA134	1741 McSpadden Street	3	N
304-0576	WA134	1743 McSpadden Street	3	N
304-0577	WA134	1745 McSpadden Street	2	N
304-0578	WA134	1747 McSpadden Street	2	N
304-0579	WA135	1100 Virginia Avenue	4	N
304-0580	WA135	1102 Virginia Avenue	4	N
304-0581	WA135	1104 Virginia Avenue	4	N
304-0582	WA135	1106 Virginia Avenue	4	N

<b>Western Heights TN 3-1</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
304-0583	WA136	1108 Virginia Avenue	5	N
304-0584	WA136	1110 Virginia Avenue	5	N
304-0585	WA137	1112 Virginia Avenue	2	N
304-0586	WA137	1114 Virginia Avenue	2	N
304-0587	WA137	1116 Virginia Avenue	3	N
304-0588	WA137	1118 Virginia Avenue	3	N
304-0589	WA137	1120 Virginia Avenue	2	N
304-0590	WA137	1122 Virginia Avenue	2	N
304-0591	WA138	1200 Virginia Avenue	2	N
304-0592	WA138	1202 Virginia Avenue	2	N
304-0593	WA138	1204 Virginia Avenue	3	N
304-0594	WA138	1206 Virginia Avenue	3	N
304-0595	WA138	1208 Virginia Avenue	2	N
304-0596	WA138	1210 Virginia Avenue	2	N
304-0597	WA139	1300 Virginia Avenue	2	N
304-0598	WA139	1302 Virginia Avenue	2	N
304-0599	WA139	1304 Virginia Avenue	3	N
304-0600	WA139	1306 Virginia Avenue	3	N
304-0601	WA139	1308 Virginia Avenue	2	N
304-0602	WA139	1310 Virginia Avenue	2	N
304-0603	WA140	1627 Virginia Avenue	2	N
304-0604	WA140	1629 Virginia Avenue	2	N
304-0605	WA140	1631 Virginia Avenue	3	N
304-0606	WA140	1633 Virginia Avenue	3	N
304-0607	WA140	1635 Virginia Avenue	2	N
304-0608	WA140	1637 Virginia Avenue	2	N
304-0609	WA141	1641 Virginia Avenue	2	N
304-0610	WA141	1643 Virginia Avenue	2	N
304-0611	WA141	1645 Virginia Avenue	3	N
304-0612	WA141	1647 Virginia Avenue	3	N
304-0613	WA141	1649 Virginia Avenue	2	N
304-0614	WA141	1651 Virginia Avenue	2	N
304-0615	WA142	1701 Virginia Avenue	1	N
304-0616	WA142	1703 Virginia Avenue	1	N
304-0617	WA142	1705 Virginia Avenue	2	N
304-0618	WA142	1707 Virginia Avenue	3	N

<b>Western Heights TN 3-1</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
304-0619	WA142	1709 Virginia Avenue	3	N
304-0620	WA142	1711 Virginia Avenue	2	N
304-0621	WA142	1713 Virginia Avenue	1	N
304-0622	WA142	1715 Virginia Avenue	1	N
304-0623	WA143	1721 Virginia Avenue	3	N
304-0624	WA143	1723 Virginia Avenue	3	N
304-0625	WA144	2000 Testerman Drive	4	N
304-0626	WA144	2002 Testerman Drive	4	N
304-0627	WA144	2004 Testerman Drive	4	N
304-0628	WA144	2006 Testerman Drive	4	N
304-0629	WA145	2016 Testerman Drive	1	N
304-0630	WA145	2018 Testerman Drive	1	N
304-0631	WA145	2020 Testerman Drive	2	N
304-0632	WA145	2022 Testerman Drive	3	N
304-0633	WA145	2024 Testerman Drive	3	N
304-0634	WA145	2026 Testerman Drive	2	N
304-0635	WA145	2028 Testerman Drive	1	N
304-0636	WA145	2030 Testerman Drive	1	N
304-0637	WA146	2032 Testerman Drive	3	N
304-0638	WA146	2034 Testerman Drive	3	N
304-0639	WA147	1830 Vermont Avenue	3	N
304-0640	WA147	1828 Vermont Avenue	3	N
304-0641	WA148	1826 Vermont Avenue	4	N
304-0642	WA148	1824 Vermont Avenue	4	N
304-0643	WA148	1822 Vermont Avenue	4	N
304-0644	WA148	1820 Vermont Avenue	4	N
304-0645	WA149	1818 Vermont Avenue	3	N
304-0646	WA149	1816 Vermont Avenue	3	N
304-0647	WA150	1810 Vermont Avenue	4	N
304-0648	WA150	1808 Vermont Avenue	4	N
304-0649	WA150	1806 Vermont Avenue	4	N
304-0650	WA150	1804 Vermont Avenue	4	N
304-0651	WA151	1738 Vermont Avenue	3	N
304-0652	WA151	1736 Vermont Avenue	3	N
304-0653	WA152	1722 Vermont Avenue	2	N
304-0654	WA152	1720 Vermont Avenue	2	N

<b>Western Heights TN 3-1</b>					
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>	
304-0655	WA152	1718 Vermont Avenue	3	N	
304-0656	WA152	1716 Vermont Avenue	3	N	
304-0657	WA152	1714 Vermont Avenue	2	N	
304-0658	WA152	1712 Vermont Avenue	2	N	
304-0659	WA153	1700 Vermont Avenue	2	N	
304-0660	WA153	1702 Vermont Avenue	2	N	
304-0661	WA153	1704 Vermont Avenue	3	N	
304-0662	WA153	1706 Vermont Avenue	3	N	
304-0663	WA153	1708 Vermont Avenue	2	N	
304-0664	WA153	1710 Vermont Avenue	2	N	
304-0665	WA154	1724 Vermont Avenue	4	N	
304-0666	WA154	1726 Vermont Avenue	4	N	
304-0667	WA154	1728 Vermont Avenue	4	N	
304-0668	WA154	1730 Vermont Avenue	4	N	
304-0669	WA155	1800 Vermont Avenue	5	N	
304-0670	WA155	1802 Vermont Avenue	5	N	
304-0671	WA156	1812 Vermont Avenue	3	N	
304-0672	WA156	1814 Vermont Avenue	3	N	
304-0673	WA157	1916 Vermont Avenue	3	N	
304-0674	WA157	1918 Vermont Avenue	3	N	
304-0675	WA158	2011 Virginia Avenue	2	N	
304-0676	WA158	2009 Virginia Avenue	2	N	
304-0677	WA158	2007 Virginia Avenue	3	N	
304-0678	WA158	2005 Virginia Avenue	3	N	
304-0679	WA158	2003 Virginia Avenue	2	N	
304-0680	WA158	2001 Virginia Avenue	2	N	
304-0681	WA159	2013 Virginia Avenue	2	N	
304-0682	WA159	2015 Virginia Avenue	2	N	
304-0683	WA159	2017 Virginia Avenue	3	N	
304-0684	WA159	2019 Virginia Avenue	3	N	
304-0685	WA159	2021 Virginia Avenue	2	N	
304-0686	WA159	2023 Virginia Avenue	2	N	
304-0687	WA160	1903 Virginia Avenue	3	N	
304-0688	WA160	1901 Virginia Avenue	3	N	
1BR/16	2BR/100	3BR/78	4BR/44	5BR/10	Total = 248

<b>Montgomery Village TN 3-13</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
313-0037	MV007	1205 Cook Drive	2	N
313-0038	MV007	1205 Cook Drive	2	N
313-0039	MV007	1205 Cook Drive	2	N
313-0040	MV007	1205 Cook Drive	2	N
313-0041	MV007	1205 Cook Drive	2	N
313-0042	MV007	1205 Cook Drive	2	N
313-0043	MV007	1205 Cook Drive	2	N
313-0044	MV007	1205 Cook Drive	2	N
313-0113	MA023	1124 Daylily Drive	4	N
313-0114	MA023	1124 Daylily Drive	4	N
313-0115	MA023	1124 Daylily Drive	4	N
313-0116	MA023	1124 Daylily Drive	4	N
313-0117	MA023	1124 Daylily Drive	4	N
313-0118	MA023	1124 Daylily Drive	4	N
313-0129	MA026	1136 Daylily Drive	4	N
313-0130	MA026	1136 Daylily Drive	4	N
313-0131	MA026	1136 Daylily Drive	4	N
313-0132	MA026	1136 Daylily Drive	4	N
313-0133	MA026	1136 Daylily Drive	4	N
313-0134	MA026	1136 Daylily Drive	4	N
313-0161	MA033	1212 Daylily Drive	3	N
313-0162	MA033	1212 Daylily Drive	3	N
313-0163	MA033	1212 Daylily Drive	3	N
313-0164	MA033	1212 Daylily Drive	3	N
313-0165	MA033	1212 Daylily Drive	3	N
313-0166	MA033	1212 Daylily Drive	3	N
313-0195	MA046	4616 Joe Lewis Road	5	N
313-0196	MA046	4616 Joe Lewis Road	3	N
313-0197	MA046	4616 Joe Lewis Road	3	N
313-0198	MA046	4616 Joe Lewis Road	5	N
313-0199	MA045	4620 Joe Lewis Road	5	N
313-0200	MA045	4620 Joe Lewis Road	3	N
313-0201	MA045	4620 Joe Lewis Road	3	N
313-0202	MA045	4620 Joe Lewis Road	5	N
313-0203	MA044	4624 Joe Lewis Road	4	N
313-0204	MA044	4624 Joe Lewis Road	4	N

<b>Montgomery Village TN 3-13</b>				
<b>Dev/Unit Number</b>	<b>Building Number</b>	<b>Address</b>	<b>BR Size</b>	<b>H/A</b>
313-0205	MA044	4624 Joe Lewis Road	4	N
313-0206	MA044	4624 Joe Lewis Road	4	N
313-0207	MA044	4624 Joe Lewis Road	4	N
313-0208	MA044	4624 Joe Lewis Road	4	N
313-0217	MA043	4704 Joe Lewis Road	5	N
313-0218	MA043	4704 Joe Lewis Road	3	N
313-0219	MA043	4704 Joe Lewis Road	3	N
313-0220	MA043	4704 Joe Lewis Road	5	N
313-0251	MA076	4513 Joe Lewis Road	4	N
313-0252	MA076	4513 Joe Lewis Road	4	N
313-0253	MA076	4513 Joe Lewis Road	4	N
313-0254	MA076	4513 Joe Lewis Road	4	N
313-0255	MA076	4513 Joe Lewis Road	4	N
313-0256	MA076	4513 Joe Lewis Road	4	N
313-0269	MA073	1405 Daylily Drive	5	N
313-0270	MA073	1405 Daylily Drive	3	N
313-0271	MA073	1405 Daylily Drive	3	N
313-0272	MA073	1405 Daylily Drive	5	N
313-0339	MA062	1513 Daylily Drive	5	N
313-0340	MA062	1513 Daylily Drive	3	N
313-0341	MA062	1513 Daylily Drive	3	N
313-0342	MA062	1513 Daylily Drive	5	N
313-0353	MA059	1525 Daylily Drive	5	N
313-0354	MA059	1525 Daylily Drive	3	N
313-0355	MA059	1525 Daylily Drive	3	N
313-0356	MA059	1525 Daylily Drive	5	N
313-0397	MA054	1504 Daylily Drive	2	N
313-0398	MA054	1504 Daylily Drive	2	N
313-0399	MA054	1504 Daylily Drive	2	N
313-0400	MA054	1504 Daylily Drive	2	N
313-0401	MA054	1504 Daylily Drive	2	N
313-0402	MA054	1504 Daylily Drive	2	N
<b>2BR/14</b>	<b>3BR/18</b>	<b>4BR/24</b>	<b>5BR/12</b>	<b>Total = 68</b>

Timetable for Demolition: Prepare and submit demolition application to HUD for review and approval by 6/1/09.

**RESOLUTION NO. 2009-06**

**RESOLUTION OF THE BOARD OF COMMISSIONERS OF  
KNOXVILLE'S COMMUNITY DEVELOPMENT CORPORATION (KCDC)  
CERTIFYING COMPLIANCE WITH KCDC'S REVISED 2008 PUBLIC HOUSING  
AGENCY (PHA) PLAN AND RELATED REGULATIONS**

**WHEREAS**, Knoxville's Community Development Corporation (KCDC) has fulfilled all requirements set forth in 24 CFR Part 903 for developing a Public Housing Agency (PHA) Plan that includes an Annual Plan with supporting documents for KCDC's fiscal year beginning July 1, 2008; and

**WHEREAS**, KCDC has chosen to amend the Annual Plan in accordance with 24 CFR 903.21 which states a PHA may amend/modify the current PHA Plan for any substantial deviation/modification to the Plan; and

**WHEREAS**, the appropriate local official has certified that the revised Plan is consistent with the applicable Consolidated Plan; and

**WHEREAS**, KCDC established a resident advisory board representative of residents assisted by KCDC and consulted with the board in developing the Plan and considered recommendations of the board; and

**WHEREAS**, KCDC presented the Plan with supporting documents for public inspection for at least 45 days prior to a public hearing, published a notice of the date, time, and location of the public hearing, and conducted the public hearing on March 19, 2009 to discuss the Plan and invite public comment.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of Commissioners of Knoxville's Community Development Corporation (KCDC) that, effective March 26, 2009, KCDC's revised 2008 Public Housing Agency Plan be adopted.

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:  
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and/or  Annual PHA Plan for the PHA fiscal year beginning 07/01/2008, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
  - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
  - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
  - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Knoxville's Community Development Corporation

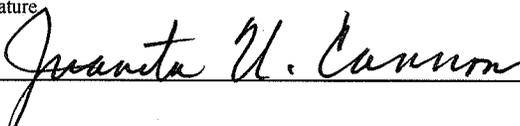
TN003

PHA Name

PHA Number/HA Code

\_\_\_\_ 5-Year PHA Plan for Fiscal Years 20\_\_\_\_ - 20\_\_\_\_  
 X \_\_\_\_ Annual PHA Plan for Fiscal Years 20<sup>08</sup> - 20<sup>09</sup>\_\_\_\_

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official  Juanita Cannon	Title  Board of Commissioners Vice Chairman
Signature  	Date  03/26/2009

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Knoxville's Community Development Corporation

Program/Activity Receiving Federal Grant Funding

Capital Fund Program/Replacement Housing Fund

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

**2. Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

See Attached

Check here  if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Alvin J. Nance

Title

Executive Director/Chief Executive Officer

Signature

X

Date

03/26/2009

**Attachment for Form HUD-50070**

**Sites for Work Performance**

Applicant Name & Address: Knoxville's Community Development Corporation  
901 Broadway, N. E.  
Knoxville, TN 37917

Program/activity receiving grant funding: Capital Fund Program and/or Replacement Housing Fund

<u>Site</u>	<u>Street Address</u>	<u>City</u>	<u>County</u>	<u>State</u>	<u>Zip Code</u>
Main Office	901 Broadway	Knoxville	(Knox)	Tennessee	37917
TN 3-1/4	1621 Jourolmon Ave.	Knoxville	(Knox)	Tennessee	37921
TN 3-5	2020 Minnesota Ave.	Knoxville	(Knox)	Tennessee	37921
TN 3-3/6	957 E. Hill Avenue	Knoxville	(Knox)	Tennessee	37915
TN 3-7	1171 Armstrong Ave.	Knoxville	(Knox)	Tennessee	37917
TN 3-8/9	317 McConnell Street	Knoxville	(Knox)	Tennessee	37915
TN 3-10	515 Renford Drive	Knoxville	(Knox)	Tennessee	37919
TN 3-11	4301 Whittle Springs Rd	Knoxville	(Knox)	Tennessee	37917
TN 3-12	712 Breda Drive	Knoxville	(Knox)	Tennessee	37918
TN 3-13/14	4530 Joe Lewis Road	Knoxville	(Knox)	Tennessee	37920
TN 3-21	2020 Minnesota Ave.	Knoxville	(Knox)	Tennessee	37921
TN 3-23	2020 Minnesota Ave.	Knoxville	(Knox)	Tennessee	37921
TN 3-25	957 E. Hill Avenue	Knoxville	(Knox)	Tennessee	37915
TN 3-26	2020 Minnesota Ave.	Knoxville	(Knox)	Tennessee	37921
TN 3-27	2020 Minnesota Ave.	Knoxville	(Knox)	Tennessee	37921

## Certification of Payments to Influence Federal Transactions

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

Applicant Name

Knoxville's Community Development Corporation

Program/Activity Receiving Federal Grant Funding  
Capital Fund Program

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

**Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.  
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Alvin J. Nance

Title

Executive Director/Chief Executive Officer

Signature



Date (mm/dd/yyyy)

03/26/2009

Previous edition is obsolete

ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3  
form HUD 50071 (3/98)

# DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB  
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____	
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:		<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>	
<b>6. Federal Department/Agency:</b>  Congressional District, if known: 4c		<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>		<b>9. Award Amount, if known:</b> \$ _____	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):  There are no lobbying activities to report		<b>b. Individuals Performing Services (including address if different from No. 10a)</b> (last name, first name, MI):	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		Signature:  Print Name: Alvin J. Nance Title: Executive Director/Chief Executive Officer Telephone No.: 865-401-1100      Date: 03/26/2009	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

PHA Plan Template Section 11.0 (f)  
Resident Advisory Board (RAB) Comments

No written comments received from RAB.

<b>Part I: Summary</b>					
<b>PHA Name:</b> Knoxville's Community Development Corporation		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P00350108 Date of CFFP:		Replacement Housing Factor Grant No:	
				<b>FFY of Grant: FFY2008</b>	
				<b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>					
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds	0	0		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	0	0		
3	1408 Management Improvements	0	0		
4	1410 Administration (may not exceed 10% of line 21)	263,125	263,125		
5	1411 Audit	0	0		
6	1415 Liquidated Damages	0	0		
7	1430 Fees and Costs	280,000	202,200		
8	1440 Site Acquisition	0	0		
9	1450 Site Improvement	100,000	9,875		
10	1460 Dwelling Structures	2,908,185	3,020,253		
11	1465.1 Dwelling Equipment—Nonexpendable	0	0		
12	1470 Non-dwelling Structures	0	135,000		
13	1475 Non-dwelling Equipment	0	0		
14	1485 Demolition	130,500	71,754		
15	1492 Moving to Work Demonstration	0	0		
16	1495.1 Relocation Costs	65,000	44,603		
17	1499 Development Activities <sup>4</sup>	0	0		
18a	1501 Collateralization or Debt Service paid by the PHA	1,708,483	1,708,483		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0		
19	1502 Contingency (may not exceed 8% of line 20)	0	0		
20	Amount of Annual Grant: (sum of lines 2 – 19)	5,455,293	5,455,293		
21	Amount of line 20 Related to LBP Activities	0	0		
22	Amount of line 20 Related to Section 504 Activities	0	0		
23	Amount of line 20 Related to Security – Soft Costs	0	0		
24	Amount of line 20 Related to Security – Hard Costs	0	0		
25	Amount of line 20 Related to Energy Conservation Measures	0	69,000		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

<b>Part I: Summary</b>			
<b>PHA Name:</b> Knoxville's Community Development Corporation		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P00350108      Replacement Housing Factor Grant No: Date of CFFP:	
		<b>FFY of Grant: FFY2008</b>	
		<b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>			
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1 )			
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>	
		<b>Original</b>	<b>Revised<sup>2</sup></b>
			<b>Obligated</b>
			<b>Total Actual Cost<sup>1</sup></b>
		<b>Original</b>	<b>Revised<sup>2</sup></b>
			<b>Obligated</b>
			<b>Total Actual Cost<sup>1</sup></b>
<b>Signature of Executive Director</b>		<b>Date</b> 03/26/2009	<b>Signature of Public Housing Director</b>
			<b>Date</b>

<b>Part II: Supporting Pages</b>								
PHA Name: Knoxville's Community Development Corporation		Grant Type and Number Capital Fund Program Grant No: TN37P00350108 Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant: FFY2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
TN 3-1/4	Roofing	1460	103 bldgs	520,000	495,000			
Western Heights	Paint Exteriors 3-1	1460	93 bldgs	54,000	53,286			
	Remodel Units	1460	50 units	215,920	0			Delete/Reallocate
	A& E Fees	1430	N/A	0	7,145			Addition
	Relocation	1495.1	50 units	0	12,500			Addition
	<b>Sub-Total</b>			<b>789,920</b>	<b>567,931</b>			
TN 3-3	Demo Maintenance Shop	1485	1 bldg	0	35,000			Addition
Austin Homes	Landscape Demolition Area	1450	N/A	0	9,875			Addition
	<b>Sub-Total</b>			<b>0</b>	<b>44,875</b>			
TN3-5/21/26/27	Debt Service	1501	N/A	1,025,090				
Lonsdale Homes	Roof Mechanicsville 3-21 bldgs	1460	8 Bldgs	0	88,000			Addition-Fungibility
	Foundation Piers Center Support at 3-21	1460	16 Bldgs	0	26,000			Addition-Fungibility
	<b>Sub-Total</b>			<b>1,025,090</b>	<b>1,139,090</b>			
TN 3-7	Roof A & B buildings	1460	2 bldgs	146,818				
Love Towers	Upgrade Cable Wiring	1460	2 bldgs	0	151,014			Addition-Fungibility
	<b>Sub-Total</b>			<b>146,818</b>	<b>297,832</b>			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: Knoxville's Community Development Corporation		Grant Type and Number Capital Fund Program Grant No: TN37P00350108 Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant: FFY2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
TN 3-8	A&E Fees for Redesign/Demo Plan	1430	N/A	5,000				
Taylor Homes	Landscaping	1450	N/A	50,000	0			Delete/Reallocate
	Demolition	1485	14 Bldgs	63,000	0			Delete/Reallocate
	Relocation	1495.1	N/A	35,000	0			Delete/Reallocate
	<b>Subtotal</b>			<b>153,000</b>	<b>5,000</b>			
TN 3-9	A&E Fees for Redesign/Demo Plan	1430	N/A	5,000				
Lee Williams	Landscaping	1450	N/A	50,000	0			Delete/Reallocate
	Demolition	1485	15 Bldgs	67,500	0			Delete/Reallocate
	Relocation	1495.1	N/A	30,000	20,000			
	<b>Subtotal</b>			<b>152,500</b>	<b>25,000</b>			
TN 3-10	Seal Bldg Exterior & Caulk Windows	1460	2 Bldgs	0	69,000			Addition-Fungibility
Cagle Terrace	Emergency Repair to Elevators	1460	2 Bldgs	0	72,635			Emergency Addition
	Upgrade Elevators to State Code	1460	2 Bldgs	0	80,000			Addition
	<b>Subtotal</b>			<b>0</b>	<b>221,635</b>			
TN 3-11	Roofing	1460	1 Bldg	66,500				
Northgate Terrace								
	<b>Subtotal</b>			<b>66,500</b>	<b>66,500</b>			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: Knoxville's Community Development Corporation		Grant Type and Number Capital Fund Program Grant No: TN37P00350108 Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant: FFY2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
TN 3-12	Roofing	1460	100 Bldgs	790,000	788,000			
Christenberry Hgts	Debt Service	1501	N/A	683,393				
	<b>Subtotal</b>			<b>1,473,393</b>	<b>1,471,393</b>			
TN 3-13	A&E Fees	1430	N/A	0	7,145			Addition
Montgomery Village	Roofing	1460	66 Bldgs	783,000	691,500			
	Guttering	1460	66 Bldgs	188,000	180,000			
	Remodel Units	1460	35 Units	143,947	0			Delete-Reallocate
	Demolition	1485	1 Bldg	0	36,754			Addition
	Relocation	1495.1	48 Units	0	12,103			Addition
	<b>Subtotal</b>			<b>1,114,947</b>	<b>927,502</b>			
TN 3-23	Paint exterior of Buildings	1460	25 Bldgs	0	112,500			Addition
Passport Residences								
	<b>Subtotal</b>			<b>0</b>	<b>112,500</b>			

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: <b>Knoxville's Community Development Corporation</b>					Federal FFY of Grant: <b>FFY2008</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
TN 3-1/4 Western Heights	06/30/10		06/30/12		
TN 3-3 Austin Homes	06/30/10		06/30/12		
TN 3-5/21/26/27 Lonsdale Hom	06/30/10		06/30/12		
TN 3-7 Love Towers	06/30/10		06/30/12		
TN 3-8 Taylor Homes	06/30/10		06/30/12		
TN 3-9 Dr. Lee Williams	06/30/10		06/30/12		
TN 3-10 Cagle Terrace	06/30/10		06/30/12		
TN 3-11 Northgate Terrace	06/30/10		06/30/12		
TN 3-12 Christenberry Heights	06/30/10		06/30/12		
TN 3-13 Montgomery Village	06/30/10		06/30/12		
TN 3-23 Passport Residences	06/30/10		06/30/12		Addition
TN 3-25 The Vista	06/30/10		06/30/12		
HA Wide	06/30/10		06/30/12		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.