

# PHA Plans

## Streamlined Annual Version

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

OMB No. 2577-0226  
(exp. 05/31/2006)

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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 that introduced 5-year and annual PHA Plans. The full PHA plan provides 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 allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 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, Federal Housing Administration, 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. Information in PHA plans is publicly available.

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# Streamlined Annual PHA Plan

## for Fiscal Year: **2008**

**PHA Name:**

**Franklin County Consolidated Housing  
Authority**

**TN125v01**

**Final Copy**

**NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.**

## Streamlined Annual PHA Plan Agency Identification

**PHA Name:** Franklin County Consolidated

**PHA Number:** TN125

**PHA Fiscal Year Beginning:** (mm/yyyy) 01/2008

**PHA Programs Administered:**

**Public Housing and Section 8**

**Section 8 Only**

**Public Housing Only**

Number of public housing units:

Number of S8 units:

Number of public housing units: 234

Number of S8 units:

**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:		Not Applicable		
Participating PHA 3:				

**PHA Plan Contact Information:**

Name: Mr. John E. Greer

Phone: (931) 967-0344

TDD: NA

Email (if available): fccha@earthlink.net

**Public Access to Information**

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

PHA's main administrative office       PHA's development management offices

**Display Locations for PHA Plans and Supporting Documents**

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection.       Yes       No.

If yes, select all that apply:

Main administrative office of the PHA

PHA development management offices

Main administrative office of the local, county or State government

Public library       PHA website       Other (list below)

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

Main business office of the PHA       PHA development management offices

Other (list below)

**Streamlined Annual PHA Plan**  
**Fiscal Year 2008**  
[24 CFR Part 903.12(c)]

**Table of Contents**  
[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

**A. PHA PLAN COMPONENTS**

- 1. Site-Based Waiting List Policies  
**903.7(b)(2) Policies on Eligibility, Selection, and Admissions**
- 2. Capital Improvement Needs  
**903.7(g) Statement of Capital Improvements Needed**
- 3. Section 8(y) Homeownership  
**903.7(k)(1)(i) Statement of Homeownership Programs**
- 4. Project-Based Voucher Programs
- 5. PHA Statement of Consistency with Consolidated Plan. Complete only if PHA has changed any policies, programs, or plan components from its last Annual Plan.
- 6. Supporting Documents Available for Review
- 7. Capital Fund Program and Capital Fund Program Replacement Housing Factor, Annual Statement/Performance and Evaluation Report
- 8. Capital Fund Program 5-Year Action Plan
- 9. Other: Violence Against Women Act—Statement and Policy

**B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE**

**Form HUD-50076, PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan** identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

**Form HUD-50070, Certification for a Drug-Free Workplace;**

**Form HUD-50071, Certification of Payments to Influence Federal Transactions; and**

**Form SF-LLL & SF-LLLa, Disclosure of Lobbying Activities.**

**1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)**

[24 CFR Part 903.12(c), 903.7(b)(2)]

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

**A. Site-Based Waiting Lists-Previous Year**

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B. **Not Applicable**

<b>SITE-BASED WAITING LISTS</b>				
<b>Development Information:</b> (Name, number, location)	<b>Date Initiated</b>	<b>Initial mix of Racial, Ethnic or Disability Demographics</b>	<b>Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL</b>	<b>Percent change between initial and current mix of Racial, Ethnic, or Disability demographics</b>
<b>Not Applicable</b>				

2. What is the number of site based waiting list developments to which families may apply at one time?
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?
4.  Yes  No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

**B. Site-Based Waiting Lists – Coming Year Not Applicable**

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 next component.

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)

**2. Capital Improvement Needs**

[24 CFR Part 903.12 (c), 903.7 (g)]

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

**A. Capital Fund Program**

1.  Yes  No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2.  Yes  No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

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

Applicability: 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.

1.  Yes  No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).

2. Status of HOPE VI revitalization grant(s):

<b>HOPE VI Revitalization Grant Status</b>	
a.	Development Name:
b.	Development Number:
c.	Status of Grant: <ul style="list-style-type: none"> <li><input type="checkbox"/> Revitalization Plan under development</li> <li><input type="checkbox"/> Revitalization Plan submitted, pending approval</li> <li><input type="checkbox"/> Revitalization Plan approved</li> <li><input type="checkbox"/> Activities pursuant to an approved Revitalization Plan underway</li> </ul>

3.  Yes  No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name(s) below:
4.  Yes  No: 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:
5.  Yes  No: 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: **The FCCCHA proposes to develop 6 new public housing units utilizing Capital Funds and Replacement Housing Factor Funds.**

**3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program**  
(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

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 the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)

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, what is the maximum number of participants this fiscal year?

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:

c. What actions will the PHA undertake to implement the program this year (list)?

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

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

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

- Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- Demonstrating that it has other relevant experience (list experience below):

#### **4. Use of the Project-Based Voucher Program**

##### **Intent to Use Project-Based Assistance**

Yes  No: Does the PHA plan to “project-base” any tenant-based Section 8 vouchers in the coming year? If the answer is “no,” go to the next component. If yes, answer the following questions.

1.  Yes  No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
  - low utilization rate for vouchers due to lack of suitable rental units
  - access to neighborhoods outside of high poverty areas
  - other (describe below):
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

#### **5. PHA Statement of Consistency with the Consolidated Plan**

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: (provide name here)  
**State of Tennessee, Tennessee Housing Development Agency**
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
  - The PHA has based its statement of needs of families on its waiting lists 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)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

**Not Applicable**

## **6. Supporting Documents Available for Review for Streamlined Annual PHA Plans**

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

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
NA	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
X	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
X	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA’s public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development.	Annual Plan: Rent

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	<input type="checkbox"/> Check here if included in the public housing A & O Policy.	Determination
NA	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
X	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
NA	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
NA	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
NA	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
NA	Section 8 informal review and hearing procedures. <input type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
X	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
X	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
X	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
NA	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
NA	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
NA	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)
NA	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

**FRANKLIN COUNTY CONSOLIDATED HOUSING AUTHORITY**  
**136 Ross Lane**  
**P.O. Box 502**  
**Winchester, Tennessee 37398**

**VIOLENCE AGAINST WOMEN ACT**  
**PHA STATEMENT**

The Franklin County Consolidated Housing Authority provides or offers referrals, training and information to anyone being abused. This includes child or adult victims of domestic violence, dating violence, sexual assault or stalking.

We are a partner in the local Social Service Community Board and have referral information available for the Families in Crisis, which is our local domestic abuse program. This agency is an excellent provider of information and refuge for victims of domestic violence.

We often provide housing to victims directly from the Families in Crisis that are fleeing domestic violence and need a safe place to reside. We refer our residents to the Families in Crisis shelter, when they need enhanced safety due to domestic violence.

Our local Police Department also provides training for our residents at our Resident Activity Centers on domestic violence and self defense.

We provide the VAWA Notice to all applicants and tenants of their rights under VAWA together with the HUD 50066 form. This notice includes the Domestic Violence hotline number and web address in addition to other information.

We are in the process of amending our lease to include additional language that clearly specifies our right to bifurcate the lease to evict the perpetrator while protecting the victims from domestic violence. It clearly specifies our right to bifurcate the lease to evict the perpetrator while protecting the victim.

**FRANKLIN COUNTY CONSOLIDATED HOUSING AUTHORITY**  
**136 Ross Lane**  
**P.O. Box 502**  
**Winchester, Tennessee 37398**

**VIOLENCE AGAINST WOMEN ACT**  
**PHA POLICY**

**BACKGROUND**

The Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA) provides protection for tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on such acts of violence against them.

In general, the law provides, in part, that criminal activity directly relating to domestic violence, dating violence or stalking, engaged in by a member of a tenant's household, or any guest or other persons under the tenant's control, shall not be cause for termination of assistance, tenancy or occupancy rights of the tenant or immediate family member if the tenant's family is the victim or threatened victim of the abuse. The law provides that an incident or incidents of actual or threatened domestic violence, dating violence or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence, and will not be "good cause" for termination of assistance, tenancy, or occupancy rights of a victim of such violence.

Furthermore, the law allows a PHA to "bifurcate" a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant.

The VAWA also allows PHAs to request an individual to certify that the individual is a victim of abuse and that the incidences of abuse are bona fide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification within 14 business days after the individual receives a request for such a certification from the PHA.

**DEFINITIONS**

The following definitions were incorporated into the United States Housing Act and apply to this policy:

**Domestic Violence:** Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with, or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

**Dating Violence:** Violence committed by a person:

- who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- where the existence of such a relationship shall be determined based on a consideration of the following factors: 1) the length of the relationship; 2) the type of relationship, and 3) the frequency of interaction between the persons involved in the relationship.

**Stalking:** To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to 1) that person; 2) a member of the immediate family of that person, or 3) the spouse or intimate partner of that person.

**Immediate Family Member:** A spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

## **POLICY**

The following policy amends the *Admissions and Occupancy Policy (ACOP)* and the Apartment Lease by reference. Appropriate language will be added to the ACOP and Apartment lease at the next revision dates of each.

A copy of this policy is available at the main office of the housing authority. A copy will be made available on request.

### **Admissions and Occupancy and Termination of Assistance**

Being a victim of domestic violence, dating violence, or stalking, will not be considered by the Franklin County Consolidated Housing Authority (FCCHA) to be a basis for denial of assistance, or admission to public housing if the application otherwise qualifies for assistance or admission.

Incidents or threats of abuse will not be construed by the FCCHA as serious or repeated violations of the lease or other “good cause” for termination of the assistance, tenancy, or occupancy rights of a victim of abuse.

Criminal activity directly relating to abuse, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of assistance, tenancy or occupancy rights if the tenant or an immediate family member of the tenant’s family is the victim or threatened victim of the abuse.

### **Rights of the Franklin County Consolidated Housing Authority**

The FCCHA may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant, and such eviction, removal, termination of occupancy rights, or termination of assistance

shall be effected in accordance with the procedures prescribed by federal, state and local law for the termination of leases, or assistance under HUD's Public Housing Program.

### **Certification of Abuse and Confidentiality**

The FCCHA will require that an individual certify that he/she is a victim of abuse and that the incidences of abuse are bonafide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification to the PHA within 14 business days after the individual receives a request from the PHA. The individual may utilize the attached *Form HUD 50066, Certification of Domestic Violence, Dating Violence, or Stalking* to certify the abuse to the FCCHA. In lieu of Form HUD 50066, the individual may provide the FCCHA with documentation signed by an employee, agent, volunteer of a victim service provider, an attorney, or a medical professional from whom the victim has sought assistance in addressing domestic violence, dating violence, or stalking, or the affects of the abuse, in which the professional attests (under penalty of perjury (28 U.S.C. 1746) to the professionals belief that the incident or incidents in question are bonafide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation. In cases where the individual does not submit the required certification, the PHA may terminate assistance.

### **Notification to Residents**

The PHA will provide notice to all residents and applicants of their rights under Section 6 of the United States Housing Act of 1937 as amended by the Violence Against Women Act of 2005. These rights include the residents' right to confidentiality and the limits thereof, the availability of Form HUD 50066, and that the resident may not be evicted solely on the basis that they are a victim of domestic violence. A sample notice is included with this policy.

### **Confidentiality**

All information provided to the FCCHA relating to the incident(s) of domestic violence, including the fact that the individual is a victim of domestic violence, dating violence, or stalking will be retained in confidence by the FCCHA and will not be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is (a) requested or consented by the individual in writing; (b) required for use in an eviction proceeding or termination of assistance; or, (c) otherwise required by applicable law.

## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
PHA Name: <b>Franklin County Consolidated Housing Authority</b>			Grant Type and Number Capital Fund Program Grant No: <b>TN43P12550108</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2008</b>
<input checked="" type="checkbox"/> Original Annual Statement			<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:			<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$58,000.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$33,000.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$10,000.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$25,000.00			
10	1460 Dwelling Structures	\$196,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$3,000.00			
18	1499 Development Activities	\$5,000.00			
19	1501 Collaterization or Debt Service	\$0.00			
20	1502 Contingency	\$0.00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$0.00			
22	Amount of line 21 Related to LBP Activities	\$330,000.00			
23	Amount of line 21 Related to Section 504 compliance	\$0.00			
24	Amount of line 21 Related to Security – Soft Costs	\$0.00			
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00			
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00			



**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
<b>PHA Name: Franklin County                      Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN43P12550108</b> Replacement Housing Factor No:				<b>Federal FY of Grant: 2008</b>
<b>Development Number                      Name/HA-Wide                      Activities</b>	<b>All Fund Obligated                      (Quarter Ending Date)</b>			<b>All Funds Expended                      (Quarter Ending Date)</b>			<b>Reasons for Revised Target Dates</b>
	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	
PHA-Wide	09/30/10			09/30/12			
TN125-001	09/30/10			09/30/12			
TN125-002	09/30/10			09/30/12			
TN125-003	09/30/10			09/30/12			

**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Franklin County Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: <b>TN43R01150108 RHF</b>		<b>Federal FY of Grant:</b> <b>2008</b>
<input checked="" type="checkbox"/> <b>Original Annual Statement</b>		<input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b>		<input type="checkbox"/> <b>Revised Annual Statement (revision no: )</b>	
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b>			<input type="checkbox"/> <b>Final Performance and Evaluation Report</b>		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0.00			
2	1406 Operations	0.00			
3	14010 Management Improvements	0.00			
4	1410 Administration	0.00			
5	1411 Audit	0.00			
6	1415 Liquidated Damages	0.00			
7	1430 Fees and Costs	0.00			
10	1440 Site Acquisition	0.00			
9	1450 Site Improvement	0.00			
10	1460 Dwelling Structures	0.00			
11	1465.1 Dwelling Equipment-Nonexpendable	0.00			
12	1470 Nondwelling Structures	0.00			
13	1475 Nondwelling Equipment	0.00			
14	14105 Demolition	0.00			
15	1490 Replacement Reserve	0.00			
16	1492 Moving to Work Demonstration	0.00			
17	1495.1 Relocation Costs	0.00			
110	1499 Development Activities	\$56,000.00			
19	1501 Collateralization or Debt Service	0.00			
20	1502 Contingency	0.00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$56,000.00			
22	Amount of line 21 Related to LBP Activities	0.00			
23	Amount of line 21 Related to Section 504 compliance	0.00			
24	Amount of line 21 Related to Security – Soft Costs	0.00			
25	Amount of Line 21 Related to Security – Hard Costs	0.00			
26	Amount of line 21 Related to Energy Conservation Measures	0.00			



**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
<b>PHA Name: Franklin County Consolidated Housing Authority</b>			<b>Grant Type and Number                      Capital Fund Program No:                      Replacement Housing Factor No: TN43R01150108 RHF</b>			<b>Federal FY of Grant: 2008</b>	
<b>Development Number                      Name/HA-Wide                      Activities</b>	<b>All Fund Obligated                      (Quarter Ending Date)</b>			<b>All Funds Expended                      (Quarter Ending Date)</b>			<b>Reasons for Revised Target Dates</b>
	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	
TN0125-02	09/30/10			09/30/12			

## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
PHA Name: <b>Franklin County Consolidated Housing Authority</b>			Grant Type and Number Capital Fund Program Grant No: <b>TN43P12550107</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2007</b>
<input type="checkbox"/> Original Annual Statement			<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: <b>1</b> )
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>06/30/07</b>			<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00		
2	1406 Operations	\$76,471.00	\$68,812.00		
3	1408 Management Improvements	\$0.00	\$0.00		
4	1410 Administration	\$0.00	\$15,000.00		
5	1411 Audit	\$0.00	\$0.00		
6	1415 Liquidated Damages	\$0.00	\$0.00		
7	1430 Fees and Costs	\$26,000.00	\$45,000.00		
8	1440 Site Acquisition	\$0.00	\$0.00		
9	1450 Site Improvement	\$4,485.00	\$9,254.00		
10	1460 Dwelling Structures	\$156,000.00	\$131,000.00		
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00		
12	1470 Nondwelling Structures	\$0.00	\$0.00		
13	1475 Nondwelling Equipment	\$0.00	\$0.00		
14	1485 Demolition	\$0.00	\$0.00		
15	1490 Replacement Reserve	\$0.00	\$0.00		
16	1492 Moving to Work Demonstration	\$0.00	\$0.00		
17	1495.1 Relocation Costs	\$0.00	\$0.00		
18	1499 Development Activities	\$75,000.00	\$75,000.00		
19	1501 Collateralization or Debt Service	\$0.00	\$0.00		
20	1502 Contingency	\$0.00	\$0.00		
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$0.00	\$0.00		
22	Amount of line 21 Related to LBP Activities	\$337,956.00	\$344,066.00		
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00		
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00		
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00		
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00	\$0.00		



**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
<b>PHA Name: Franklin County                      Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN43P12550107</b> Replacement Housing Factor No:				<b>Federal FY of Grant: 2007</b>
<b>Development Number                      Name/HA-Wide                      Activities</b>	<b>All Fund Obligated                      (Quarter Ending Date)</b>			<b>All Funds Expended                      (Quarter Ending Date)</b>			<b>Reasons for Revised Target Dates</b>
	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	
PHA-Wide	09/30/09			09/30/11			
TN125-001	09/30/09			09/30/11			
TN125-002	09/30/09			09/30/11			
TN125-003	09/30/09			09/30/11			

**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Franklin County Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: <b>TN43R01150107 RHF</b>		<b>Federal FY of Grant:</b> <b>2007</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 checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>06/30/07</b> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0.00			
2	1406 Operations	0.00			
3	14010 Management Improvements	0.00			
4	1410 Administration	0.00			
5	1411 Audit	0.00			
6	1415 Liquidated Damages	0.00			
7	1430 Fees and Costs	0.00			
10	1440 Site Acquisition	0.00			
9	1450 Site Improvement	0.00			
10	1460 Dwelling Structures	0.00			
11	1465.1 Dwelling Equipment-Nonexpendable	0.00			
12	1470 Nondwelling Structures	0.00			
13	1475 Nondwelling Equipment	0.00			
14	14105 Demolition	0.00			
15	1490 Replacement Reserve	0.00			
16	1492 Moving to Work Demonstration	0.00			
17	1495.1 Relocation Costs	0.00			
110	1499 Development Activities	\$58,040.00	\$58,582.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	0.00			
20	1502 Contingency	0.00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$58,040.00	\$58,582.00	\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities	0.00			
23	Amount of line 21 Related to Section 504 compliance	0.00			
24	Amount of line 21 Related to Security – Soft Costs	0.00			
25	Amount of Line 21 Related to Security – Hard Costs	0.00			
26	Amount of line 21 Related to Energy Conservation Measures	0.00			





## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
PHA Name: <b>Franklin County Consolidated Housing Authority</b>			Grant Type and Number Capital Fund Program Grant No: <b>TN43P12550106</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>2006</b>
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>6/30/2007</b>			<input type="checkbox"/> Final Performance and Evaluation Report		
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$65,000.00	65,000	\$30,000.00	\$30,000.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$12,956.00	\$12,956.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$31,000.00	\$31,000.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$4,000.00	\$4,000.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$142,500.00	\$142,500.00	\$0.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$2,500.00	\$2,500.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$5,000.00	\$5,000.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1499 Development Activities	\$75,000.00	\$103,593.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$337,956.00</b>	<b>\$366,549.00</b>	<b>\$ 30,000.00</b>	<b>\$ 30,000.00</b>
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b>								
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>								
<b>Part II: Supporting Pages</b>								
<b>PHA Name: Franklin County Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN43P12550106</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant: 2006</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Qty	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Non-CFP Funds		1	\$0.00	\$0.00	\$0.00	\$0.00	
PHA-Wide	Operating fund	1406	1	\$65,000.00	\$65,000.00	\$30,000.00	\$30,000.00	In Process
PHA-Wide	Advertising	1410	1	\$956.00	\$956.00	\$0.00	\$0.00	Planning
PHA-Wide	Staff time spent on CFP program and advertisements	1410	1	\$12,000.00	\$12,000.00	\$0.00	\$0.00	Planning
PHA-Wide	A/E Services, MOD Coordinator, Agency Plan	1430	1	\$31,000.00	\$31,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Landscaping, walks, parking, drainage, lighting, signage	1450	1	\$4,000.00	\$4,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Interior/exterior painting	1460	1	\$45,000.00	\$45,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Bath renovations	1460	1	\$15,000.00	\$15,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Replace flooring	1460	1	\$15,000.00	\$15,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Kitchen renovations	1460	1	\$15,000.00	\$15,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Replace water heaters	1460	1	\$16,000.00	\$16,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Replace HVAC	1460	1	\$16,000.00	\$16,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Storm doors	1460	1	\$2,000.00	\$2,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Replace roofs	1460	1	\$9,500.00	\$9,500.00	\$0.00	\$0.00	Planning
PHA-Wide	Replace windows	1460	1	\$9,000.00	\$9,000.00	\$0.00	\$0.00	Planning
PHA-Wide	Stoves, refrigerators, washers & dryers	1465	1	\$2,500.00	\$2,500.00	\$0.00	\$0.00	Planning
PHA-Wide	Vehicle, mowers, tools	1475	1	\$5,000.00	\$5,000.00	\$0.00	\$0.00	Planning
TN125-02	Development Activities	1499	1	\$75,000.00	\$103,593.00	\$0.00	\$0.00	Planning
TN125-02	Debt Service	1501	1	\$0.00	\$0.00	\$0.00	\$0.00	Planning
	<b>TOTAL</b>			<b>\$337,956.00</b>	<b>\$366,549.00</b>	<b>\$ 0</b>	<b>\$ 0</b>	

**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report                      Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)                      Part III: Implementation Schedule</b>							
<b>PHA Name: Franklin County                      Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN43P12550106</b> Replacement Housing Factor No:				<b>Federal FY of Grant: 2006</b>
<b>Development                      Number                      Name/HA-Wide                      Activities</b>	<b>All Fund Obligated                      (Quarter Ending Date)</b>			<b>All Funds Expended                      (Quarter Ending Date)</b>			<b>Reasons for Revised Target Dates</b>
	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	<b>Original</b>	<b>Revised</b>	<b>Actual</b>	
PHA-Wide	07/18/2009			07/18/2010			
TN125-002	07/18/2009			07/18/2010			

## 7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
<b>PHA Name:</b> <span style="color: blue;">Franklin County Consolidated Housing Authority</span>			<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: <span style="color: blue;">TN43R12550106 RHF</span>		<b>Federal FY of Grant:</b> <span style="color: blue;">2006</span>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <span style="color: blue;">06/30/07</span> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	14010 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 Liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
10	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$0.00			
11	1465.1 Dwelling Equipment-Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	14105 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
110	1499 Development Activities	\$58,040.00	\$62,951.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	\$0.00			
20	1502 Contingency	\$0.00			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$58,040.00	\$62,951.00	\$0.00	\$0.00
22	Amount of line 21 Related to LBP Activities	\$0.00			
23	Amount of line 21 Related to Section 504 compliance	\$0.00			
24	Amount of line 21 Related to Security – Soft Costs	\$0.00			
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00			
26	Amount of line 21 Related to Energy Conservation Measures	\$0.00			





**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

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

PHA Name: <b>Franklin County Consolidated Housing Authority</b>	Grant Type and Number Capital Fund Program: <b>TN43P12550105</b> Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2005</b>
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Original Annual Statement     
 Reserve for Disasters/ Emergencies     
 Revised Annual Statement (revision no: )  
 Performance and Evaluation Report for Period Ending: **6/30/07**     
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$60,000.00	\$337,428.45	\$60,000.00	\$60,000.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$13,000.00	\$639.00	639.00	639.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$26,000.00	\$32,564.33	\$30,391.33	\$28,416.33
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$4,485.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$154,500.00	\$70,760.77	\$66,599.30	\$62,437.83
11	1465.1 Dwelling Equipment—Nonexpendable	\$2,500.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$5,000.00	\$1,092.45	\$1,092.45	\$1,092.45
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00
18	1498 Mod Used for Development	\$0.00	\$0.00	\$0.00	\$0.00
19	1499 Development Activities	\$77,000.00	\$0.00	\$0.00	\$0.00
20	1501 Collaterization or Debt Service	\$100,000.00	\$0.00	\$0.00	\$0.00
21	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
22	<b>Amount of Annual Grant: (sum of lines 2-19)</b>	<b>\$442,485.00</b>	<b>\$442,485.00</b>	<b>\$158,722.08</b>	<b>\$152,585.61</b>
23	Amount of line 20 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 20 Related to Section 504 Compliance	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 20 Related to Security	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 20 Related to Energy Conservation Measures	\$0.00	\$0.00	\$0.00	\$0.00

**7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor**

<b>Annual Statement/Performance and Evaluation Report</b>								
<b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b>								
<b>Part II: Supporting Pages</b>								
<b>PHA Name: Frankin County Consolidated Housing Authority</b>			<b>Grant Type and Number</b> Capital Fund Program #: <b>CFP TN43P12550105</b> Capital Fund Program Replacement Housing Factor #:			<b>Federal FY of Grant: FY 2005</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operating fund	1406	1	\$60,000.00	\$337,428.45	\$60,000.00	\$60,000.00	In Process
PHA-Wide	Advertising	1410	1	\$1,000.00	\$639.00	\$639.00	\$639.00	Complete
PHA-Wide	Staff time spent on CFP program and advertisements	1410	1	\$12,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	A/E Services, MOD Coordinator, Agency Plan	1430	1	\$26,000.00	\$32,564.33	\$30,391.33	\$28,416.33	In Process
PHA-Wide	Landscaping, walks, parking, drainage, lighting, signage	1450	1	\$4,485.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Interior/exterior painting	1460	1	\$45,000.00	\$69,685.15	\$65,523.68	\$61,362.21	In Process
PHA-Wide	Bath renovations	1460	1	\$15,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Replace flooring	1460	1	\$15,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Kitchen renovations	1460	1	\$15,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Replace water heaters	1460	1	\$16,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Replace HVAC	1460	1	\$16,000.00	\$1,075.62	\$1,075.62	\$1,075.62	Complete
PHA-Wide	Storm doors	1460	1	\$14,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Replace roofs	1460	1	\$9,500.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Replace windows	1460	1	\$9,000.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Stoves, refrigerators, washers & dryers	1465	1	\$2,500.00	\$0.00	\$0.00	\$0.00	Deleted
PHA-Wide	Vehicle, mowers, tools	1475	1	\$5,000.00	\$0.00	\$0.00	\$0.00	Deleted
TN125-02	Development Activities	1499	1	\$77,000.00	\$0.00	\$0.00	\$0.00	Deleted
TN125-02	Dwelling unit construction (amortization)	1501	1	\$100,000.00	\$0.00	\$0.00	\$0.00	Deleted
	<b>From 5-Year Plan</b>							
	Computer Equipment	1475	LS		\$1,092.45	\$1,092.45	\$1,092.45	Complete
	<b>TOTAL</b>			<b>\$442,485.00</b>	<b>\$442,485.00</b>	<b>\$158,722.08</b>	<b>\$152,585.61</b>	



## 8. Capital Fund Program Five-Year Action Plan

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part I: Summary</b>					
PHA Name: <b>Franklin County Consolidated Housing Authority</b>					<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: 2009 PHA FY: 2009	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 2011	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 2012
	Annual Statement				
PHA Wide		\$255,000.00	\$255,000.00	\$255,000.00	\$255,000.00
TN125-001		\$0.00	\$0.00	\$0.00	\$0.00
TN125-002		\$75,000.00	\$75,000.00	\$75,000.00	\$75,000.00
TN125-003		\$0.00	\$0.00	\$0.00	\$0.00
TN125-004		\$0.00	\$0.00	\$0.00	\$0.00
TN125-005		\$0.00	\$0.00	\$0.00	\$0.00
CFP Funds Listed for 5-year planning		\$330,000.00	\$330,000.00	\$330,000.00	\$330,000.00
Replacement Housing Factor Funds		\$56,000.00	\$56,000.00	\$56,000.00	\$56,000.00

## 8. Capital Fund Program Five-Year Action Plan

<b>Capital Fund Program Five-Year Action Plan</b>						
<b>Part II: Supporting Pages—Work Activities</b>						
Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: <b>2009</b> PHA FY: <b>2009</b>			Activities for Year: <u>3</u> FFY Grant: <b>2010</b> PHA FY: <b>2010</b>		
	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
<b>See</b>	PHA-Wide	Operations	\$53,000.00	PHA-Wide	Operations	\$53,000.00
<b>Annual</b>	PHA-Wide	Advertisements	\$1,000.00	PHA-Wide	Advertisements	\$1,000.00
<b>Statement</b>	PHA-Wide	Staff time on MOD	\$12,000.00	PHA-Wide	Staff time on MOD	\$12,000.00
	PHA-Wide	MOD Coordinator, A/E	\$26,000.00	PHA-Wide	MOD Coordinator, A/E	\$26,000.00
	PHA-Wide	Drainage, landscaping, walks, parking, lights, and fencing	\$10,000.00	PHA-Wide	Drainage, landscaping, walks, parking, lights, and fencing	\$10,000.00
	PHA-Wide	Bath renovations	\$15,000.00	PHA-Wide	Bath renovations	\$15,000.00
	PHA-Wide	Interior/exterior painting	\$45,000.00	PHA-Wide	Interior/exterior painting	\$45,000.00
	PHA-Wide	Replace flooring	\$15,000.00	PHA-Wide	Replace flooring	\$15,000.00
	PHA-Wide	Kitchen renovations	\$15,000.00	PHA-Wide	Kitchen renovations	\$15,000.00
	PHA-Wide	Replace water heaters	\$8,000.00	PHA-Wide	Replace water heaters	\$8,000.00
	PHA-Wide	Replace HVAC	\$16,000.00	PHA-Wide	Replace HVAC	\$16,000.00
	PHA-Wide	Storm doors	\$14,000.00	PHA-Wide	Storm doors	\$14,000.00
	PHA-Wide	Replace roofs	\$9,500.00	PHA-Wide	Replace roofs	\$9,500.00
	PHA-Wide	Replace windows	\$9,000.00	PHA-Wide	Replace windows	\$9,000.00
	PHA-Wide	Stoves, refrigerators, washers and dryers	\$2,500.00	PHA-Wide	Stoves, refrigerators, washers and dryers	\$2,500.00
	PHA-Wide	Vehicle, mowers, tools	\$4,000.00	PHA-Wide	Vehicle, mowers, tools	\$4,000.00
	TN125-002	Development Activities	\$75,000.00	TN125-002	Development Activities	\$75,000.00
	Total CFP Estimated Cost		\$330,000.00			\$330,000.00

## 8. Capital Fund Program Five-Year Action Plan

<b>Capital Fund Program Five-Year Action Plan</b>					
<b>Part II: Supporting Pages—Work Activities</b>					
Activities for Year : <u>4</u> FFY Grant: <b>2011</b> PHA FY: <b>2011</b>			Activities for Year: <u>5</u> FFY Grant: <b>2012</b> PHA FY: <b>2012</b>		
<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>	<b>Development Name/Number</b>	<b>Major Work Categories</b>	<b>Estimated Cost</b>
PHA-Wide	Operations	\$53,000.00	PHA-Wide	Operations	\$53,000.00
PHA-Wide	Advertisements	\$1,000.00	PHA-Wide	Advertisements	\$1,000.00
PHA-Wide	Staff time on MOD	\$12,000.00	PHA-Wide	Staff time on MOD	\$12,000.00
PHA-Wide	MOD Coordinator, A/E	\$26,000.00	PHA-Wide	MOD Coordinator, A/E	\$26,000.00
PHA-Wide	Drainage, landscaping, walks, parking, lights, and fencing	\$10,000.00	PHA-Wide	Drainage, landscaping, walks, parking, lights, and fencing	\$10,000.00
PHA-Wide	Bath renovations	\$15,000.00	PHA-Wide	Bath renovations	\$15,000.00
PHA-Wide	Interior/exterior painting	\$45,000.00	PHA-Wide	Interior/exterior painting	\$45,000.00
PHA-Wide	Replace flooring	\$15,000.00	PHA-Wide	Replace flooring	\$15,000.00
PHA-Wide	Kitchen renovations	\$15,000.00	PHA-Wide	Kitchen renovations	\$15,000.00
PHA-Wide	Replace water heaters	\$8,000.00	PHA-Wide	Replace water heaters	\$8,000.00
PHA-Wide	Replace HVAC	\$16,000.00	PHA-Wide	Replace HVAC	\$16,000.00
PHA-Wide	Storm doors	\$14,000.00	PHA-Wide	Storm doors	\$14,000.00
PHA-Wide	Replace roofs	\$9,500.00	PHA-Wide	Replace roofs	\$9,500.00
PHA-Wide	Replace windows	\$9,000.00	PHA-Wide	Replace windows	\$9,000.00
PHA-Wide	Stoves, refrigerators, washers and dryers	\$2,500.00	PHA-Wide	Stoves, refrigerators, washers and dryers	\$2,500.00
PHA-Wide	Vehicle, mowers, tools	\$4,000.00	PHA-Wide	Vehicle, mowers, tools	\$4,000.00
TN125-002	Development Activities	\$75,000.00	TN125-002	Development Activities	\$75,000.00
Total CFP Estimated Cost		\$330,000.00			\$330,000.00