PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011

1.0 PHA Information

PHA Name: Kingsport Housing & Redevelopment Authority PHA Code: TN006

PHA Type: ☐ Small ☒ High Performing ☐ Standard ☐ HCV (Section 8)

PHA Fiscal Year Beginning: (MM/YYYY): 04/2010

2.0 Inventory (based on ACC units at time of FY beginning in 1.0 above)

Number of PH units: 491 Number of HCV units: 1,242

3.0 Submission Type

☒ 5-Year and Annual Plan ☐ Annual Plan Only ☐ 5-Year Plan Only

4.0 PHA Consortia ☐ 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
PHA 1:					
PHA 2:					
PHA 3:					

5.0 5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.

5.1 Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:

We affirm that shelter is a basic human necessity and we are dedicated to provide decent housing opportunities to those in need in the Greater Kingsport Area. We believe that blighted areas undermine the vibrancy of our community and therefore we are committed to acting as a catalyst for successful redevelopment efforts in the community.

5.2	**Goals and Objectives.** 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.

Expand the supply of assisted housing

- **Apply for additional rental vouchers:** There has been only one program where there was a notice of funding availability (NOFA); the Family Unification Program. We applied and were not awarded any new vouchers under this program. We have continued to apply for additional Shelter Plus Care and Supportive Housing Vouchers with Appalachian Regional Coalition for Homelessness (ARCH).
- **Reduce public housing vacancies:** Public housing vacancies have been reduced during the year. KHRA's public housing vacancies have been consistently below 3%. The economy is a primary reason for this as we have experienced fewer turnovers.
- **Leverage private or other public funds to create additional housing opportunities:** KHRA continues to work on the implementation of the HOPE VI program. This involves the construction of thirty-eight (38) new rental units through mixed finance and twenty-four (24) homeownership units which have all been sold. Youth Build has completed and sold four (4) homes and has two (2) additional homes under construction.
- **Acquire or build units or developments:** We continue to work with GKAD to build seven (7) additional homeownership units on Sherwood Road
- **Work with TAHRA in their efforts to create affordable assisted living facilities:** We are working with TARHA and other PHAs and legislators to find a solution.
- **Work with ARCH and other service providers to apply for Shelter Plus Care, HOPWA and Supportive Housing, HPRP:** KHRA is working through ARCH and the providers network to ensure housing for the chronically homeless and persons with AIDS.

Improve the Quality of assisted housing

- **Improve public housing management:** KHRA has implemented Asset Based Management and a new computer system.
- **Improve voucher management:** KHRA has averaged 1231 vouchers under lease monthly which utilizes 100% of HAP funds. We are also working to complete implementation of a new computer system including the hand held inspection software.
- **Increase customer satisfaction:** The increase in customer satisfaction is demonstrated by the greater demand for KHRA's services. Public housing occupancy is at or above 97% and Section 8 funds utilization is at 100%. The homeownership program has exceeded 24 sales this year.
- **Concentrate on efforts to improve specific management functions: Asset Based Management:** Asset Based Management staff has participated in computer based and web training on Asset Based Management.
- **Renovate or modernize public housing units: HOPE VI, CFP, Redevelopment:** Major Capital Fund Program projects included; windows replaced in Dogwood Terrace, roofs replaced in Holly Hills, Cloud and Lee Apartments as well as various improvements to management through computer upgrades.
- **Demolish or dispose of obsolete public housing:** HOPE VI: Riverview TN6 – 2/3 (92 units) with DOFA date of 1940 and 1952 were demolished.
- **Provide replacement public housing:** KHRA continues to implement the HOPE VI grant funded in October 2006. This includes fifty-four (54) rental units for seniors, thirty-eight (38) rental units for families and twenty-four (24) homeownership units.
- **Provide replacement vouchers:** Relocation vouchers were provided to all persons displaced by the demolition of TN 6-2/3 who requested one.
- **Participation in Continuum of Care (ARCH):** KHRA is a partner with ARCH. Through COC grants, under Shelter Plus care and Supportive Housing, KHRA is assisting 140 chronically homeless households and expect to increase that number in the future.

Increase assisted housing choices

- **Provide voucher mobility counseling:** KHRA regularly assists families in porting away from, or into, our service area.
- **Conduct outreach efforts to potential voucher landlords:** Landlord meetings are held in groups or with individuals. We currently have around 500 landlords participating.
- **Increase voucher payment standards:** Voucher payments are at the maximum allowed. This permits more housing choices for clients and also assists program participants in pursuing homeownership.
- **Implement voucher homeownership program:** KHRA has participated in use of HCV to assist clients in purchasing homes. We have over 36 successful homeowners since starting the homeownership program.
- **Implement public housing or other homeownership programs:** KHRA has implemented a public housing homeownership program. We have had many twenty-four (24) public housing residents achieve homeownership through Habitat for Humanity, KHRA or a conventional developer.
- **Project basing of tenant based vouchers:** KHRA has project based ninety-nine (99) units of special needs housing. KHRA's Board of Commissioners has authorized up to 124.
- **Family Unification Program:** KHRA applied for the Family Unification Program but was not selected.

Provide an improved living environment

- **Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:** KHRA has participated in the Family Self Sufficiency and Community Supportive Services (HOPE VI). Eighty-two participants have completed and graduated from KHRA's Family Self Sufficiency (FSS) program.
- **Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:** KHRA allows transfers for the purpose of pursuing employment. Developments that have higher incomes are located near employment opportunities.
- **Implement public housing security improvements:** In recent years, KHRA has installed security cameras in most public housing developments. We work with the Kingsport Police Department to implement community policing and monitor activities at our public housing developments. We participate with SCKCDI in implementing the Weed and Seed grants.

ROSS Elderly Grant

Promote self-sufficiency and asset development of assisted households

- **Increase the number and percentage of employed persons in assisted families:** Family Self Sufficiency (FSS) and Community Supportive Services (CSS) Programs are utilized in both Public Housing and Section 8. A primary objective of these programs is increasing employment opportunities. KHRA has had 82 persons successfully complete FSS and CSS.
- **Provide or attract supportive services to improve assistance recipients' employability:** KHRA works with Alliance for Business and Training (AB&T), Youth Build, Eastern 8, VISTA, SCKCDI and Title V to assist residents in obtaining higher levels of employment.
- **Provide or attract supportive services to increase independence for the elderly or families with disabilities:** KHRA sponsors Community Cares and VISTA to assist in providing services to elderly and disabled families. KHRA is also implementing a ROSS Elderly Grant. We also partner with the Area Council on Aging and the University of Tennessee Agricultural Extension Service.
- **Continuum of Care:** KHRA works closely with ARCH on Shelter Plus Care, Supportive Housing and HOPWA. KHRA is currently providing housing assistance to over 140 families. We work with a number of case management not for profits; Frontier health is the principal provider.

Ensure equal opportunity and affirmatively further fair housing

- **Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability:** KHRA sponsors training for staff on these issues. The training is conducted by Legal Aid of East Tennessee and Wilson, Worley, Moore, Gamble and Stout, counsels for KHRA.
- **Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status and disability:** KHRA sponsors training for staff on these issues. The training is conducted by Legal Aid of East Tennessee and Wilson, Worley, Moore, Gamble and Stout, counsels for KHRA.
- **Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:** The ACOP directs that priority be given to persons with disabilities. KHRA provides modifications for ramps, grab bars, hearing impairments and other accessibility items as requested.

VIOLENCE AGAINST WOMEN –

ACOP:

KHRA strives to meet the needs of adult and child victims of domestic violence, dating violence, sexual assault, and stalking. Any applicant who can provide verification of an existing abuse situation may qualify for a preference.

In accordance with the Violence Against Women Act (VAWA), KHRA will not evict a resident who is a certified victim of an actual or threatened incident of domestic abuse as defined by the Act. Also, KHRA will not evict a resident who is a certified victim for criminal activity that is directly related to domestic abuse. However, KHRA may evict the perpetrator. Also, KHRA may evict a resident who is a victim if there is an actual and immediate threat of harm to others or for other lease violations not based on domestic abuse.

KHRA will give a resident 14 business days after written request to certify victim status either by (1) completing and submitting to KHRA HUD certification form 50066 (which is available at the rental office); or (2) providing KHRA with documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional from whom the victim (you or another member of your immediate family) has sought assistance in addressing domestic violence, dating violence, or stalking or the effects of the abuse (this certification must be sworn under penalty of perjury); or (3) producing a Federal, State or local police or court record.

Section 8 Administrative Plan:

The PHA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under the PHA's policies. Therefore, if the PHA makes a determination to deny admission to an applicant family, the PHA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking, and

One of the following:

A police or court record documenting the actual or threatened abuse, or

A statement signed by an employee, agent or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal review (see section 16-III.D) or must request an extension in writing at that time. If the applicant so requests, the PHA will grant an extension of 10 business days, and will postpone scheduling the applicant's informal review until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the PHA determines the family is eligible for assistance, no informal review will be scheduled and the PHA will proceed with admission of the applicant family.

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, the PHA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the assisted housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation. This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

6.0 PHA Plan Update

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

2009-64 Payment Standard adjusted for FMR
2009-57 Revise Rent Reasonableness in Admin Plan
2009-34 Update Procurement Policy for ARRA
2009-24 Capitalization Policy updated
2009-18 Update Income Limits
2009-16 Transportation Policy updated

(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.

- Main Administrative Office, 906 E Sevier Ave, Kingsport, TN
- Web Site: www.kingsporthousing.org

1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

Program	Policy	Document	Location
Public Housing	Eligibility	ACOP	Section 3.2
	Selection and Admissions	ACOP	Sections 3.3 and 5.3
	Deconcentration	ACOP	Section 5.4
	Waiting list Procedures	ACOP	Section 4.0 -4.6
Housing Choice Voucher Program	Eligibility	Admin Plan	Chapter 3
	Selection and Admissions	Admin Plan	Chapter 4 Part 3
	Waiting list Procedures	Admin Plan	Chapter 4 Part 2

2. Financial Resources

Program	Program Area	Grant Number	Authorized
Capital Fund Program	CFP	TN37P006501-07	$842,713.00
	CFP	TN37P006501-08	$911,143.00
	CFP	TN37P006501-09	$879,720.00
Capital Fund Recovery Grants	CFRG	TN37S006501-09	$1,153,327.00
Housing Opp for Persons w/AIDS Comp	HPAC	TNH060021	$1,067,145.00
Resident Opport & Self Sufficiency	ROSS	TN006REF041A007	$250,000.00
	ROSS	TN006REF056A006	$249,041.00
	ROSS	TN006REL024A007	$249,804.00
	ROSS	TN006RFS165A008	$59,338.00
Special Needs Assistance	SNAP	TN0095B4J090800	$83,227.00
	SNAP	TN0101B4J090801	$42,733.00
	SNAP	TN0102B4J090801	$65,762.00
	SNAP	TN37B709001	$82,009.00
Selter + Care	SPC	TN0103C4J090801	$189,180.00
	SPC	TN37C409001	$511,440.00
	SPC	TN37C509001	$195,480.00
Urban Revitalization Program (Hope6)	URP	TN43URD0061106	$11,900,000.00
PH Operating Subsidy for CY 2009			$2,114,088.00

3. Rent Determination

Program	Policy	Document	Location
Public Housing	Rent determination	ACOP	Section 6
Housing Choice Voucher Program	Rent Determination	Admin Plan	Section 6 Part 3

4. Operation and Management

Program	Policy	Document	Location
Public Housing	Maintenance Manual	ACOP	Section 9
Housing Choice Voucher Program	Maintenance Manual	Admin Plan	Chapter 8 part 2 - Inspections

5. Grievance Procedure

Program	Policy	Document	Location
Public Housing	Grievance Procedure	ACOP	Section 16
		Lease	Section 12, page 12
Housing Choice Voucher Program	Grievance procedure	Admin Plan	Chapter 12 and Chapter 16 part 3

6. Designate Housing for Elderly and Disabled Families

Program	Policy	Document	Location
Public Housing	None for the coming year		
Housing Choice Voucher Program	None for the coming year		

7. Community Service

Program	Policy	Document	Location
Public Housing	Community Service	ACOP	Section 7
		Lease	Section 17, page 14

8. Safety and Crime Prevention

Public Housing: KHRA is involved in a number of outlets to increase the safety of our communities for the residents. Weed & Seed, Neighborhood Watch, Security Cameras, Community Policing, Kingsport Police Department MOA, Criminal Trespass Policy (ACOP Section 13),

9. Pets

Program	Policy	Document	Location
Public Housing	Pets	ACOP	Section 10
		Lease	Section 5L, page 7

10. Civil Rights

Program	Policy	Document	Location
Public Housing	Civil Rights	ACOP	Section 1
		Lease	Section 16
Housing Choice Voucher Program	Civil Rights	Admin Plan	Chapter 2

11. Fiscal Year Audit

The fiscal year audit for 3/31/09 is included

12. Asset Management

Asset Based Management has been implemented. We utilize the annual statement and five-year plan process for capital needs.

13. Violence Against Women Act (VAWA)

Program	Policy	Document	Location
Public Housing	VAWA	Lease	Section 11
		ACOP	Section 5.1
		ACOP Guide	Chapter 15.5
Housing Choice Voucher Program	VAWA	Admin Plan	Chapter 12 Part 2 (a)
		Admin Plan	Chapter 12 Part 3 (g)

7.0

Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. *Include statements related to these programs as applicable.*

Status of HOPE VI revitalization grant:

- Activities pursuant to an approved Revitalization Plan underway
- Do not plan to apply for a HOPE VI Revitalization Grant in the Plan Year
- Do plan to engage in mixed-finance development activities for public housing in the Plan Year (Riverview Apartments)
- Will be conducting other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement

In 2008

As part of the KHRA HOPE VI application, we successfully applied for Low Income Housing Tax Credits for 38 units. We were awarded $4.84 million of tax credits. We have negotiated the sale of the tax credits to investors.

In 2009

We are working to develop an additional seven units of Homeownership utilizing the Replacement Housing Factor fund.

Demolition/Disposition Activity Description
1a. Development name: Riverview Apartments 1b. Development (project) number: TN006-002 and TN006-003
2. Activity type: Demolition ☒ Disposition ☐
3. Application status (select one) Approved ☒ Submitted, pending approval ☐ Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 10/4/06
5. Number of units affected: 92 6. Coverage of action (select one) ☐ Part of the development ☒ Total development
7. Timeline for activity: a. Actual or projected start date of activity: 7/1/08 b. Projected end date of activity: 7/1/09

Demolition/Disposition Activity Description
1a. Development name: Riverview Apartments 1b. Development (project) number: TN006-002 and TN006-003
2. Activity type: Demolition ☐ Disposition ☒
3. Application status (select one) Approved ☐ Submitted, pending approval ☒ Planned application ☐
4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 10/4/06
5. Number of units affected: 92 6. Coverage of action (select one) ☐ Part of the development ☒ Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity: 12/12/08

Voluntary Conversion of Public Housing Developments

Required Initial Assessment (originally signed 1/14/03)

As required by 24 CFR parts 972 – Conversion of Public Housing to Tenant-Based Assistance, we have:

1. Reviewed each development's operation as public housing;
2. Considered the implications of converting the public housing to tenant-based assistance; and
3. Concluded that the conversion of the development may be:
    - Inappropriate because removal of the development would not meet the necessary conditions for voluntary conversion.

Necessary conditions for voluntary conversion:

- Not be more expensive than continuing to operate the development (or portion of it) as public housing;
- Principally benefit the residents of the public housing development to be converted and the community; and

	• Not adversely affect the availability of affordable housing in the community. **Development Number/Name — Development Exempted? — Exemption Reason — Conversion Appropriate?** TN006-01 Robert E Lee Apartments — No — N/A — No TN006-02 Riverview Apartments — No — N/A — No TN006-03 Riverview Apartments — No — N/A — No TN006-04 Frank L Cloud Apartments — No — N/A — No TN006-07 Dogwood Terrace Apartments — No — N/A — No TN006-09 Holly Hills Apartments — No — N/A — No TN006-11 Tiffany Court Apartments — No — N/A — No Kingsport Housing & Redevelopment Authority has assessed the viability of voluntary conversion of public housing developments to Section 8 Tenant-Based Assistance. We have determined that this voluntary conversion does not meet the necessary conditions and would be inappropriate. Conversion to Section 8 would be more expensive to operate than public housing. These calculations are part of the documentation required for our agency plan for the year starting April 1, 2003. Additionally, we feel the conversion of these units would not principally benefit the residents and community. Also, it would possibly negatively affect the availability of affordable housing in the community. **Section 8 Homeownership Capacity Statement** Kingsport Housing & Redevelopment Authority has developed capacity in the Section 8 Homeownership Program. We feel we have demonstrated the capacity to administer this program due to the following reasons. First, we currently administer 1,242 units of Section 8 Tenant-Based Assistance with over 25 years of experience. Second, we are administering 76 Family Self-Sufficiency Vouchers with 34 having contributions to their escrow accounts. Third, a review in 2001 of the Section 8 program participant's income level indicated 81 families that meet the initial income level for homeownership eligibility. We have surveyed these families and a number expressed interest in homeownership and are enrolled in Family Self Sufficiency. Fourth, Kingsport Housing & Redevelopment Authority has completed administering the financial part of the homeownership program sponsored by the Greater Kingsport Alliance for Development. This fund has financed down payment and closing costs that have led to the purchase of over forty homes. Fifth, Kingsport Housing & Redevelopment Authority continues to work in partnership with the local legal services office on this program. Kingsport Housing & Redevelopment Authority will make the program known to potential homeowners and Legal Services will provide counseling. Kingsport Housing & Redevelopment Authority has revised the Section 8 Administrative Plan concerning Homeownership. Lastly, Kingsport Housing & Redevelopment Authority is working with Eastern Eight Community Development Corporation on the implementation of our Homeownership Program. Currently, 48 FSS participants attended an Eastern Eight Homeownership Training Class. To date, KHRA has closed on 26 homes. Our goal for calendar year 2009 is to close an additional 12 homes. **Project Based Vouchers** In 2008, KHRA Board of Commissioners authorized the staff to project-base up to 10% of KHRA's 1,242 tenant-based vouchers. A Request for Proposals was issued and applications were submitted. Four developments requesting 74 units for elderly and disabled families and individuals were selected to be project-based. Additional proposals will be considered until a total of 124 units are project-based.
8.0	**Capital Improvements.** Please complete Parts 8.1 through 8.3, as applicable.
8.1	**Capital Fund Program Annual Statement/Performance and Evaluation Report.** As part of the PHA 5-Year and Annual Plan, annually complete and submit **t**he *Capital Fund Program Annual Statement/Performance and Evaluation Report,* form HUD-50075.1, for each current and open CFP grant and CFFP financing. • **HUD-50075.1 CFP 501-07 P&E 9/30/09** • **HUD-50075.1 CFP 501-08 P&E 9/30/09** • **HUD-50075.1 CFP 501-09 AMP 1 P&E 9/30/09** • **HUD-50075.1 CFP 501-09 AMP 2 P&E 9/30/09** • **HUD-50075.1 CFP 501-09 AMP 3 P&E 9/30/09** • **HUD-50075.1 CFP 501-09 Overall P&E 9/30/09** • **HUD-50075.1 TN37S00650109 P&E 9/30/09** • **HUD-50075.1 TN00600000409R P&E 9/30/09** • **HUD-50075.1 CFP 501-10 AMP 1 Original Annual Statement** • **HUD-50075.1 CFP 501-10 AMP 2 Original Annual Statement** • **HUD-50075.1 CFP 501-10 AMP 3 Original Annual Statement** • **HUD-50075.1 CFP 501-10 Overall Original Annual Statement**

8.2	**Capital Fund Program Five-Year Action Plan.** As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan*, 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. • **HUD-50075.2 AMP 1** • **HUD-50075.2 AMP 2** • **HUD-50075.2 AMP 3** • **HUD-50075.2 Overall**
8.3	**Capital Fund Financing Program (CFFP).** ☐ 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.
9.0	**Housing Needs**. 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.

Housing Needs of Families on the PHA's Waiting Lists

Waiting list type: (select one)

☒ Section 8 tenant-based assistance

☐ Public Housing

☐ Combined Section 8 and Public Housing

☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	2297		348
Extremely low income <=30% AMI	1848	80.45	
Very low income (>30% but <=50% AMI)	256	11.14	
Low income (>50% but <80% AMI)	3	0.13	
Families with children	1547	67.35	
Elderly families	106	4.61	
Families with Disabilities	304	13.23	
Race/ethnicity White	2037	88.68	
Race/ethnicity Black	237	10.32	
Race/ethnicity Asian	1	0.04	
Race/ethnicity Other	22	0.96	
Characteristics by Bedroom Size (Public Housing Only)			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Is the waiting list closed (select one)? ☒ No ☐ Yes

If yes:

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)?

Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☐ Yes

Housing Needs of Families on the PHA's Waiting Lists

Waiting list type: (select one)

☐ Section 8 tenant-based assistance
☒ Public Housing
☐ Combined Section 8 and Public Housing
☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional)
If used, identify which development/subjurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	348		300
Extremely low income <=30% AMI	308	88.51	
Very low income (>30% but <=50% AMI)	22	6.32	
Low income (>50% but <80% AMI)	0	0	
Families with children	145	41.67	
Elderly families	8	2.3	
Families with Disabilities	55	15.8	
Race/ethnicity White	296	85.05	
Race/ethnicity Black	49	14.08	
Race/ethnicity Other	0	0	
Race/ethnicity	3	0.86	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	200	57.47	25
2 BR	110	31.61	100
3 BR	35	10.06	100
4 BR	3	0.86	75
5 BR	0	0	0
5+ BR	0	0	0

Is the waiting list closed (select one)? ☒ No ☐ Yes

If yes:

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)?

Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☐ Yes

9.1	**Strategy for Addressing Housing Needs**. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.** Maximize the number of affordable units available within current resources by: • Employ effective maintenance and management policies to minimize the number of public housing units off-line • Reduce turnover time for vacated public housing units • Reduce time to renovate public housing units • Seek replacement of public housing units lost to the inventory through mixed finance development • Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources • Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction • Undertake measures to ensure access to affordable housing among assisted families, regardless of unit size required • Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration • Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program • Participate in the Consolidated Plan development process to ensure coordination with broader community strategies Increase the number of affordable housing units by: • Apply for additional section 8 units should they become available (Family Unification Program) • Leverage affordable housing resources in the community through the creation of mixed - finance housing • Pursue housing resources other than public housing or Section 8 tenant-based assistance. • Continuum of Care; Eastern 8 Community Development Corporation Target available assistance to families at or below 30% of AMI: • Employ admissions preferences aimed at families with economic hardships • Adopt rent policies to support and encourage work • CSS in HOPE VI Target available assistance to families at or below 50% of AMI: • Employ admissions preferences aimed at families who are working • Adopt rent policies to support and encourage work • CSS in HOPE VI Target available assistance to the elderly: • Apply for special-purpose vouchers targeted to the elderly, should they become available Target available assistance to Families with Disabilities: • Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing • Apply for special-purpose vouchers targeted to families with disabilities, should they become available • Affirmatively market to local non-profit agencies that assist non-profit agencies that assist families with disabilities Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs: • Affirmatively market to races/ethnicities shown to have disproportionate housing needs Conduct activities to affirmatively further fair housing: • Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units • Market the section 8 program to owners outside of areas of poverty/minority concentrations Reasons for selecting strategies: • Funding constraints • Staffing constraints • Limited availability of sites for assisted housing • Extent to which particular housing needs are met by other organizations in the community • Evidence of housing needs as demonstrated in the Consolidated Plan and other information available • Results of consultation with local or state government • Results of consultation with residents and the Resident Advisory Boards • Results of consultation with advocacy groups

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

(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.

The Kingsport Housing & Redevelopment Authority continues to make progress in meeting our goals embodied in our Annual Plan and Five Year Plan. We have converted Public Housing units to asset based management. We are continuing community revitalization for the Riverview Apartments and the surrounding area. This is exhibited by the successful funding of HOPE VI, redevelopment of dilapidated commercial areas, rehabilitation and addition an to the V. O. Dobbins recreation center, and demolition of 92 units of public housing and the construction of 38 replacement units.

We have had continued success in utilizing 100% of our HAP funds in the tenant based voucher program with a baseline of 1,242 units. We have averaged 1,231 under lease each month in Calendar Year 2009. We continued to receive funding for a Family Self Sufficiency Coordinator and FSS Homeownership Coordinator. We have 88 FSS participants and had 21 homeownership closings. There were 2 PH FSS graduates with escrows of $8,371 and 6 HCV FSS graduates with escrows of $24,825. We have 11 HCV participants and 2 PH participants credit-ready and 2 HCV participants ready to close. The unavailability of down payment and closing cost funding has slowed progress in homeownership. Also, KHRA was required to discontinue the Success Rate Payment Standards, which has reduced the amount of dollars available to assist with the mortgage costs.

KHRA is a participant in Continuum of Care programs and is a member of the Appalachian Regional Coalition (ARCH) on homelessness. KHRA's Shelter Plus Care program continues to operate three increments. Over 120 individuals will be assisted when all increments are fully implemented. We have received funding for 6 increments of Supportive Housing for an estimated 60 participants. In addition, KHRA operates a HOPWA program that will house approximately 50 families. KHRA has worked with Frontier Health to coordinate supportive service and Section 8 assistance for persons under case management for mental health disability.
Project based Section 8 funding for special needs housing (from our tenant based program) was approved for developments covering 99 units in 4 counties. The total number of units authorized for project basing by the KHRA Board of Commissioners is 124. WE will continue to evaluate proposals from Not for Profit organizations who develop special needs housing for low income disabled and elderly persons.

The partnership with Eastern Eight Community Development Corp continues providing homeownership training, counseling and mortgage financing assistance. Eastern Eight is providing housing counseling and financing coordination for all the homeowners in the HOPE VI homeownership program. We also continue to work with USDA Agriculture division in Greeneville, utilizing their financing for 12 homes in our homeownership program.

The Division of Mental Retardation Services has continued the inspection contract/services provided by KHRA. The program has expanded to cover 17 counties consisting of over 300 homes.

KHRA has continued to work with the Carpenter's Helper of First Broad Street United Methodist Church, Appalachian Service Project and the City of Kingsport Community Development Department on the implementation of Community Development funds for a housing rehabilitation program. The program rehabbed 78 owner occupied homes for low income persons. Also, four dilapidated properties were purchased and demolished.

The Weed & Seed grant received by South Central Community Development Corp, Inc continues to be implemented. KHRA staff is a partner in this grant. The Weed & Seed grant was renewed in the amount of $142,500. The grant funds police patrols, after school youth programs, summer youth and safe haven programs in the target area that includes Lee Apartments and Riverview Apartments.

We have continued our support for the VISTA program with four VISTA members who work with Resident Associations and Learning Centers to enhance resident utilization of programs participated in by KHRA. The VISTA members work wit the Resident Association, Learning Centers and of programs participated in by KHRA. The Community Cares program has with two service providers who work with disabled and . The Boys & Girls Club satellite centers continue to provide services in Riverview, Cloud (AMP TN006-2) and Holly Hills (AMP TN006-3). Lee Family Learning Center (LFLC) (AMP TN006-1) continues to be funded by CDBG.

During 2009, we continued the implementation of 4 ROSS grants. One for development of elderly services for $250,000 over three years and 2 for Public Housing Homeownership activity, also for three years each for $250,000. The fourth ROSS grant is for Public Housing FSS and is for one year.

We published a detailed annual report utilizing a grant from the Federation of Appalachian Housing Enterprises (FAHE). We look forward to fulfilling our mission and serving the needs of our clients and community.

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
Kingsport Housing & Redevelopment Authority will consider the following to be significant amendments or modifications:

- Additions of non-emergency work items (items not included in the current Annual Statement or 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund;
- And any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by the Kingsport Housing & Redevelopment Authority or by HUD.

11.0	**Required Submission for HUD Field Office Review**. 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. **Note:** Faxed copies of these documents will not be accepted by the Field Office. (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) (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. 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. (g) Challenged Elements (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

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 off ice 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
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.

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

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 X *5-Year and/or* ___ *Annual PHA Plan for the PHA fiscal year beginning* 4/1/2010 *, 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.

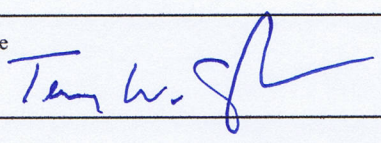
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental 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.

Kingsport Housing and Redevelopment Authority	TN006
PHA Name	PHA Number/HA Code

x 5-Year PHA Plan for Fiscal Years 20 10 - 20 13

_____ Annual PHA Plan for Fiscal Years 20____ - 20____

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	Title
Terry W Cunningham	Executive Director
Signature 	Date 1/12/10.

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Kingsport Housing and Redevelopment Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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.)

AMP 1: TN6-001 Robert E Lee Apts, 671 Dale St, Kingsport TN 37660
AMP 1: TN6-011 Tiffany Court Apts, 3125 Tiffany Ct, Kingsport TN 37663
AMP 2: TN6-004 Frank L Cloud Apts, 1100 Robertson St, Kingsport TN 37660
AMP 3: TN6-007 Dogwood Terrace Apts, 1921 Bowater Dr, Kingsport TN 37660
AMP 3: TN6-009 Holly Hills Apts, 3601 Watterson St, Kingsport Tn 37660

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	Title
Terry W Cunningham	Executive Director
Signature	**Date**
X Terry W. Cunningham	1/12/10

form **HUD-50070** (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

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.)

1. Type of Federal Action:
[b] a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

2. Status of Federal Action:
[a] a. bid/offer/application
b. initial award
c. post-award

3. Report Type:
[a] a. initial filing
b. material change
For Material Change Only:
year _____ quarter _____
date of last report _____

4. Name and Address of Reporting Entity:
[x] **Prime** [ ] **Subawardee**
Tier _____, *if known*:

Congressional District, *if known*: 4c

5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:

Congressional District, *if known*:

6. Federal Department/Agency:
U.S. Dept of Housing and Urban Development

7. Federal Program Name/Description:
Capital Fund Program
CFDA Number, *if applicable*: _____

8. Federal Action Number, *if known*:

9. Award Amount, *if known*:
$

10. a. Name and Address of Lobbying Registrant
(*if individual, last name, first name, MI*):

b. Individuals Performing Services (*including address if different from No. 10a*)
(*last name, first name, MI*):

11. 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: Terry W. Cunningham
Print Name: Terry W Cunningham
Title: Executive Director
Telephone No.: 423-392-2513 Date: 1/12/10

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

OMB Approval No. 2577-0157 (Exp. 3/31/2010)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Kingsport Housing and Redevelopment Authority

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	Title
Terry W Cunningham	Executive Director
Signature	Date (mm/dd/yyyy)
Terry W. [illegible]	1/10/2010

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification

Annual Certification and Board Resolution

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 Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency 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, and will affirmatively further fair housing.

Kingsport Housing and Redevelopment Authority	TN006
PHA Name	PHA Number/HA Code

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: Terry W. Cunningham	Title: Executive Director
Signature: Terry W. Cunningham	Date: 01/12/2010

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I, Dennis Phillips the Mayor, City of Kingsport certify that the Five Year and Annual PHA Plan of the Kingsport Housing and Redevelopment Authority is consistent with the Consolidated Plan of Click to Enter Juristiction Name prepared pursuant to 24 CFR Part 91.

Signed / Dated by Appropriate State or Local Official

Resident Advisory Board Recommendations

Public Housing RAB

This year the Residency Advisory Board (RAB met on October 15th. We went over the proposed Agency plan and have the following suggestions, comments and observations on that plan. Unfortunately, many of them are the same as in past years.

1. **Use of the Community Rooms:** There continues to be problems regarding the use of the community rooms. The Public Housing Resident Council is in charge of these rooms, yet access is granted to KHRA management. The problem is that clean-up and missing items become the problem of the Resident Association. This has been brought up numerous times in the past but seems to be forgotten quickly. For continued cooperation of the Resident Councils and the site managers, there needs to be better cooperation in the sharing of these community rooms.

We will review the Community Room Use Policy and the MOU we have with each of the Resident Associations with the KHRA staff. KHRA is available to discuss any problems as they occur.

2. **Site Based Management.** While site based management varies from site to site, there seems to be a trend of less visibility and fewer open office hours at all of the residents sites. This makes it difficult to pay your rent when the office is closed and is not open for long periods of time. Additionally, there remain problems with the lack of enforcement of various rules and regulations by the various site managers. These include unregistered guests (a continuing problem), and failure to enforce pet and parking policies uniformly. The site managers need more visibility so the can observe the goings on.

KHRA is working with our staff to increase the site based presence in each AMP. We have experienced some health issues that have limited coverage. As each incident of unauthorized person is reported we investigate. Where we can document an unauthorized person living in a unit we enforce the lease. However, this is a very difficult thing to prove. Also, where we observe and have unauthorized pets reported we enforce the lease. However, we are not able to be present 24 hours a day and it is difficult to enforce what we are not able to see. We depend on assistance from residents to help us monitor these situations. Parking enforcement is an objective process and we will work more diligently in the future. In all these things timely reporting of these concerns to the site offices and central office is appreciated.

3. **Safety.** The residents have all noticed the diminution of the presence of the Kingsport Police in their neighborhoods since last year. This is disappointing. The continued

presence of the police ensures more compliance with the law and makes our neighborhoods safer. We hope KHRA can work together with the Police Department to raise the police profile in our neighborhoods this year.

We will pass your concerns onto the Kingsport Police Department and City Manager. I am, however, concerned about the change in Kingsport police procedures that will reduce community policing from seven police officers to one. We have encouraged the City to review MOU and grant agreements.

4. **Moving to Work.** The residents were interested in what this program might mean and after much deliberation and information gathering they have determined that they fell it is inappropriate for Kingsport Housing Authority to adopt this plan or program. A survey of other housing authorities across the nation that have adopted this policy, shows a record of poor performance, and degrading conditions. It seems that only housing authorities that are in deep financial problems would adopt this policy because of the free financial hand that HUD gives the housing authority that adopts this policy. The rules of moving to work are very vague and free form. Various housing authorities have adopted various policies under this program. It seems that the overall policy is bad, but RAB reserves the right to comment on any specific proposals that might come from an adoption on this program. It is difficult for the RAB to make any comments regarding this adoption Moving to Work when no specifics have been put forth.

Based on feedback from residents and the lack financial resources to implement the program, KHRA staff's recommendation is to not seek Moving to Work status.

5. **No Smoking Policy.** The tenants and RAB (many of whom are non-smokers) feel that the no smoking policy is not in the best interest of the housing authority. There was a strong consensus among the RAB members that the person's home is their castle and telling them what they can and can't do is inappropriate in America. Further, the RAB members have surveyed their various neighborhoods and found no one that had any complaints about neighbors who smoked. While the RAB understands the dangers and safety hazards of smoking, they feel that these are small in comparison to the loss of freedom when a public housing provider dictates the personal behavior of its tenants.

We have noted your concerns and objections. We do not recommend this change in policy.

6. **Maintenance.** Maintenance has continued to improve. However, there does seem to some pick-up problems. The past problems with pets has abated somewhat, but the public housing authority needs to make sure that the feral cares are dealt with appropriately.

We will continue to work on the feral cat problem. Animal Control of Kingsport Police department has been helpful.

7. **Capital Improvements.** The schedule for capital improvements submitted by the Housing Authority has been discussed numerous times over the year. We appreciate the fact that the Housing Authority keeps us apprised of the progress on this. We are aware that additional capital improvements funds that are granted under the federal program this year will move the expected time frame forward and we appreciate that. We also understand that the Holston Terrace neighborhood, often left out of capital improvements budget, because it is Section 202, may have an opportunity for capital improvements this year due to the Kingsport Housing Authority and Redevelopment Authority's efforts to secure funding through a grant, We wish them luck in obtaining this.

Holston Terrace is a Section 8/202 funded development and is not funded under Capital Fund. However, we are working to find alternate funds for the suggested improvements.

8. **Resident on KHRA Board**. The RAB once again urges the Housing Authority to adopt a policy whereby the KHRA Resident Board member is elected by the residents. This representation is in line with the principles that America stands for. While the representatives appointed in the past have been adequate, the procedure seems inappropriate given the authority of the position.

KHRA has met the requirements for a Resident/Program participant to be a member of the KHRA Commissioners. This person is appointed to this position by the Kingsport Mayor in the same manner as the other four Commissioners per the requirements of Tennessee State Law.

We thank the Housing Authority Board for seriously considering our input and look forward to working with you this year.

Sincerely,

SANDRA BLY

ARLENA LOVIN

FAYE REID

WILLIE OVERBAY

DEBBIE CASH

MARY BEATTY

Housing Choice Voucher Program RAB:

The Section 8 Voucher Advisory Board met on Monday, October 26. After a presentation on possible policy changes and implementation for the coming year from Mr. Cunningham, the RAB then met and discussed various issues. We have the following comments to make regarding that discussion:

First of all, the Resident Advisory Board (RAB) would like to thank the Board of Commissioners of the Kingsport Housing and Redevelopment Authority for its continued cooperation in working to make the Housing Authority Section 8 Voucher Program better by seeking their input. We appreciate your taking to heart our comments in the past, and look forward to working with you in the future.

1. **Homeownership:** We congratulate the KHRA and its record of having placed 27 families into their homes in the last 18 months through their homeownership program. We are informed that, to date, there are zero defaults and we think it is a great credit to the Housing Authority, Kingsport, and to the tenants who are becoming homeowners, that this program has succeeded so. Thank you.

We appreciate your comments.

2. **Payment Standard.** One keystone to the homeownership program that we so praised, is the fact that the payment standard has been set at 110%. This allows more residents to qualify financially for homeownership. There have been some comments from HUD that they would like to see the payment standard lowered to 100% to further spread the available funding for vouchers to as many people as possible. However, this lowering of the payments standard would also greatly decrease the number of homeownership opportunities. We urge the KHRA Board to continue with the 110% payments standard to encourage homeownership and increase ownership in the City of Kingsport.

We are concerned by the not so subtle pressure that is being placed on PHA's to lower payment standards. The range of Payment Standards that KHRA has adopted strives to provide a larger selection of rental units that best meets the needs of families. Also, a higher Payments Standard allows more opportunity for homeownership.

3. **Smoking Policy.** It was explained to us that HUD has urged Housing Authorities to adopt a non-smoking policy in their public housing units. We feel that in the Section 8 Voucher situation, the matter is between the landlord and tenant. If the landlord and tenant want a non-smoking unit, then they can agree and there is a meeting of the minds. If the landlord and the tenant want a smoking unit, then they too can agree. We do not see where the interest of the government in smoking in an individual's house has any bearing on the landlord/tenant relationship.

We have noted your concerns and objections.

4. **Moving to Work.** After much discussion and explanation, we have decided Moving to Work is a bad idea and that Family Self Sufficiency program is enough. It is voluntary and allows those who are able and willing to accumulate assets for the future. We feel that there are many who are unable to do so. To force everyone into it would not only be a disservice to them but fail the mission of the Housing and Redevelopment Authority in providing decent, safe and sanitary housing for the citizens of Kingsport. We urge you not to adopt the Moving to Work policy.

Based on feedback from residents and the lack financial resources to implement the program, KHRA staff's recommendation is to not seek Moving to Work status.

5. **Crime.** In the past, we have urged you to work with South Central Kingsport Community Development, Inc (SCKCDI) in expanding the Weed-and-Seed Program to the Borden Mill area. That effort has borne seed and is now in the beginning stages. It is our understanding that the Highland and Cloud communities have also expressed an interest in this. We urge you to expand all anti-crime efforts to any neighborhoods that wish to participate. We, as Kingsport citizens, all have a stake in this, and we appreciate the efforts of the Police department, the KHRA Board and the residents in keeping our city safe.

We want to continue to support anti-crime efforts in our community. We will continue to work with SCKCDI and the City of Kingsport and Kingsport Police Department to sustain and expand Weed and Seed.

6. **Elderly Programs.** Once again, we would like to urge the KHRA to work cooperatively with everyone and anyone to bring home health care services to our community and state. Aging In Place is a concept that is slow to come to Tennessee. We feel that if an individual can stay at home without needing the services of a nursing home, it should be done. We also believe that services brought to the home, that would be very costly in a nursing home setting, would also reduce the costs of overall healthcare. Again, we urge the KHRA to work to allow seniors to stay in their home longer, coordinated through in-home healthcare services.

We believe your request is a good one and KHRA will continue to work on this issue. There is diverse opinion throughout the State of Tennessee on this issue and to do what you request may require changes in State laws.

Those conclude our comments. We hope that you will take them to heart and we thank you for your continued attention and support.

Sincerely,

Mary Stallard

Karen Hickman

Maxine Darnell

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Kingsport Housing & Redevelopment Authority

PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37P006501-07	**2007**

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number C

☒ Performance and Evaluation Report for Program Year Ending 9/30/09 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-	-	-	-
2	1406 Operations	173,600	173,600	173,600	173,600
3	1408 Management Improvements	164,045	164,045	164,045	155,530
4	1410 Administration	$56,773	$56,773	$56,773	$56,456
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	$57,572	$57,572	$57,572	$40,371
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	49,618	49,618	49,618	28,506
10	1460 Dwelling Structures	246,940	246,940	246,940	163,255
11	1465.1 Dwelling Equipment - Nonexpendable	23,366	23,366	23,366	18,315
12	1470 Nondwelling Structures	40,000	40,000	40,000	30,479
13	1475 Nondwelling Equipment	30,799	30,799	30,799	30,799
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	**$842,713**	**$842,713**	**$842,713**	**$697,311**
21	Amount of line 20 Related to LBP Activities	-	-		
22	Amount of line 20 Related to Section 504 Compliance	-	-		
23	Amount of line 20 Related to Security	-	-		
24	Amount of line 20 Related to Energy Conservation Measures	-	-		

Signature of Executive Director and Date

X *Terry W. Cunningham* **1/12/2010**

Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name Disasters/Emergencie Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA-Wide	Operations	1406		173,600	173,600	173,600	173,600	C
Management								
Improvements	Vista Workers	1408		61,500	61,500	61,500	61,500	C
	Vista Office Supplies	1408		5,386	5,386	5,386	5,386	C
	Resident Training	1408		2,618	2,618	2,618	2,618	C
	Resident Initiatives Manager	1408		42,000	42,000	42,000	42,000	C
	Resident Initiatives Supplies	1408		1,037	1,037	1,037	1,037	C
	Mgt/Maint Training	1408		8,000	8,000	8,000	8,000	C
	CFP/Clerical Assistant	1408		12,000	12,000	12,000	12,000	C
	UPCS Inspection/Services	1408		9,013	9,013	9,013	9,013	C
	Telecomm/Computer Upgrades/Security Cameras	1408		5,291	5,291	5,291	5,149	C
	Resident Business Development	1408		1,000	1,000	1,000	0	
	HVAC Technical/Services	1408		0	0	0	0	C
	Salary/Wage Study	1408		16,200	16,200	16,200	8,827	
				164,045	**164,045**	**164,045**	**155,530**	
PHA-Wide	Mod Manager/Employee Benefits	1410		54,042	54,042	54,042	54,042	C
Administration	Sundry	1410		33	33	33	33	C
	Telephone	1410		816	816	816	499	C
	Local Travel	1410		1,882	1,882	1,882	1,882	C
				$56,773	**$56,773**	**$56,773**	**$56,456**	
PHA-Wide	A and E Fees PHA Wide	1430		28,000	28,000	28,000	15,799	
Fees & Costs	Inspector / Employee Benefits	1430		24,572	24,572	24,572	24,572	C
	Energy Services Contract	1430		5,000	5,000	5,000	0	
				$57,572	**$57,572**	**$57,572**	**$40,371**	
PHA Wide	Maint/Mgt Vehicle	1475		30,799	30,799	30,799	30,799	C
Non-Dwelling								
Equipment								
				$30,799	**$30,799**	**$30,799**	**$30,799**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name Disasters/Emergencie Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA Wide	Neighborhood Appearance	1450		15,000	15,000	15,000	3,465	
	Landscaping	1450		15,000	15,000	15,000	5,423	
	Sidewalks/Parking Lots/Alleys/Streets	1450		0	0	0	0	C
	Fence Repairs	1450		14,050	14,050	14,050	14,050	C
	Pest Control	1450		2,600	2,600	2,600	2,600	C
	Playground Improvements	1450		2,620	2,620	2,620	2,620	
	Security Cameras	1450		348	348	348	348	C
				49,618	**49,618**	**49,618**	**28,506**	
PHA Wide Dwelling Equipment	Refrigerators	1465.1		12,000	12,000	12,000	6,950	
	Dumpster Repair	1465.1		0	0	0	0	C
	ADA Modifications	1465.1		291	291	291	290	C
	Emergency Mold Abatement	1465.1		1,760	1,760	1,760	1,760	C
	HVAC Equipment	1465.1		9,315	9,315	9,315	9,315	C
				23,366	**23,366**	**23,366**	**18,315**	
TN 37P006001 Lee	Interior Doors	1460		0.00	0.00	0.00	0.00	D
				0.00	**0.00**	**0.00**	**0.00**	
TN 37P006004 Cloud	Replace Water Valves	1460		45,000	45,000	45,000	30,022	
	Repair Gym Ceiling	1470		40,000	40,000	40,000	30,479	
				85,000	**85,000**	**85,000**	**60,501**	
TN 37P006007 Dogwood	Replace Windows	1460		154,068	154,068	154,068	85,361	C
	Security Screens	1460		0	0	0	0	C
				154,068	**154,068**	**154,068**	**85,361**	
TN 37P006009 Holly Hills	Kitchen Cabinets/Countertops	1460		42,730	42,730	42,730	42,730	C
				42,730	**42,730**	**42,730**	**42,730**	
TN 37P006011 Tiffany Court	Replace Awnings	1460		5,142	5,142	5,142	5,142	
				5,142	**5,142**	**5,142**	**5,142**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number/Name - Disasters/Emergencies Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available
			8/28/2008				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Kingsport Housing & Redevelopment Authority

PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37P006501-08	**2008**

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☒ Revised Annual Statement/Revision Number **B**

☒ Performance and Evaluation Report for Program Year Ending 9/30/09 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-	-		
2	1406 Operations	182,229	182,229	182,229	182,229
3	1408 Management Improvements	230,500	230,500	230,500	191,373
4	1410 Administration	91,114	91,114	91,114	91,114
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	53,000	53,000	53,000	23,134
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	62,246	62,246	62,246	28,938
10	1460 Dwelling Structures	225,400	225,400	225,400	123,508
11	1465.1 Dwelling Equipment - Nonexpendable	22,196	22,196	22,196	28,945
12	1470 Nondwelling Structures	4,458	4,458	4,458	4,458
13	1475 Nondwelling Equipment	40,000	40,000	40,000	36,752
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	***$911,143***	***$911,143***	***$911,143***	***$710,451***
21	Amount of line 20 Related to LBP Activities	-	-		
22	Amount of line 20 Related to Section 504 Compliance	-	-		
23	Amount of line 20 Related to Security	-	-		
24	Amount of line 20 Related to Energy Conservation Measures	-	-		

Signature of Executive Director and Date

X Terry W. Cunningham **1/12/2010**

Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA-Wide	Operations	1406		**182,229**	**182,229**	**182,229**	**182,229**	
Management Improvements	Vista Workers	1408		40,000	40,000	40,000	41,664	
	Vista Office Supplies	1408		4,000	4,000	4,000	8,600	
	Resident Training	1408		5,000	5,000	5,000	2,526	
	Resident Initiatives Manager	1408		42,000	42,000	42,000	33,924	
	Resident Initiatives Supplies	1408		2,000	2,000	2,000	1,535	
	Mgt/Maint Training	1408		5,000	5,000	5,000	3,673	
	CFP/Clerical Assistant	1408		12,000	12,000	12,000	3,844	
	UPCS Inspection/Services	1408		1,000	1,000	1,000	450	
	Telecomm/Computer Upgrades/Security Cameras	1408		100,000	100,000	100,000	77,657	
	Resident Business Development	1408		1,000	1,000	1,000	0	
	HVAC Technical/Services	1408		1,000	1,000	1,000	0	
	Energy Audit	1408		17,500	17,500	17,500	17,500	C
				230,500	**230,500**	**230,500**	**191,373**	
PHA-Wide **Administration**	Administration	1410		91,114	91,114	91,114	91,114	
				$91,114	**$91,114**	**$91,114**	**$91,114**	
PHA-Wide	A and E Fees PHA Wide	1430		28,000	28,000	28,000	21,100	
Fees & Costs	Inspector / Employee Benefits	1430		25,000	25,000	25,000	2,034	
				$53,000	**$53,000**	**$53,000**	**$23,134**	
PHA Wide **Non-Dwelling Equipment**	Maint/Mgt Vehicle	1475	2	40,000	40,000	40,000	36,752	
				$40,000	**$40,000**	**$40,000**	**$36,752**	

0.00

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]	
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]		
PHA Wide	Neighborhood Appearance	1450		20,000	20,000	20,000	12,617		
	Landscaping	1450		20,000	20,000	20,000	2,361		
	Sidewalks/Parking Lots/Alleys/Streets	1450		19,246	19,246	19,246	12,894		
	Fence Repairs	1450		1,000	1,000	1,000	406		
	Pest Control	1450		1,000	1,000	1,000	0		
	Playground Improvements	1450		1,000	1,000	1,000	660		
				62,246	**62,246**	**62,246**	**28,938**		
PHA Wide Dwelling Equipment	Refrigerators	1465.1		10,000	10,000	10,000	17,700		
	Dumpster Repair	1465.1		8,328	8,328	8,328	9,377	C	
	ADA Modifications	1465.1		1,868	1,868	1,868	1,868		
	Emergency Mold Abatement	1465.1		1,000	1,000	1,000	0		
	HVAC Equipment	1465.1		1,000	1,000	1,000	0		
				22,196	**22,196**	**22,196**	**28,945**		
TN 37P006001 Lee	Replace Front Storm Doors	1460		0	0	0	0	D	
TN 37P006004 Cloud	Replace Front Storm Doors	1460		0	0	0	0	D	
TN 37P006007 Dogwood	Install House Meters	1460		15,000	15,000	15,000	0		
	Install Building Lights	1460		15,000	15,000	15,000	0		
				30,000	**30,000**	**30,000**	**0**		
TN 37P00609 Holly Hills	Replace Roofing & Guttering	1460		**190,400**	**190,400**	**190,400**	**123,508**		
TN 37P00611 Tiffany Court	Replace Guttering	1460		**5,000**	**5,000**	**5,000**	**0**		
TN 37P00601	6-1 Community Building Office Expansion	1470		1,000	1,000	1,000	1,000		
TN 37P00607	6-7 Community Building Office Expansion	1470		1,000	1,000	1,000	1,000		
TN 37P00609	6-9 Community Building Office Expansion	1470		2,458	2,458	2,458	2,458	C	
				4,458	**4,458**	**4,458**	**4,458**		

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

0.00

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number/Name HA-Wide Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

0.00

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Kingsport Housing & Redevelopment Authority

PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37P006501-08	**2009**

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number

☒ Performance and Evaluation Report for Program Year Ending 9/30/09 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-			
2	1406 Operations	-			
3	1408 Management Improvements	44,900	44,900	44,900	3,202
4	1410 Administration	-	-	-	-
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	10,500	10,500	10,500	-
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	20,000	20,000	20,000	-
10	1460 Dwelling Structures	20,000	20,000	20,000	20,000
11	1465.1 Dwelling Equipment - Nonexpendable	6,000	6,000	6,000	-
12	1470 Nondwelling Structures	1,000	1,000	1,000	-
13	1475 Nondwelling Equipment	-	-	-	-
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	***$102,400***	***$102,400***	***$102,400***	***$23,202***
21	Amount of line 20 Related to LBP Activities	-			
22	Amount of line 20 Related to Section 504 Compliance	-			
23	Amount of line 20 Related to Security	-			
24	Amount of line 20 Related to Energy Conservation Measures	-			

Signature of Executive Director and Date

X Terry W. Cunningham **1/12/2010**

Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP1

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost TN37P006501-08		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA-Wide								
Management								
Improvements	Vista Workers	1408		13,300	13,300	13,300	3,000	
	Vista Office Supplies	1408		1,300	1,300	1,300	202	
	Resident Training	1408		1,600	1,600	1,600	0	
	Resident Initiatives Manager	1408		14,000	14,000	14,000	0	
	Resident Initiatives Supplies	1408		600	600	600	0	
	Mgt/Maint Training	1408		1,600	1,600	1,600	0	
	UPCS Inspection/Services	1408		500	500	500	0	
	Telecomm/Computer Upgrades/Security Cameras	1408		10,000	10,000	10,000	0	
	Resident Business Development	1408		500	500	500	0	
	HVAC Technical/Services	1408		500	500	500	0	
	Long Term Asset Management Plan	1408		1,000	1,000	1,000	0	
				44,900	**44,900**	**44,900**	**3,202**	
PHA-Wide	A and E Fees PHA Wide	1430		10,000	10,000	10,000	0	
Fees & Costs	Tech Serv Long Term Asset Mgt Plan	1430		500	500	500	0	
				$10,500	**$10,500**	**$10,500**	**$0**	
			40,190					

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

501-09 AMP1

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost TN37P006501-08		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA Wide	Neighborhood Appearance	1450		8,000	8,000	8,000	0	
	Landscaping	1450		8,000	8,000	8,000	0	
	Sidewalks/Parking Lots/Alleys/Streets	1450		1,000	1,000	1,000	0	
	Fence Repairs	1450		1,000	1,000	1,000	0	
	Pest Control	1450		1,000	1,000	1,000	0	
	Playground Improvements	1450		1,000	1,000	1,000	0	
				20,000	**20,000**	**20,000**	**0**	
PHA Wide Dwelling Equipment	Refrigerators	1465.1		4,000	4,000	4,000	0	
	Dumpster Repair	1465.1		500	500	500	0	
	ADA Modifications	1465.1		500	500	500	0	
	Emergency Mold Abatement	1465.1		500	500	500	0	
	HVAC Equipment	1465.1		500	500	500	0	
				6,000	**6,000**	**6,000**	**0**	
TN 37P006001 Lee	Install Covers over Crawlspace Entrances	1460		**20,000**	**20,000**	**20,000**	**20,000**	
	Comm Buildings & Offices Expansion / Renovations / Unexpected Needs		1/12/2010					
AMP1 6-1	Lee Apartments	1470		1,000	1,000	1,000	0	
				1,000	**1,000**	**1,000**	**0**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP1

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number/Name HA-Wide Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date TN37P006501-			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available
			1/12/2010				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP1

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Part I: Summary

Kingsport Housing & Redevelopment Authority

PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37P006501-09	2009

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number

☒ Performance and Evaluation Report for Program Year Ending _____ ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-			
2	1406 Operations	-			
3	1408 Management Improvements	44,900	44,900	44,900	3,202
4	1410 Administration	-	-	-	-
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	10,500	10,500	10,500	-
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	20,000	20,000	20,000	-
10	1460 Dwelling Structures	298,004	298,004	298,004	-
11	1465.1 Dwelling Equipment - Nonexpendable	6,000	6,000	6,000	-
12	1470 Nondwelling Structures	1,000	1,000	1,000	-
13	1475 Nondwelling Equipment	-	-	-	-
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	***$380,404***	***$380,404***	***$380,404***	***$3,202***
21	Amount of line 20 Related to LBP Activities	-			
22	Amount of line 20 Related to Section 504 Compliance	-			
23	Amount of line 20 Related to Security	-			
24	Amount of line 20 Related to Energy Conservation Measures	-			

Signature of Executive Director and Date

X *Terry W. Cunningham* ***1/12/2010***

Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP2

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA-Wide								
Management								
Improvements	Vista Workers	1408		13,300	13,300	13,300	3,000	
	Vista Office Supplies	1408		1,300	1,300	1,300	202	
	Resident Training	1408		1,600	1,600	1,600	0	
	Resident Initiatives Manager	1408		14,000	14,000	14,000	0	
	Resident Initiatives Supplies	1408		600	600	600	0	
	Mgt/Maint Training	1408		1,600	1,600	1,600	0	
	UPCS Inspection/Services	1408		500	500	500	0	
	Telecomm/Computer Upgrades/Security Cameras	1408		9,000	9,000	9,000	0	
	Resident Business Development	1408		500	500	500	0	
	HVAC Technical/Services	1408		500	500	500	0	
	Long Term Asset Management Plan	1408		1,000	1,000	1,000	0	
	Salary Wage Study	1408		1,000	1,000	1,000	0	
				44,900	**44,900**	**44,900**	**3,202**	
PHA-Wide	A and E Fees PHA Wide	1430		10,000	10,000	10,000	0	
Fees & Costs	Tech Serv Long Term Asset Mgt Plan	1430		500	500	500		
				$10,500	**$10,500**	**$10,500**	**$0**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP2

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA Wide	Neighborhood Appearance	1450		8,000	8,000	8,000	0	
	Landscaping	1450		8,000	8,000	8,000	0	
	Sidewalks/Parking Lots/Alleys/Streets	1450		1,000	1,000	1,000	0	
	Fence Repairs	1450		1,000	1,000	1,000	0	
	Pest Control	1450		1,000	1,000	1,000	0	
	Playground Improvements	1450		1,000	1,000	1,000	0	
							0	
				20,000	**20,000**	**20,000**	**0**	
PHA Wide Dwelling Equipment	Refrigerators	1465.1		4,000	4,000	4,000	0	
	Dumpster Repair	1465.1		500	500	500	0	
	ADA Modifications	1465.1		500	500	500	0	
	Emergency Mold Abatement	1465.1		500	500	500	0	
	HVAC Equipment	1465.1		500	500	500	0	
				6,000	**6,000**	**6,000**	**0**	
TN 37P006004 Cloud	Replace Roofing & Guttering	1460		**298,004**	**298,004**	**298,004**	**0**	
	Comm Buildings & Offices Expansion / Renovations / Unexpected Needs							
AMP2 6-4	Cloud Apartments	1470		1,000	1,000	1,000	0	
				1,000	**1,000**	**1,000**	**0**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

501-09 AMP2

Annual Statement /Performance and Evaluation Repo US Department of Housing OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Capital Fund Program, Capital Fund Replacement Housing and Urban Development

Capital Fund Financing Program Office of Public and Indian Housing

Development Number/Name HA-Wide Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP2

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Part I: Summary

Kingsport Housing & Redevelopment Authority
PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37P006501-09	2009

☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number

☐ Performance and Evaluation Report for Program Year Ending _____ ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-	-	-	-
2	1406 Operations	-	-	-	-
3	1408 Management Improvements	45,700	45,700	45,700	3,203
4	1410 Administration	-	-	-	-
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	10,500	10,500	10,500	-
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	20,000	20,000	20,000	-
10	1460 Dwelling Structures	21,400	21,400	21,400	-
11	1465.1 Dwelling Equipment - Nonexpendable	6,000	6,000	6,000	-
12	1470 Nondwelling Structures	4,000	4,000	4,000	-
13	1475 Nondwelling Equipment	-	-	-	-
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	***$107,600***	***$107,600***	***$107,600***	***$3,203***
21	Amount of line 20 Related to LBP Activities	-			
22	Amount of line 20 Related to Section 504 Compliance	-			
23	Amount of line 20 Related to Security	-			
24	Amount of line 20 Related to Energy Conservation Measures	-			

Signature of Executive Director and Date
X *Terry W. Cunningham* **1/29/2009**
Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date
X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

501-09 AMP3

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA-Wide								
Management								
Improvements	Vista Workers	1408		13,400	13,400	13,400	3,000	
	Vista Office Supplies	1408		1,400	1,400	1,400	203	
	Resident Training	1408		1,800	1,800	1,800	0	
	Resident Initiatives Manager	1408		14,000	14,000	14,000	0	
	Resident Initiatives Supplies	1408		800	800	800	0	
	Mgt/Maint Training	1408		1,800	1,800	1,800	0	
	UPCS Inspection/Services	1408		500	500	500	0	
	Telecomm/Computer Upgrades/Security Cameras	1408		9,000	9,000	9,000	0	
	Resident Business Development	1408		500	500	500	0	
	HVAC Technical/Services	1408		500	500	500	0	
	Long Term Asset Management Plan	1408		1,000	1,000	1,000	0	
	Salary Wage Study	1408		1,000	1,000	1,000	0	
				45,700	**45,700**	**45,700**	**3,203**	
PHA-Wide	A and E Fees PHA Wide	1430		10,000	10,000	10,000	0	
Fees & Costs	Tech Serv Long Term Asset Mgt Plan	1430		500	500	500	0	
				$10,500	**$10,500**	**$10,500**	**$0**	

501-09 AMP3

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA Wide	Neighborhood Appearance	1450		8,000	8,000	8,000	0	
	Landscaping	1450		8,000	8,000	8,000	0	
	Sidewalks/Parking Lots/Alleys/Streets	1450		1,000	1,000	1,000	0	
	Fence Repairs	1450		1,000	1,000	1,000	0	
	Pest Control	1450		1,000	1,000	1,000	0	
	Playground Improvements	1450		1,000	1,000	1,000	0	
				20,000	**20,000**	**20,000**	**0**	
PHA Wide	Refrigerators	1465.1		4,000	4,000	4,000	0	
Dwelling	Dumpster Repair	1465.1		500	500	500	0	
Equipment	ADA Modifications	1465.1		500	500	500	0	
	Emergency Mold Abatement	1465.1		500	500	500	0	
	HVAC Equipment	1465.1		500	500	500	0	
				6,000	**6,000**	**6,000**	**0**	
TN 37P006007	Replace Window/Security Screens	1460		10,000	10,000	10,000	0	
Dogwood				**10,000**	**10,000**	**10,000**	**0**	
TN 37P00609	Replace Roofing & Guttering	1460		**11,400**	**11,400**	**11,400**	**0**	
Holly Hills								
	Comm Buildings & Offices Expansion / Renovations / Unexpected Needs							
AMP3 6-7	Dogwood Terrace Apartments	1470		1,000	1,000	1,000	0	
AMP3 6-9	Holly Hills Apartments	1470		1,000	1,000	1,000	0	
AMP3 6-9	Administration Building (Main Office)	1470		2,000	2,000	2,000	0	
				4,000	**4,000**	**4,000**	**0**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

501-09 AMP3

Annual Statement /Performance and Evaluation Repo US Department of Housing OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Capital Fund Program, Capital Fund Replacement Housing and Urban Development

Capital Fund Financing Program Office of Public and Indian Housing

Development Number/Name HA-Wide Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 AMP3

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Kingsport Housing & Redevelopment Authority

PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37P006501-09	2009

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number

☒ Performance and Evaluation Report for Program Year Ending 9/30/09 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-	-	-	-
2	1406 Operations	175,944	175,944	175,944	-
3	1408 Management Improvements	135,500	135,500	135,500	9,607
4	1410 Administration	87,972	87,972	87,972	-
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	31,500	31,500	31,500	-
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	60,000	60,000	60,000	-
10	1460 Dwelling Structures	339,404	339,404	339,404	-
11	1465.1 Dwelling Equipment - Nonexpendable	18,000	18,000	18,000	-
12	1470 Nondwelling Structures	6,000	6,000	6,000	-
13	1475 Nondwelling Equipment	25,400	25,400	25,400	-
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	***$879,720***	***$879,720***	***$879,720***	***$9,607***
21	Amount of line 20 Related to LBP Activities	-			
22	Amount of line 20 Related to Section 504 Compliance	-			
23	Amount of line 20 Related to Security	-			
24	Amount of line 20 Related to Energy Conservation Measures	-			

Signature of Executive Director and Date

X Terry W. Cunningham **1/6/2010**

Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA-Wide	Operations	1406		175,944	175,944	175,944	0	
Management Improvements	Vista Workers	1408		40,000	40,000	40,000	9,000	
	Vista Office Supplies	1408		4,000	4,000	4,000	607	
	Resident Training	1408		5,000	5,000	5,000	0	
	Resident Initiatives Manager	1408		42,000	42,000	42,000	0	
	Resident Initiatives Supplies	1408		2,000	2,000	2,000	0	
	Mgt/Maint Training	1408		5,000	5,000	5,000		
	UPCS Inspection/Services	1408		1,500	1,500	1,500	0	
	Telecomm/Computer Upgrades/Security Cameras	1408		30,000	30,000	30,000	0	
	Resident Business Development	1408		1,500	1,500	1,500	0	
	HVAC Technical/Services	1408		1,500	1,500	1,500	0	
	Long Term Asset Management Plan	1408		3,000	3,000	3,000	0	
				135,500	**135,500**	**135,500**	**9,607**	
PHA-Wide **Administration**	Administration	1410		87,972	87,972	87,972	0	
				$87,972	**$87,972**	**$87,972**	**$0**	
PHA-Wide	A and E Fees PHA Wide	1430		31,500	31,500	31,500	0	
Fees & Costs	Tech Serv Long Term Asset Mgt Plan	1430						
				$31,500	**$31,500**	**$31,500**	**$0**	
PHA Wide **Non-Dwelling Equipment**	Maint/Mgt Vehicle	1475		25,400	25,400	25,400	0	
				$25,400	**$25,400**	**$25,400**	**$0**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

501-09

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	Funds Obligated [2]	Funds Expended [2]	
PHA Wide	Neighborhood Appearance	1450		24,000	24,000	24,000	0	
	Landscaping	1450		24,000	24,000	24,000	0	
	Sidewalks/Parking Lots/Alleys/Streets	1450		3,000	3,000	3,000	0	
	Fence Repairs	1450		3,000	3,000	3,000	0	
	Pest Control	1450		3,000	3,000	3,000		
	Playground Improvements	1450		3,000	3,000	3,000	0	
				60,000	**60,000**	**60,000**	**0**	
PHA Wide	Refrigerators	1465.1		12,000	12,000	12,000	0	
Dwelling	Dumpster Repair	1465.1		1,500	1,500	1,500	0	
Equipment	ADA Modifications	1465.1		1,500	1,500	1,500	0	
	Emergency Mold Abatement	1465.1		1,500	1,500	1,500	0	
	HVAC Equipment	1465.1		1,500	1,500	1,500	0	
				18,000	**18,000**	**18,000**	**0**	
TN 37P006001	Install Covers over Crawlspace Entrances	1460		**20,000**	**20,000**	**20,000**	**0**	
Lee								
TN 37P006004	Replace Roofing & Guttering	1460		**298,004**	**298,004**	**298,004**	**0**	
Cloud								
TN 37P006007	Replace Window/Security Screens	1460		10,000	10,000	10,000	0	
Dogwood				**10,000**	**10,000**	**10,000**	**0**	
TN 37P00609	Replace Roofing & Guttering	1460		**11,400**	**11,400**	**11,400**	**0**	
Holly Hills								
	Comm Buildings & Offices Expansion / Renovations / Unexpected Needs							
AMP1 6-1	Lee Apartments	1470		1,000	1,000	1,000	0	
AMP2 6-4	Cloud Apartments	1470		1,000	1,000	1,000	0	
AMP3 6-7	Dogwood Terrace Apartments	1470		1,000	1,000	1,000	0	
AMP3 6-9	Holly Hills Apartments	1470		1,000	1,000	1,000	0	
AMP3 6-9	Administration Building (Main Office)	1470		2,000	2,000	2,000	0	
				6,000	**6,000**	**6,000**	**0**	

501-09

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

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

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0157 (Exp. 3/31/2002)

Development Number/Name HA-Wide Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Part I: Summary

Kingsport Housing & Redevelopment Authority

PO Box 44 Kingsport, TN 37662

Capital Fund Number	FFY of Grant Approval
TN37S00650109	**2009**

☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement/Revision Number

☒ Performance and Evaluation Report for Program Year Ending 9/30/09 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost [2]	
		Original	Revised [1]	Obligated	Expended
1	Total Non-CGP Funds	-			
2	1406 Operations	-			
3	1408 Management Improvements	-			
4	1410 Administration	115,332	115,332	115,332	12,480
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	117,681	117,681	117,681	91,553
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	-	-	-	-
10	1460 Dwelling Structures	957,262	957,262	920,314	220,854
11	1465.1 Dwelling Equipment - Nonexpendable	-	-	-	-
12	1470 Nondwelling Structures	-	-	-	-
13	1475 Nondwelling Equipment	-	-	-	-
14	1485 Demolition	-	-	-	-
15	1490 Replacement Reserve	-	-	-	-
16	1492 Moving to Work Demonstration	-	-	-	-
17	1495.1 Relocation Costs	-	-	-	-
18	1498 Mod Used for Development	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	**Amount of Annual Grant (Sum of lines 2-19)**	***$1,190,275***	***$1,190,275***	***$1,153,327***	***$324,887***
21	Amount of line 20 Related to LBP Activities	-			
22	Amount of line 20 Related to Section 504 Compliance	-			
23	Amount of line 20 Related to Security	-			
24	Amount of line 20 Related to Energy Conservation Measures	-			

Signature of Executive Director and Date

X *Terry W. Cunningham* **1/12/2010**

Terry W. Cunningham, Executive Director

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

X

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 ARRA

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	TN37S00650109 Obligated [2]	Funds Expended [2]	
PHA-Wide **Administration**	Administration	1410		115,332	115,332	115,332	12,480	
				$115,332	**$115,332**	**$115,332**	**$12,480**	
PHA-Wide **Fees & Costs**	A and E Fees PHA Wide	1430		117,681	117,681	117,681	91,553	
				$117,681	**$117,681**	**$117,681**	**$91,553**	
			40,190					

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[2] To be completed for the Performance and Evaluation Report.

501-09 ARRA

Annual Statement /Performance and Evaluation Report
Capital Fund Program, Capital Fund Replacement Housing Factor and Capital Fund Financing Program

US Department of Housing and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)

Development Number / Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work [2]
				Original	Revised [1]	TN37S00650109 Obligated [2]	Funds Expended [2]	
TN 37P006001 Lee	Replace Roofing & Guttering	1460		**286,862**	**286,862**	**258,104**	**328**	
TN 37P006004 Cloud	Replace Roofing & Guttering	1460		**321,000**	**321,000**	**324,000**	**219,870**	
TN 37P006009 Holly Hills	Replace Window/Security Screens	1460		**320,000**	**320,000**	**290,861**	**564**	
TN 37P00611 Tiffany Court	Replace Windows	1460		**29,400**	**29,400**	**47,349**	**92**	

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 ARRA

Annual Statement /Performance and Evaluation Repo **US Department of Housing** OMB Approval No. 2577 - 0226 (Exp. 4/30/2011)
Capital Fund Program, Capital Fund Replacement Housing F and Urban Development
Capital Fund Financing Program Office of Public and Indian Housing

TN37S00650109

Development Number/Name HA-Wide Activities	All Funds Obligated Quarter Ending Date			All Funds Expended Quarter Ending Date			Reasons for Revised Target Dates [2]
	Original	Revised [1]	Actual [2]	Original	Revised [1]	Actual [2]	
1406							
1408							
1410							
1430							
1450							
1460							
1465.1							
1470							
1475							
TN 37P006001							
TN 37P006002							
TN 37P006003							
TN 37P006004							
TN 37P006007							
TN 37P006009							
TN 37P006011							
							Approved $ Quarter ending Obligate 18 mos after available Expend 3 yrs after available
			1/12/2010				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

501-09 ARRA

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

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

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost** [1]	
		Original	**Revised**[2]	**Obligated**	**Expended**
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements	44,900			
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	20,000			
10	1460 Dwelling Structures	199,804			
11	1465.1 Dwelling Equipment—Nonexpendable	6,000			
12	1470 Non-dwelling Structures	101,000			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: **Kingsport Housing and Redevelopment Authority (TN006)** AMP 1 Lee Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2010** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	382,204			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Tim W. **Date** 1/12/10 **Signature of Public Housing Director** **Date**

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part II: Supporting Pages								
PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments		**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:				**Federal FFY of Grant: 2010**		
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 [1]	Funds Obligated[2]	Funds Expended[2]	
PHA-Wide	Vista Workers	1408		13,300				
Management Improvements	Vista Office Supplies	1408		1,300				
	Resident Training	1408		1,600				
	Resident Initiatives Manager	1408		14,000				
	Resident Initiatives Supplies	1408		600				
	Maint./Mgmt Training	1408		1,600				
	UPCS Inspection Services	1408		500				
	Telecom/Computer/Security Cameras	1408		10,000				
	Resident Business Development	1408		500				
	HVAC Technical & Equipment	1408		500				
	Long Term Asset Mgmt. Plan	1408		1,000				
	Subtotal	**1408**		**44,900**				
	A & E Fees	**1430**		**10,500**				
PHA-Wide Fees and Costs	Neighborhood Appearance	1450		8,000				
PHA-Wide	Landscaping	1450		8,000				
Appearances	Sidewalks/Alleys/Parking Lots	1450		1,000				
	Fence Repairs	1450		1,000				
	Pest Control/Emergency Extermination	1450		1,000				
	Playground Improvements	1450		1,000				
	Subtotal	**1450**		**20,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
AMP 1								
Lee Apartments	Install Covers Over Crawl Spaces	1460		20,000				
	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Replace HVAC	1460		65,200				
	Notice Boxes	1460		15,000				
	Wall/Floor/Ceiling Repair	1460		5,000				
Tiffany Court	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Notice Boxes	1460		1,500				
	Wall/Floor/Ceiling Repair	1460		1,000				
	Subtotal	**1460**		**199,804**				
PHA Wide	Refrigerators	1465		4,000				
Dwelling	Dumpster Repairs	1465		500				
Equipment	ADA Modifications	1465		500				
	Emergency Mold Abatement	1465		500				
	HVAC Equipment	1465		500				
	Subtotal	**1465**		**6,000**				
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs							
AMP 1	6-1 Lee Apartments	1470		1,000				
	Parking Lot Expansion							
AMP 1	6-1 Lee Apartments	1470		100,000				
	Subtotal	**1470**		**101,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments					**Federal FFY of Grant: 2010**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 1 Lee Apartments					**Federal FFY of Grant: 2010**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements	44,900			
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	20,000			
10	1460 Dwelling Structures	86,104			
11	1465.1 Dwelling Equipment—Nonexpendable	6,000			
12	1470 Non-dwelling Structures	1,000			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	168,504			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Tony W. [illegible] **Date** 1/12/10 **Signature of Public Housing Director** **Date**

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Expires 4/30/2011

Part II: Supporting Pages

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
PHA-Wide	Vista Workers	1408		13,300				
Management Improvements	Vista Office Supplies	1408		1,300				
	Resident Training	1408		1,600				
	Resident Initiatives Manager	1408		14,000				
	Resident Initiatives Supplies	1408		600				
	Maint./Mgmt Training	1408		1,600				
	UPCS Inspection Services	1408		500				
	Telecom/Computer/Security Cameras	1408		10,000				
	Resident Business Development	1408		500				
	HVAC Technical & Equipment	1408		500				
	Long Term Asset Mgmt. Plan	1408		1,000				
	Subtotal	**1408**		**44,900**				
PHA-Wide Fees and Costs	**A & E Fees**	**1430**		**10,500**				
PHA-Wide	Neighborhood Appearance	1450		8,000				
Appearances	Landscaping	1450		8,000				
	Sidewalks/Alleys/Parking Lots	1450		1,000				
	Fence Repairs	1450		1,000				
	Pest Control/Emergency Extermination	1450		1,000				
	Playground Improvements	1450		1,000				
	Subtotal	**1450**		**20,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
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Part II: Supporting Pages		
PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
AMP 2								
Cloud Apartments	Replace Commodes/Aerators/Showerheads	1460		12,404				
	Replace HVAC	1460		48,700				
	Notice Boxes	1460		20,000				
	Wall/Floor/Ceiling Repair	1460		5,000				
	Subtotal	**1460**		**86,104**				
PHA Wide	Refrigerators	1465		4,000				
Dwelling	Dumpster Repairs	1465		500				
Equipment	ADA Modifications	1465		500				
	Emergency Mold Abatement	1465		500				
	HVAC Equipment	1465		500				
	Subtotal	**1465**		**6,000**				
AMP 2	**Community Bldgs & Offices Expansions/Renovations/Unexpected Needs**							
	6-4 Cloud Apartments	**1470**		**1,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 2/Cloud Apartments					**Federal FFY of Grant: 2010**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

[1] 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.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
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Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)
AMP 2/Cloud Apartments

Federal FFY of Grant: 2010

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
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OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 3 Holly Hills/Dogwood Terrace	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]				
3	1408 Management Improvements	44,900			
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	10,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	20,000			
10	1460 Dwelling Structures	36,000			
11	1465.1 Dwelling Equipment—Nonexpendable	6,000			
12	1470 Non-dwelling Structures	4,000			
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
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OMB No. 2577-0226
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Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) AMP 3 Holly Hills Dogwood Terrace	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	121,400			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Tony W. [illegible] **Date** 11/12/10

Signature of Public Housing Director **Date**

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
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Part II: Supporting Pages

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) **AMP 3** **Holly Hills/Dogwood Terrace**	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
PHA-Wide	Vista Workers	1408		13,400				
Management Improvements	Vista Office Supplies	1408		1,400				
	Resident Training	1408		1,800				
	Resident Initiatives Manager	1408		14,000				
	Resident Initiatives Supplies	1408		800				
	Maint./Mgmt Training	1408		1,800				
	UPCS Inspection Services	1408		500				
	Telecom/Computer/Security Cameras	1408		10,000				
	Resident Business Development	1408		500				
	HVAC Technical & Equipment	1408		500				
	Long Term Asset Mgmt. Plan	1408		1,000				
	Subtotal	**1408**		**44,900**				
PHA-Wide Fees and Costs	**A & E Fees**	**1430**		**10,500**				
PHA-Wide	Neighborhood Appearance	1450		8,000				
Appearances	Landscaping	1450		8,000				
	Sidewalks/Alleys/Parking Lots	1450		1,000				
	Fence Repairs	1450		1,000				
	Pest Control/Emergency Extermination	1450		1,000				
	Playground Improvements	1450		1,000				
	Subtotal	**1450**		**20,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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Part II: Supporting Pages

PHA Name: Kingsport Housing and Redevelopment Authority (TN006) **AMP 3** **Holly Hills/Dogwood Terrace**	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
AMP 3								
Dogwood Terrace	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Notice Boxes	1460		7,500				
	Wall/Floor/Ceiling Repair	1460		5,000				
Holly Hills	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Notice Boxes	1460		8,500				
	Wall/Floor/Ceiling Repair	1460		5,000				
	Subtotal	**1460**		**36,000**				
PHA Wide	Refrigerators	1465		4,000				
Dwelling	Dumpster Repairs	1465		500				
Equipment	ADA Modifications	1465		500				
	Emergency Mold Abatement	1465		500				
	HVAC Equipment	1465		500				
	Subtotal	**1465**		**6,000**				
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs							
AMP 3	6-7 Dogwood Terrace	1470		1,000				
	6-9 Holly Hills	1470		1,000				
	6-9 Adm. Bldg. – Main Office	1470		2,000				
	Subtotal	**1470**		**4,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)
AMP 3
Holly Hills/Dogwood Terrace

Federal FFY of Grant: 2010

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kingsport Housing and Redevelopment Authority (TN006) **AMP 3** **Holly Hills/Dogwood Terrace**					**Federal FFY of Grant: 2010**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.

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Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	175,944			
3	1408 Management Improvements	135,500			
4	1410 Administration (may not exceed 10% of line 21)	87,972			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	31,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	60,000			
10	1460 Dwelling Structures	239,804			
11	1465.1 Dwelling Equipment—Nonexpendable	18,000			
12	1470 Non-dwelling Structures	106,000			
13	1475 Non-dwelling Equipment	25,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]	96,751			

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
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U.S. Department of Housing and Urban Development
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Expires 4/30/2011

Part I: Summary

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	**Summary by Development Account**	**Total Estimated Cost**		**Total Actual Cost [1]**	
		Original	**Revised [2]**	**Obligated**	**Expended**
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	976,471			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	**Date**	**Signature of Public Housing Director**	**Date**
Tony W.	1/12/10		

[1] To be completed for the Performance and Evaluation Report.
[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
[3] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Part II: Supporting Pages		
PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
PHA-Wide	**Operations**	**1406**		**175,944**				
Management Improvements	Vista Workers	1408		40,000				
	Vista Office Supplies	1408		4,000				
	Resident Training	1408		5,000				
	Resident Initiatives Manager	1408		42,000				
	Resident Initiatives Supplies	1408		2,000				
	Maint./Mgmt Training	1408		5,000				
	UPCS Inspection Services	1408		1,500				
	Telecom/Computer/Security Cameras	1408		30,000				
	Resident Business Development	1408		1,500				
	HVAC Technical & Equipment	1408		1,500				
	Long Term Asset Mgmt. Plan	1408		3,000				
	Subtotal	**1408**		**135,500**				
PHA-Wide Administration	**Administration**	**1410**		**87,972**				
PHA-Wide Fees and Costs	**A & E Fees**	**1430**		**31,500**				
PHA-Wide	Neighborhood Appearance	1450		24,000				
Appearances	Landscaping	1450		24,000				
	Sidewalks/Alleys/Parking Lots	1450		3,000				
	Fence Repairs	1450		3,000				
	Pest Control/Emergency Extermination	1450		3,000				
	Playground Improvements	1450		3,000				
	Subtotal	**1450**		**60,000**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
AMP 1								
Lee Apartments	Install Covers Over Crawl Spaces	1460		20,000				
	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Replace HVAC	1460		65,200				
	Notice Boxes	1460		15,000				
	Wall/Floor/Ceiling Repair	1460		5,000				
Tiffany Court	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Notice Boxes	1460		1,500				
	Wall/Floor/Ceiling Repair	1460		1,000				
AMP 2								
Cloud Apartments	Replace Commodes/Aerators/Showerheads	1460		12,404				
	Replace HVAC	1460		48,700				
	Notice Boxes	1460		20,000				
	Wall/Floor/Ceiling Repair	1460		5,000				
AMP 3								
Dogwood Terrace	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Notice Boxes	1460		7,500				
	Wall/Floor/Ceiling Repair	1460		5,000				
Holly Hills	Replace Commodes/Aerators/Showerheads	1460		5,000				
	Notice Boxes	1460		8,500				
	Wall/Floor/Ceiling Repair	1460		5,000				
	Subtotal	**1460**		**239,804**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages		
PHA Name: Kingsport Housing and Redevelopment Authority (TN006)	**Grant Type and Number** Capital Fund Program Grant No: TN37P00650110 CFFP (Yes/ No): No Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2010**

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 [1]	Funds Obligated[2]	Funds Expended[2]	
PHA Wide	Refrigerators	1465		12,000				
Dwelling	Dumpster Repairs	1465		1,500				
Equipment	ADA Modifications	1465		1,500				
	Emergency Mold Abatement	1465		1,500				
	HVAC Equipment	1465		1,500				
	Subtotal	**1465**		**18,000**				
	Community Bldgs & Offices Expansions/Renovations/Unexpected Needs							
AMP 1	6-1 Lee Apartments	1470		1,000				
AMP 2	6-4 Cloud Apartments	1470		1,000				
AMP 3	6-7 Dogwood Terrace	1470		1,000				
	6-9 Holly Hills	1470		1,000				
	6-9 Adm. Bldg. – Main Office	1470		2,000				
	Parking Lot Expansion							
AMP 1	6-1 Lee Apartments	1470		100,000				
	Subtotal	**1470**		**106,000**				
PHA-Wide Non-Dwelling Equipment	**Maintenance/Management Vehicles**	**1475**		**25,000**				
Development Activities	**Replacement Housing Factor**	**1499**		**96,751**				

[1] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

[2] To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Kingsport Housing and Redevelopment Authority (TN006)					**Federal FFY of Grant: 2010**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide					

[1] 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.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Kingsport Housing and Redevelopment Authority (TN006)

Federal FFY of Grant: 2010

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

[1] 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.

Part I: Summary

PHA Name/Number Kingsport Housing and Redevelopment Authority (TN006) Lee Apartments AMP 1			Locality (City/County & State) Kingsport/Sullivan, Tennessee		☒Original 5-Year Plan ☐Revision No:	
A.	Development Number and Name Robert E. Lee Apartments Tiffany Court AMP 1	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	107,400	112,000	88,000	155,400
C.	Management Improvements		44,900	44,900	44,900	44,900
D.	PHA-Wide Non-dwelling Structures and Equipment		11,000	1,000	1,000	21,000
E.	Administration		-	-	-	-
F.	Other		10,500	10,500	10,500	10,500
G.	Operations		-	-	-	-
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		173,800	168,400	144,400	231,800
L.	Total Non-CFP Funds					
M.	Grand Total		173,800	168,400	144,400	231,800

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 - FFY 2011			Work Statement for Year: 3 - FFY 2012		
	Development Number/Name Lee Apartments AMP 1 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name TN006 Overall General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-1 Lee Apartments**			**6-1 Lee Apartments**		
Annual	Replace HVAC		75,400	Replace Storm Doors		25,000
Statement	Wall/Floor/Ceiling Repair		5,000	Repair/Replace Bath Tubs		39,000
	6-11 Tiffany Court			Wall/Floor/Ceiling Repairs		1,000
	Wall/Floor/Ceiling Repair		1,000	**6-11 Tiffany Court**		
	1460 Subtotal		**81,400**	Replace Rear Decks		20,000
				Wall/Floor/Ceiling Repairs		1,000
				1460 Subtotal		**86,000**
	Community Bldg & Offices Expansions/Renovations/Needs			**1470 Com. Bldgs & Offices Expansions/Renovations/Unexpected Needs**		
	6-1 Lee Apartments		1,000	6-1 Lee Apartments		**1,000**
	Replace Dumpster Surrounds					
	6-1 Lee Apartments		5,000			
	6-11 Tiffany Court		5,000			
	1470 Subtotal		**11,000**			
	Subtotal of Estimated Cost		$92,400	Subtotal of Estimated Cost		$ 87,000

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013			Work Statement for Year: 5 FFY 2014		
	Development Number/Name Lee Apartments AMP 1 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-1 Lee Apartments**			**6-1 Lee Apartments**		
Annual	Replace Storm Doors		5,000	Replace Water Meter Covers, Enclosures & Main Cut-Off Valves		50,000
Statement	Repair Interior Doors		5,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	Replace Vinyl Siding (Porches, Gables, etc)		25,000	Install Hard-Wired Smoke Detectors		5,000
	Wall/Floor/Ceiling Repairs		5,000	Wall/Floor/Ceiling Repairs		10,000
	6-11 Tiffany Court			**6-11 Tiffany Court**		
	Replace Storm Doors		2,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	Repair Interior Doors		5,000	Install Hard-Wired Smoke Detectors		5,000
	Replace Vinyl Siding (Porches, Gables, etc)		10,000	Wall/Floor/Ceiling Repairs		9,400
	Wall/Floor/Ceiling Repairs		5,000	**1460 Subtotal**		**129,400**
	1460 Subtotal		**62,000**			
	Community Bldg's & Offices Expansions/Renovations/ Unexpected Needs			**Community Bldg's & Offices (Expansions/Renovations/Unexpected Needs)**		
	6-1 Lee Apartments		**1,000**	6-1 Lee Apartments		1,000
				Replace Floor Tile		
				6-1 Lee Com. Bldg.		10,000
				Pave Parking Lots		
				6-1 Lee Apartments		5,000
				6-11 Tiffany Court		5,000
				1470 Subtotal		**21,000**
	Subtotal of Estimated Cost		$ 63,000	Subtotal of Estimated Cost		$ 150,400

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year:3 FFY 2012	
	Development Number/Name Lee Apartments AMP 1 General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
Annual Statement	Vista Workers	13,300	Vista Workers	13,300
	Vista Office Supplies	1,300	Vista Office Supplies	1,300
	Resident Training	1,600	Resident Training	1,600
	Resident Initiatives Manager	14,000	Resident Initiatives Manager	14,000
	Resident Initiatives Supplies	600	Resident Initiatives Supplies	600
	Maint./Mgmt. Training	1,600	Maint./Mgmt. Training	1,600
	UPCS Inspection Services	500	UPCS Inspection Services	500
	Telecom/Computer/Security Cameras	10,000	Telecom/Computer/Security Cameras	10,000
	Resident Business Development	500	Resident Business Development	500
	HVAC Technical & Equipment	500	HVAC Technical & Equipment	500
	Long Term Asset Mgmt. Plan	1,000	Long Term Asset Mgmt. Plan	1,000
	1408 Subtotal	**44,900**	**1408 Subtotal**	**44,900**
	A & E Fees	10,000	A & E Fees	10,000
	Tech. Service Long Term Asset Mgmt. Plan	500	Tech. Service Long Term Asset Mgmt. Plan	500
	1430 Subtotal	**10,500**	**1430**	**10,500**
	Neighborhood Appearance	8,000	Neighborhood Appearance	8,000
	Landscaping	8,000	Landscaping	8,000
	Sidewalks/Alleys/Parking Lots	1,000	Sidewalks/Alleys/Parking Lots	1,000
	Fence Repairs	1,000	Fence Repairs	1,000
	Pest Control/Emergency Extermination	1,000	Pest Control/Emergency Extermination	1,000
	Playground Improvements	1,000	Playground Improvements	1,000
	1450 Subtotal	**20,000**	**1450 Subtotal**	**20,000**
	Refrigerators	4,000	Refrigerators	4,000
	Dumpster Repairs	500	Dumpster Repairs	500
	ADA Modifications	500	ADA Modifications	500
	Emergency Mold Abatement	500	Emergency Mold Abatement	500
	HVAC Equipment	500	HVAC Equipment	500
	1465 Subtotal	**6,000**	**1465 Subtotal**	**6,000**
	Subtotal of Estimated Cost	$ 81,400		$ 81,400

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year:5 FFY 2014	
	Development Number/Name Lee Apartments AMP 1 General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	Vista Workers	13,300	Vista Workers	13,300
Annual	Vista Office Supplies	1,300	Vista Office Supplies	1,300
Statement	Resident Training	1,600	Resident Training	1,600
	Resident Initiatives Manager	14,000	Resident Initiatives Manager	14,000
	Resident Initiatives Supplies	600	Resident Initiatives Supplies	600
	Maint./Mgmt. Training	1,600	Maint./Mgmt. Training	1,600
	UPCS Inspection Services	500	UPCS Inspection Services	500
	Telecom/Computer/Security Cameras	9,000	Telecom/Computer/Security Cameras	9,000
	Resident Business Development	500	Resident Business Development	500
	HVAC Technical & Equipment	500	HVAC Technical & Equipment	1,500
	Long Term Asset Mgmt. Plan	1,000	Long Term Asset Mgmt. Plan	1,000
	Energy Audit	1,000	**1408 Subtotal**	**44,900**
	1408 Subtotal	**44,900**	**1410 Administration**	
	A & E Fees	10,000	Tech. Service Long Term Asset Mgmt. Plan	10,000
	Tech. Service Long Term Asset Mgmt. Plan	500	**1430 Subtotal**	500
	1430 Subtotal	**10,500**	Neighborhood Appearance	**10,500**
	Neighborhood Appearance	8,000	Landscaping	8,000
	Landscaping	8,000	Sidewalks/Alleys/Parking Lots	8,000
	Sidewalks/Alleys/Parking Lots	1,000	Fence Repairs	1,000
	Fence Repairs	1,000	Pest Control/Emergency Extermination	1,000
	Pest Control/Emergency Extermination	1,000	Playground Improvements	1,000
	Playground Improvements	1,000	**1450 Subtotal**	1,000
	1450 Subtotal	**20,000**	Refrigerators	**20,000**
	Refrigerators	4,000	Dumpster Repairs	4,000
	Dumpster Repairs	500	ADA Modifications	500
	ADA Modifications	500	Emergency Mold Abatement	500
	Emergency Mold Abatement	500	HVAC Equipment	500
	HVAC Equipment	500	**1465 Subtotal**	**6,000**
	1465 Subtotal	**6,000**		
	Subtotal of Estimated Cost	$ 81,400	Subtotal of Estimated Cost	$ 81,400

1/12/10

Part I: Summary

PHA Name/Number Kingsport Housing and Redevelopment Authority (TN006) Cloud Apartments AMP 2			Locality (City/County & State) Kingsport/Sullivan, Tennessee		☒**Original 5-Year Plan** ☐**Revision No:**	
A.	Development Number and Name Cloud Apartments AMP 2	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	134,400	107,400	125,404	86,000
C.	Management Improvements		44,900	44,900	44,900	44,900
D.	PHA-Wide Non-dwelling Structures and Equipment		6,000	1,000	86,000	16,000
E.	Administration		-	-	-	-
F.	Other		10,500	10,500	10,500	10,500
G.	Operations		-	-	-	-
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		195,800	163,800	266804	157,400
L.	Total Non-CFP Funds					
M.	Grand Total		195,800	163,800	266804	157,400

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 - FFY 2011			Work Statement for Year: 3 - FFY 2012		
	Development Number/Name Cloud Apartments AMP 2 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name TN006 Overall General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-4 Cloud Apartments**			**6-4 Cloud Apartments**		
Annual	Replace HVAC		103,400	Replace Storm Doors		41,400
Statement	Wall/Floor/Ceiling Repair		5,000	Repair/Replace Bath Tubs		39,000
	1460 Subtotal		**108,400**	Wall/Floor/Ceiling Repairs		1,000
				1460 Subtotal		**81,400**
	Community Bldg & Offices Expansions/Renovations/Needs					
	6-4 Cloud Apartments		1,000	**Com. Bldgs & Offices Expansions/Renovations/Unexpected Needs**		
				6-4 Cloud Apartments		**1,000**
	Replace Dumpster Surrounds					
	6-4 Cloud Apartments		5,000			
	1470 Subtotal		**6,000**			
	Subtotal of Estimated Cost		$ 114,400	Subtotal of Estimated Cost		$ 82,400

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013			Work Statement for Year: 5 FFY 2014		
	Development Number/Name Cloud Apartments AMP 2 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-4 Cloud Apartments**			**6-4 Cloud Apartments**		
Annual	Replace Storm Doors		5,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
Statement	Repair Interior Doors		5,000	Install Hard-Wired Smoke Detectors		7,000
	Replace Vinyl Siding (Porches, Gables, etc)		84,404	Wall/Floor/Ceiling Repairs		28,000
	Wall/Floor/Ceiling Repairs		5,000	**1460 Subtotal**		**60,000**
	1460 Subtotal		**99,404**			
	Community Bldg's & Offices Expansions/Renovations/ Unexpected Needs			**Community Bldgs & Offices (Expansions/Renovations/Unexpected Needs)**		
	6-4 Cloud Apartments		1,000	6-4 Cloud Apartments		1,000
	Relocate Pic-Nic Shelter			**Replace Floor Tile**		
	6-4 Cloud Apartments		25,000	6-4 Cloud Com. Bldg.		10,000
	Expand Storage Bldg & Parking Lot			**Pave Parking Lots**		
	6-4 Cloud Maintenance		50,000	6-4 Cloud Apartments		5,000
	Replace Fence			**1470 Subtotal**		**16,000**
	6-4 Cloud Apts. (Behind Gym &Alley		10,000			
	1470 Subtotal		**86,000**			
	Subtotal of Estimated Cost		$185,404	Subtotal of Estimated Cost		$ 76,000

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year:3 FFY 2012	
	Development Number/Name Cloud Apartments AMP 2 General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	Vista Workers	13,300	Vista Workers	13,300
	Vista Office Supplies	1,300	Vista Office Supplies	1,300
	Resident Training	1,600	Resident Training	1,600
	Resident Initiatives Manager	14,000	Resident Initiatives Manager	14,000
	Resident Initiatives Supplies	600	Resident Initiatives Supplies	600
	Maint./Mgmt. Training	1,600	Maint./Mgmt. Training	1,600
	UPCS Inspection Services	500	UPCS Inspection Services	500
	Telecom/Computer/Security Cameras	10,000	Telecom/Computer/Security Cameras	10,000
	Resident Business Development	500	Resident Business Development	500
	HVAC Technical & Equipment	500	HVAC Technical & Equipment	500
	Long Term Asset Mgmt. Plan	1,000	Long Term Asset Mgmt. Plan	1,000
	1408 Subtotal	**44,900**	**1408**	**44,900**
	A & E Fees	10,000	A & E Fees	10,000
	Tech. Service Long Term Asset Mgmt. Plan	500	Tech. Service Long Term Asset Mgmt. Plan	500
	1430 Subtotal	**10,500**	**1430**	**10,500**
	Neighborhood Appearance	8,000	Neighborhood Appearance	8,000
	Landscaping	8,000	Landscaping	8,000
	Sidewalks/Alleys/Parking Lots	1,000	Sidewalks/Alleys/Parking Lots	1,000
	Fence Repairs	1,000	Fence Repairs	1,000
	Pest Control/Emergency Extermination	1,000	Pest Control/Emergency Extermination	1,000
	Playground Improvements	1,000	Playground Improvements	1,000
	1450 Subtotal	**20,000**	**1450**	**20,000**
	Refrigerators	4,000	Refrigerators	4,000
	Dumpster Repairs	500	Dumpster Repairs	500
	ADA Modifications	500	ADA Modifications	500
	Emergency Mold Abatement	500	Emergency Mold Abatement	500
	HVAC Equipment	500	HVAC Equipment	500
	1465 Subtotal	**6,000**	**1465**	**6,000**

	Subtotal of Estimated Cost	$ 81,400		$ 81,400

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year:5 FFY 2014	
	Development Number/Name Cloud Apartments AMP 2 General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	Vista Workers	13,300	Vista Workers	13,300
Annual	Vista Office Supplies	1,300	Vista Office Supplies	1,300
Statement	Resident Training	1,600	Resident Training	1,600
	Resident Initiatives Manager	14,000	Resident Initiatives Manager	14,000
	Resident Initiatives Supplies	600	Resident Initiatives Supplies	600
	Maint./Mgmt. Training	1,600	Maint./Mgmt. Training	1,600
	UPCS Inspection Services	500	UPCS Inspection Services	500
	Telecom/Computer/Security Cameras	9,000	Telecom/Computer/Security Cameras	9,000
	Resident Business Development	500	Resident Business Development	500
	HVAC Technical & Equipment	500	HVAC Technical & Equipment	1,500
	Long Term Asset Mgmt. Plan	1,000	Long Term Asset Mgmt. Plan	1,000
	Energy Audit	1,000	**1408 Subtotal**	**44,900**
	1408 Subtotal	**44,900**		
	A & E Fees	10,000	A & E Fees	10,000
	Tech. Service Long Term Asset Mgmt. Plan	500	Tech. Service Long Term Asset Mgmt. Plan	500
	1430 Subtotal	**10,500**	**1430 Subtotal**	**10,500**
	Neighborhood Appearance	8,000	Neighborhood Appearance	8,000
	Landscaping	8,000	Landscaping	8,000
	Sidewalks/Alleys/Parking Lots	1,000	Sidewalks/Alleys/Parking Lots	1,000
	Fence Repairs	1,000	Fence Repairs	1,000
	Pest Control/Emergency Extermination	1,000	Pest Control/Emergency Extermination	1,000
	Playground Improvements	1,000	Playground Improvements	1,000
	1450 Subtotal	**20,000**	**1450 Subtotal**	**20,000**
	Refrigerators	4,000	Refrigerators	4,000
	Dumpster Repairs	500	Dumpster Repairs	500
	ADA Modifications	500	ADA Modifications	500
	Emergency Mold Abatement	500	Emergency Mold Abatement	500
	HVAC Equipment	500	HVAC Equipment	500
	1465 Subtotal	**6,000**	**1465 Subtotal**	**6,000**

	Subtotal of Estimated Cost	$ 81,400	Subtotal of Estimated Cost	$ 81,400

1/12/10

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

PHA Name/Number Kingsport Housing and Redevelopment Authority (TN006) HH/DT AMP 3			Locality (City/County & State) Kingsport/Sullivan, Tennessee		☒ **Original 5-Year Plan** ☐ **Revision No:**	
A.	Development Number and Name DT/HH AMP 3	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	151,000	198,004	106,000	81,004
C.	Management Improvements		45,700	45,700	45,700	45,700
D.	PHA-Wide Non-dwelling Structures and Equipment		14,000	4,000	17,000	64,000
E.	Administration		-	-	-	-
F.	Other		10,500	10,500	10,500	10,500
G.	Operations		-	-	-	-
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		221,200	259,004	179,200	201,204
L.	Total Non-CFP Funds					
M.	Grand Total		221,200	259,004	179,200	201,204

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 - FFY 2011			Work Statement for Year: 3 - FFY 2012		
	Development Number/Name HH/DT AMP 3 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name TN006 Overall General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-7 Dogwood Terrace**			**6-7 Dogwood Terrace**		
Annual	Replace Water Meter Covers & Cut-Off Valves		50,000	Replace Roofing & Guttering		128,004
Statement	Wall/Floor/Ceiling Repair		5,000	Repair/Replace Bath Tubs		14,000
	6-9 Holly Hills			Wall/Floor/Ceiling Repairs		1,000
	Replace Water Meter Covers & Cut-Off Valves		50,000	**6-9 Holly Hills**		
	Replace HVAC		15,000	Repair/Replace Bath Tubs		28,000
	Wall/Floor/Ceiling Repair		5,000	Wall/Floor/Ceiling Repairs		1,000
	1460 Subtotal		**125.000**	**1460 Subtotal**		**172,004**
	Community Bldg & Offices Expansions/Renovations/Needs			**Com. Bldgs & Offices Expansions/Renovations/Unexpected Needs**		
	6-7 Dogwood Apartments		1,000	6-7 Dogwood Terrace		1,000
	6-9 Holly Hills		1,000	6-9 Holly Hills		1,000
	6-9 Admin Bldg.- Main Office		2,000	6-9 Administration Building - Main Office		2,000
	Replace Dumpster Surrounds			**1470 Subtotal**		**4,000**
	6-7 Dogwood Terrace		5,000			
	6—9 Holly Hills		5,000			
	1470 Subtotal		**14,000**			
	Subtotal of Estimated Cost		$ 139,000	Subtotal of Estimated Cost	$ 176,004	

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013			Work Statement for Year: 5 FFY 2014		
	Development Number/Name HH/DT AMP 3 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-7 Dogwood Terrace**			**6-7 Dogwood Terrace**		
Annual	Replace Storm Doors		5,000	Install Hard-Wired Smoke Detectors		5,004
Statement	Repair Interior Doors		5,000	Wall/Floor/Ceiling Repairs		10,000
	Replace Vinyl Siding (Porches, Gables, etc)		25,000	**6-9 Holly Hills**		
	Wall/Floor/Ceiling Repairs		5,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	6-9 Holly Hills			Install Hard-Wired Smoke Detectors		5,000
	Replace Storm Doors		5,000	Wall/Floor/Ceiling Repairs		10,000
	Repair Interior Doors		5,000	**1460 Subtotal**		**55,004**
	Replace Vinyl Siding (Porches, Gables, etc)		25,000			
	Wall/Floor/Ceiling Repairs		5,000			
	1460 Subtotal		**80,000**	**Community Bldgs & Offices (Expansions/Renovations/Unexpected Needs)**		
				6-7 Dogwood Terrace		1,000
	Community Bldg's & Offices Expansions/Renovations/ Unexpected Needs			6-9 Holly Hills		1,000
	6-7 Dogwood Terrace		1,000	6-9 Administration Bldg (Main Office)		2,000
	6-9 Holly Hills		1,000	**Replace Floor Tile**		
	6-9 Adm. Bldg. – Main Office		2,000	6-7 Dogwood Com. Bldg.		10,000
	Replace Fence & Ball Court			6-9 Holly Hills Com. Bldg.		10,000
	6-7 Dogwood Community Bldg.		13,000	**Administration Bldg. Main Office**		
	1470 Subtotal		**17,000**	Replace Carpet		10,000
				Expand Parking Lot		10,000
				Replace Exterior Lighting		7,000
				Replace Window Blinds		3,000
				Pave Parking Lots		
				6-7 Dogwood Terrace		5,000
				6-9 Holly Hills		5,000
				1470 Subtotal		**64,000**
	Subtotal of Estimated Cost		$ 97,000	Subtotal of Estimated Cost		$ 119,004

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year:3 FFY 2012	
	Development Number/Name HH/DT AMP 3 General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	Vista Workers	13,400	Vista Workers	13,400
	Vista Office Supplies	1,400	Vista Office Supplies	1,400
	Resident Training	1,800	Resident Training	1,800
	Resident Initiatives Manager	14,000	Resident Initiatives Manager	14,000
	Resident Initiatives Supplies	800	Resident Initiatives Supplies	800
	Maint./Mgmt. Training	1,800	Maint./Mgmt. Training	1,800
	UPCS Inspection Services	500	UPCS Inspection Services	500
	Telecom/Computer/Security Cameras	10,000	Telecom/Computer/Security Cameras	10,000
	Resident Business Development	500	Resident Business Development	500
	HVAC Technical & Equipment	500	HVAC Technical & Equipment	500
	Long Term Asset Mgmt. Plan	1,000	Long Term Asset Mgmt. Plan	1,000
	1408 Subtotal	**45,700**	**1408 Subtotal**	**45,700**
	A & E Fees	10,000	A & E Fees	10,000
	Tech. Service Long Term Asset Mgmt. Plan	500	Tech. Service Long Term Asset Mgmt. Plan	500
	1430 Subtotal	**10,500**	**1430 Subtotal**	**10,500**
	Neighborhood Appearance	8,000	Neighborhood Appearance	8,000
	Landscaping	8,000	Landscaping	8,000
	Sidewalks/Alleys/Parking Lots	1,000	Sidewalks/Alleys/Parking Lots	1,000
	Fence Repairs	1,000	Fence Repairs	1,000
	Pest Control/Emergency Extermination	1,000	Pest Control/Emergency Extermination	1,000
	Playground Improvements	1,000	Playground Improvements	1,000
	1450 Subtotal	**20,000**	**1450 Subtotal**	**20,000**
	Refrigerators	4,000	Refrigerators	4,000
	Dumpster Repairs	500	Dumpster Repairs	500
	ADA Modifications	500	ADA Modifications	500
	Emergency Mold Abatement	500	Emergency Mold Abatement	500
	HVAC Equipment	500	HVAC Equipment	500
	1465 Subtotal	**6,000**	**1465 Subtotal**	**6,000**

	Subtotal of Estimated Cost	$ 82,200		$ 82,200

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year:5 FFY 2014	
	Development Number/Name HH/DT AMP 3 General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	Vista Workers	13,400	Vista Workers	13,400
	Vista Office Supplies	1,400	Vista Office Supplies	1,400
	Resident Training	1,800	Resident Training	1,800
	Resident Initiatives Manager	14,000	Resident Initiatives Manager	14,000
	Resident Initiatives Supplies	800	Resident Initiatives Supplies	800
	Maint./Mgmt. Training	1,800	Maint./Mgmt. Training	1,800
	UPCS Inspection Services	500	UPCS Inspection Services	500
	Telecom/Computer/Security Cameras	9,000	Telecom/Computer/Security Cameras	9,000
	Resident Business Development	500	Resident Business Development	500
	HVAC Technical & Equipment	500	HVAC Technical & Equipment	1,500
	Long Term Asset Mgmt. Plan	1,000	Long Term Asset Mgmt. Plan	1,000
	Energy Audit	1,000	**1408 Subtotal**	**45,700**
	1408 Subtotal	**45,700**	A & E Fees	10,000
	A & E Fees	10,000	Tech. Service Long Term Asset Mgmt. Plan	500
	Tech. Service Long Term Asset Mgmt. Plan	500	**1430 Subtotal**	**10,500**
	1430 Subtotal	**10,500**	Neighborhood Appearance	8,000
	Neighborhood Appearance	8,000	Landscaping	8,000
	Landscaping	8,000	Sidewalks/Alleys/Parking Lots	1,000
	Sidewalks/Alleys/Parking Lots	1,000	Fence Repairs	1,000
	Fence Repairs	1,000	Pest Control/Emergency Extermination	1,000
	Pest Control/Emergency Extermination	1,000	Playground Improvements	1,000
	Playground Improvements	1,000	**1450 Subtotal**	**20,000**
	1450 Subtotal	**20,000**	Refrigerators	4,000
	Refrigerators	4,000	Dumpster Repairs	500
	Dumpster Repairs	500	ADA Modifications	500
	ADA Modifications	500	Emergency Mold Abatement	500
	Emergency Mold Abatement	500	HVAC Equipment	500
	HVAC Equipment	500	**1465 Subtotal**	**6,000**
	1465 Subtotal	**6,000**		
	Subtotal of Estimated Cost	$ 82,200	Subtotal of Estimated Cost	$ 82,200

1/12/10

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

Part I: Summary

PHA Name/Number Kingsport Housing and Redevelopment Authority (TN006)			Locality (City/County & State) Kingsport/Sullivan, Tennessee		☒Original 5-Year Plan ☐Revision No:	
A.	Development Number and Name TN006 Overall	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	392,404	417,404	319,404	322,404
C.	Management Improvements		135,500	135,500	135,500	135,500
D.	PHA-Wide Non-dwelling Structures and Equipment		56,400	31,400	129,400	126,400
E.	Administration		87,972	87,972	87,972	87,972
F.	Other		31,500	31,500	31,500	31,500
G.	Operations		175,944	175,944	175,944	175,944
H.	Demolition					
I.	Development		96,751	96,751	96,751	96,751
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		976,471	976,471	976,471	976,471
L.	Total Non-CFP Funds					
M.	Grand Total		976,471	976,471	976,471	976,471

1/12/10

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 - FFY 2011			Work Statement for Year: 3 - FFY 2012		
	Development Number/Name TN006 Overall General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name TN006 Overall General Description of Major Work Categories	Quantity	Estimated Cost
See	**6-1 Lee Apartments**			**6-1 Lee Apartments**		
Annual	Replace HVAC		75,400	Replace Storm Doors		25,000
Statement	Wall/Floor/Ceiling Repair		5,000	Repair/Replace Bath Tubs		39,000
	6-4 Cloud Apartments			Wall/Floor/Ceiling Repairs		1,000
	Replace HVAC		103,400	**6-4 Cloud Apartments**		
	Wall/Floor/Ceiling Repair		5,000	Replace Storm Doors		41,400
	6-7 Dogwood Terrace			Repair/Replace Bath Tubs		39,000
	Replace Water Meter Covers & Cut-Off Valves		50,000	Wall/Floor/Ceiling Repairs		1,000
	Wall/Floor/Ceiling Repair		5,000	**6-7 Dogwood Terrace**		
	6-9 Holly Hills			Replace Roofing & Guttering		128,004
	Replace Water Meter Covers & Cut-Off Valves		50,000	Repair/Replace Bath Tubs		14,000
	Replace HVAC		15,000	Wall/Floor/Ceiling Repairs		1,000
	Wall/Floor/Ceiling Repair		5,000	**6-9 Holly Hills**		
	6-11 Tiffany Court			Repair/Replace Bath Tubs		28,000
	Wall/Floor/Ceiling Repair		1,000	Wall/Floor/Ceiling Repairs		1,000
	1460 Subtotal		**314,404**	**6-11 Tiffany Court**		
	Community Bldg & Offices Expansions/Renovations/Needs			Replace Rear Decks		20,000
	6-1 Lee Apartments		1,000	Wall/Floor/Ceiling Repairs		1,000
	6-4 Cloud Apartments		1,000	**1460 Subtotal**		**340,204**
	6-7 Dogwood Apartments		1,000	**Com. Bldgs & Offices Expansions/Renovations/Unexpected Needs**		
	6-9 Holly Hills		1,000	6-1 Lee Apartments		1,000
	6-9 Admin Bldg.- Main Office		2,000	6-4 Cloud Apartments		1,000
	Replace Dumpster Surrounds			6-7 Dogwood Terrace		1,000
	6-1 Lee Apartments		5,000	6-9 Holly Hills		1,000
	6-7 Dogwood Terrace		5,000	6-9 Administration Building -Main Office		2,000
	6-4 Cloud Apartments		5,000	**1470 Subtotal**		**6,000**
	6—9 Holly Hills		5,000	**1475 Maint./Mgmt. Vehicle**		**25,400**
	6-11 Tiffany Court		5,000			
	1470 Subtotal		**31,000**			
	1475 Maint./Mgmt. Vehicle		**25,400**			
	Subtotal of Estimated Cost		$ 370,804	Subtotal of Estimated Cost	$ 371,604	

Part II: Supporting Pages – Physical Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013			Work Statement for Year: 5 FFY 2014		
	Development Number/Name TN006 Overall General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	**6-1 Lee Apartments**			**6-1 Lee Apartments**		
	Replace Storm Doors		5,000	Replace Water Meter Covers, Enclosures & Main Cut-Off Valves		50,000
	Repair Interior Doors		5,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	Replace Vinyl Siding (Porches, Gables, etc)		25,000	Install Hard-Wired Smoke Detectors		5,000
	Wall/Floor/Ceiling Repairs		5,000	Wall/Floor/Ceiling Repairs		10,000
	6-4 Cloud Apartments			**6-4 Cloud Apartments**		
	Replace Storm Doors		5,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	Repair Interior Doors		5,000	Install Hard-Wired Smoke Detectors		7,000
	Replace Vinyl Siding (Porches, Gables, etc)		84,404	Wall/Floor/Ceiling Repairs		28,000
	Wall/Floor/Ceiling Repairs		5,000	**6-7 Dogwood Terrace**		
	6-7 Dogwood Terrace			Install Hard-Wired Smoke Detectors		5,004
	Replace Storm Doors		5,000	Wall/Floor/Ceiling Repairs		10,000
	Repair Interior Doors		5,000	**6-9 Holly Hills**		
	Replace Vinyl Siding (Porches, Gables, etc)		25,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	Wall/Floor/Ceiling Repairs		5,000	Install Hard-Wired Smoke Detectors		5,000
	6-9 Holly Hills			Wall/Floor/Ceiling Repairs		10,000
	Replace Storm Doors		5,000	**6-11 Tiffany Court**		
	Repair Interior Doors		5,000	Repair Exterior Water Lines & Main Cut-Off Valves		25,000
	Replace Vinyl Siding (Porches, Gables, etc)		25,000	Install Hard-Wired Smoke Detectors		5,000
	Wall/Floor/Ceiling Repairs		5,000	Wall/Floor/Ceiling Repairs		9,400
	6-11 Tiffany Court			**1460 Subtotal**		**244,404**
	Replace Storm Doors		2,000	**Community Bldgs & Offices (Expansions/Renovations/Unexpected Needs)**		
	Repair Interior Doors		5,000	6-1 Lee Apartments		1,000
	Replace Vinyl Siding (Porches, Gables, etc)		10,000	6-4 Cloud Apartments		1,000
	Wall/Floor/Ceiling Repairs		5,000	6-7 Dogwood Terrace		1,000
	1460 Subtotal		**241,404**	6-9 Holly Hills		1,000
	Community Bldg's & Offices Expansions/Renovations/ Unexpected Needs			6-9 Administration Bldg (Main Office)		2,000
	6-1 Lee Apartments		1,000	**Replace Floor Tile**		
	6-4 Cloud Apartments		1,000	6-1 Lee Com. Bldg.		10,000

	6-7 Dogwood Terrace		1,000	6-4 Cloud Com. Bldg.		10,000
	6-9 Holly Hills		1,000	6-7 Dogwood Com. Bldg.		10,000
	6-9 Adm. Bldg. – Main Office		2,000	6-9 Holly Hills Com. Bldg.		10,000
	Replace Fence & Ball Court			**Administration Bldg. Main Office**		
	6-7 Dogwood Community Bldg.		13,000	Replace Carpet		10,000
	Relocate Pic-Nic Shelter			Expand Parking Lot		10,000
	6-4 Cloud Apartments		25,000	Replace Exterior Lighting		7,000
	Expand Storage Bldg & Parking Lot			Replace Window Blinds		3,000
	6-4 Cloud Maintenance		50,000	**Pave Parking Lots**		
	Replace Fence			6-1 Lee Apartments		5,000
	6-4 Cloud Apts. (Behind Gym &Alley)		10,000	6-4 Cloud Apartments		5,000
	1470 Subtotal		**104,000**	6-7 Dogwood Terrace		5,000
	1475 Maint./Mgmt. Vehicles		**25,400**	6-9 Holly Hills		5,000
				Tiffany Court		5,000
				1470 Subtotal		**101,000**
				1475 Maint./Mgmt. Vehicle		**25,400**
	Subtotal of Estimated Cost		$370,804	Subtotal of Estimated Cost		$ 370,800

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year:3 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	**1406 Operations**	**175,944**	**1406 Operations**	**175,944**
Annual	Vista Workers	40,000	Vista Workers	40,000
Statement	Vista Office Supplies	4,000	Vista Office Supplies	4,000
	Resident Training	5,000	Resident Training	5,000
	Resident Initiatives Manager	42,000	Resident Initiatives Manager	42,000
	Resident Initiatives Supplies	2,000	Resident Initiatives Supplies	2,000
	Maint./Mgmt. Training	5,000	Maint./Mgmt. Training	5,000
	UPCS Inspection Services	1,500	UPCS Inspection Services	1,500
	Telecom/Computer/Security Cameras	30,000	Telecom/Computer/Security Cameras	30,000
	Resident Business Development	1,500	Resident Business Development	1,500
	HVAC Technical & Equipment	1,500	HVAC Technical & Equipment	1,500
	Long Term Asset Mgmt. Plan	3,000	Long Term Asset Mgmt. Plan	3,000
	1408 Subtotal	**135,500**	**1408**	**135,500**
	1410 Administration	**87,972**	**1410 Administration**	**87,972**
	A & E Fees	30,000	A & E Fees	30,000
	Tech. Service Long Term Asset Mgmt. Plan	1,500	Tech. Service Long Term AssetMgmt. Plan	1,500
	1430 Subtotal	**31,500**	**1430**	**31,500**
	Neighborhood Appearance	24,000	Neighborhood Appearance	24,000
	Landscaping	24,000	Landscaping	24,000
	Sidewalks/Alleys/Parking Lots	3,000	Sidewalks/Alleys/Parking Lots	3,000
	Fence Repairs	3,000	Fence Repairs	3,000
	Pest Control/Emergency Extermination	3,000	Pest Control/Emergency Extermination	3,000
	Playground Improvements	3,000	Playground Improvements	3,000
	1450 Subtotal	**60,000**	**1450**	**60,000**
	Refrigerators	12,000	Refrigerators	12,000
	Dumpster Repairs	1,500	Dumpster Repairs	1,500
	ADA Modifications	1,500	ADA Modifications	1,500
	Emergency Mold Abatement	1,500	Emergency Mold Abatement	1,500
	HVAC Equipment	1,500	HVAC Equipment	1,500
	1465	**18,000**	**1465**	**18,000**
	1499 Replacement Housing Factor	**96,751**	**1499 Replacement Housing Factor**	**96,751**
	Subtotal of Estimated Cost	$ 605,677	Subtotal of Estimated Cost	$ 605,677

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year:5 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	**1406 Operations**	**175,944**	**1406 Operations**	**175,944**
Annual	Vista Workers	40,000	Vista Workers	40,000
Statement	Vista Office Supplies	4,000	Vista Office Supplies	4,000
	Resident Training	5,000	Resident Training	5,000
	Resident Initiatives Manager	42,000	Resident Initiatives Manager	42,000
	Resident Initiatives Supplies	2,000	Resident Initiatives Supplies	2,000
	Maint./Mgmt. Training	5,000	Maint./Mgmt. Training	5,000
	UPCS Inspection Services	1,500	UPCS Inspection Services	1,500
	Telecom/Computer/Security Cameras	27,000	Telecom/Computer/Security Cameras	27,000
	Resident Business Development	1,500	Resident Business Development	1,500
	HVAC Technical & Equipment	1,500	HVAC Technical & Equipment	4,500
	Long Term Asset Mgmt. Plan	3,000	Long Term Asset Mgmt. Plan	3,000
	Energy Audit	3,000	**1408 Subtotal**	**135,500**
	1408 Subtotal	**135,500**	**1410 Administration**	**87,972**
	1410 Administration	**87,972**	A & E Fees	30,000
	A & E Fees	30,000	Tech. Service Long Term Asset Mgmt. Plan	1,500
	Tech. Service Long Term Asset Mgmt. Plan	1,500	**1430**	**31,500**
	1430	**31,500**	Neighborhood Appearance	24,000
	Neighborhood Appearance	24,000	Landscaping	24,000
	Landscaping	24,000	Sidewalks/Alleys/Parking Lots	3,000
	Sidewalks/Alleys/Parking Lots	3,000	Fence Repairs	3,000
	Fence Repairs	3,000	Pest Control/Emergency Extermination	3,000
	Pest Control/Emergency Extermination	3,000	Playground Improvements	3,000
	Playground Improvements	3,000	**1450 Subtotal**	**60,000**
	1450 Subtotal	**60,000**	Refrigerators	12,000
	Refrigerators	12,000	Dumpster Repairs	1,500
	Dumpster Repairs	1,500	ADA Modifications	1,500
	ADA Modifications	1,500	Emergency Mold Abatement	1,500
	Emergency Mold Abatement	1,500	HVAC Equipment	1,500
	HVAC Equipment	1,500	**1465 Subtotal**	**18,000**
	1465 Subtotal	**18,000**	**1499 Replacement Housing Factor**	**96,751**
	1499 Replacement Housing Factor	**96,751**		
	Subtotal of Estimated Cost	$ 605,677	Subtotal of Estimated Cost	$ 605,677