

PHA 5-Year and Annual Plan – 2010 Final Millington Housing Authority	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Millington Housing Authority</u> PHA Code: <u>TN045</u> PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>89</u> Number of HCV units: <u>NA</u>				
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) Not Applicable				
	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: Not Applicable				
	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: The Mission of the MHA is the same as that of the Department of Housing and Urban Development.: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.				
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. MHA Goal: Improve the quality of assisted housing. Objectives: <ul style="list-style-type: none"> • Continue the MHA's ongoing renovation and modernization of public housing units. MHA Goal: Support the requirements of the Violence Against Women Act (VAWA) Objectives: <ul style="list-style-type: none"> • Implement policies and procedures that support the VAWA. • Continue VAWA resident awareness efforts. See ATTACHMENT 2 for progress in meeting the goals and objectives described in the previous 5-Year Agency Plan.				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <ul style="list-style-type: none"> • Financial Resources Element: the MHA Financial Statement including PHA Operating and Capital Fund, Rental Income, Investments etc. change on an annual basis. The MHA maintains this information on file and makes it available for HUD and public review at the MHA Administration Office. • Fiscal Year Audit: The MHA's most recent Fiscal Year Audit was completed in December, 2009 and is on file at the MHA Administration Office and is available for HUD and public review. (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. Millington Housing Authority Administration Office				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> The MHA is not proposing any new dwellings and/or structures, demolition, disposition and/or acquisition.				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.				

8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>See attached form HUD-50075.1 for FY2010 and all open CFP Grants.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See attached form HUD-50075.2 for 5-Year CFP</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. Not Applicable</p>
9.0	<p>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.</p> <p>Not required for submittal per PIH Notice 2008-41</p>
9.1	<p>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.</p> <p>Not required for submittal per PIH Notice 2008-41</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(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.</p> <p>See ATTACHMENT 2</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>See ATTACHMENT 3</p>
11.0	<p>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.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(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.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

ATTACHMENTS:

1). Resident Advisory Board (RAB) and Public Hearing Comments:

The Millington Housing Authority staff discussed the FY 2010 5-Year and Annual Agency Plan, and the detailed list of proposed capital fund improvements with the MHA Resident Advisory Board (RAB) members present at the November 9, 2009 RAB meeting and at a Public Hearing conducted on January 11, 2010. The RAB supported the proposed improvements were needed. The following CFP work-related item suggestions and/or comments were made by the RAB at that meeting:

- City sidewalks are rough and difficult to travel in power wheel chairs - *MHA Response: MHA will contact the City to make any necessary improvements that will assist MHA residents with mobility.*
- The installation of ceiling fans was suggested- *MHA Response: MHA will evaluate needs and consider for insertion into future Five-Year CFP.*
- Bathroom exhaust fans are needed - *MHA Response: The MHA has begun the installation of exhaust fans as a component of the HVAC installation work.*
- Water-saving commodes were suggested- *MHA Response: MHA will evaluate needs and consider item for insertion into a future CFP budget.*
- Dishwashers and garbage disposals were suggested- *MHA Response: MHA will evaluate the effect on maintenance, as well as the availability of future funding. MHA will consider for insertion into a 5-Year CFP budget if determined to be feasible.*
- Wall and ceiling cracks were noted in some units- *MHA Response: MHA will make any necessary repairs and will evaluate the nature and extent of the problem.*
- Mold Problems- *MHA Response: MHA will make any necessary repairs and will evaluate the nature and extent of the problem.*
- Can residents get a different color floor tile- *MHA Response: MHA will consider color change at such time floors are scheduled for replacement.*
- Another playground was suggested at the west end of Bill Knight Avenue- *MHA Response: MHA will evaluate needs and consider item for insertion into a future CFP budget.*
- Some entry doors need weather stripping- *MHA Response: MHA will make any necessary repairs and will evaluate the need to address all doors.*

2). Progress in Meeting Goals and Objectives Listed in Previous 5-Year Agency Plan

1. **Goal – Increase customer satisfaction:** We keep in touch with our residents and keep them informed of PHA activities through a monthly letter and calendar of events.
2. **Goal – Continue to maintain and modernize public housing:** Following the comprehensive modernization all of our public housing units between in the late 1990s, we continue to evaluate our modernization needs and make improvements as needed as funded by the annual Capital Improvements Program. Recent major improvements have included roofing replacement and the installation of new HVAC units.
3. **Goal – Maintain ongoing security program:** We continue to maintain our on-site police precinct. The Millington Police Force continues the increased patrols in our neighborhoods that have resulted in numerous arrests. We monitor our security lighting and the Emergency 911 light fixtures on all of our dwelling units.
4. **Goal – Improve recreation opportunities for our public housing residents:** We continue our coordination efforts with the City to maintain the playfield and playground areas adjacent to our Development No. TN045-001(B). We also continue to maintain and update the PHA owned playgrounds. We make a scholarship donation to the local YMCA that assists our residents.

3). Substantial Deviation and Significant Amendment:

a. Substantial Deviation from the 5-Year Plan

1. Significant changes to rent or admissions policies or organization of the waiting list.
2. Addition of non-emergency work, items (items not included in the Annual Statement or 5-Year Action Plan) exceeding 10% of the total grant or a change in the use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition, disposition, designation, homeownership programs or conversion to voucher activities.
4. Moving work items between the CFP and PHDEP budgets is not considered an amendment or deviation.

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

b. Significant Amendment or Modification to the Annual Plan

1. Significant changes to rent or admissions policies or organization of the waiting list.
2. Addition of non-emergency work, items (items not included in the Annual Statement or 5-Year Action Plan) exceeding 10% of the total grant or a change in the use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition, disposition, designation, homeownership programs or conversion to voucher activities.
4. Moving work items between the CFP and PHDEP budgets is not considered an amendment or deviation.

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

4). Challenged Elements:

The MHA does not have any challenged Elements.

5). Violence Against Women Act Policy:

The Millington Housing Authority adopted the following VAWA Policy on November 24, 2008. (See Policy on next page)

BACKGROUND

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

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

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

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

DEFINITIONS

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

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

Dating Violence: Violence committed by a person:

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

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

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

POLICY

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

Admissions and Occupancy and Termination of Assistance

Being a victim of domestic violence, dating violence, or stalking, will not be considered by The Millington Housing Authority to be a basis for denial of assistance, or admission to public housing if the application otherwise qualifies for assistance or admission.

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

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

Rights of the Millington Housing Authority

The MHA may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant, and such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by federal, state and local law for the termination of leases, or assistance under HUD’s Public Housing Program.

Certification of Abuse and Confidentiality

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

Notification to Residents

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

Confidentiality

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

**THE MILLINGTON HOUSING AUTHORITY
NOTICE TO RESIDENTS AND APPLICANTS
REGARDING
RIGHTS UNDER THE VIOLENCE AGAINST WOMEN ACT**

The Violence Against Women Act of 2005 (VAWA) protects victims of domestic violence, dating violence and stalking. These changes affect all persons assisted under the Public Housing and Section 8 Program.

Individuals may not be denied housing assistance, terminated from Public Housing or evicted for being the victim of domestic violence, dating violence or stalking. However, the VAWA provides certain limitations and clarifications concerning your rights. In particular, you should know that nothing contained in VAWA:

1. Prevents the Housing Authority from terminating tenancy and evicting for any violation of a lease that is not based on a matter involving domestic violence, dating violence, or stalking for which VAWA provides protections as described above. However, The MHA may not in such cases apply any stricter standard to you than to other tenants.
2. Prevents The MHA from terminating tenancy and evicting where the housing authority can demonstrate “an actual and imminent threat to other tenants or those employed at or providing service to the property.” Where such a threat can be demonstrated by The MHA, you will not be protected from eviction by VAWA.
3. Limits the ability of The MHA to comply with court orders addressing rights of access to or control of the property. This includes civil protection orders entered for the protection of the victim or relating to the distribution or possession of property.
4. Supersedes any federal, state or local law that provides greater protections than VAWA.

VAWA also creates a new authority under federal law that allows a housing authority to evict, remove, or terminate assistance to any individual tenant or lawful occupant of public housing who engages in criminal acts of physical violence against family members or others. This may be done without evicting or taking any other action adverse to the other occupants.

If you believe that you qualify for protection under VAWA, please notify The MHA. You will be asked to provide proof of your situation by filling out Form HUD 50066 and/or providing a copy of an order of protection, police or court report or a signed document from a victim service provider, medical provider or attorney who has provided a service related to the violence. You must submit this information within 14 business days of The MHA’s request for it. Protection may not apply if the documentation is provided after 14 days. Form HUD 50066 will be provided at the office.

The Millington Housing Authority will make every effort to correspond with victims in a way that will not put them at greater risk. The MHA may request that applicants or residents requesting VAWA protection come to the office to submit information. All information will be kept confidential by The Millington Housing Authority and will not be shared or disclosed by the Housing Authority without your consent except as noted in the Confidentiality clause of the VAWA Policy.

You may request a copy of The MHA’s written policy concerning domestic violence, dating violence, and stalking from the HA’s main office. Please note that the written policy contains, among other things, definitions of the terms “domestic violence”, “dating violence”, “stalking”, and “immediate family”.

Other resources that may be of assistance include the National Domestic Violence Hotline (1-800-799-SAFE), and the National Domestic Violence Hotline website <http://www.ndvh.org>.

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, OR STALKING

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

OMB Approval No. 2577-0249
Exp. (11/30/2010)

Public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. Information provided is to be used by PHAs and Section 8 owners or managers to request a tenant to certify that the individual is a victim of domestic violence, dating violence or stalking. The information is subject to the confidentiality requirements of the HUD Reform Legislation. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Purpose of Form: The Violence Against Women and Justice Department Reauthorization Act of 2005 protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

Use of Form: A family member must complete and submit this certification, or the information that may be provided in lieu of the certification, within 14 business days of receiving the written request for this certification by the PHA, owner or manager. The certification or alternate documentation must be returned to the person and address specified in the written request for the certification. If the family member has not provided the requested certification or the information that may be provided in lieu of the certification by the 14th business day or any extension of the date provided by the PHA, manager and owner, none of the protections afforded to victims of domestic violence, dating violence or stalking (collectively "domestic violence") under the Section 8 or public housing programs apply.

Note that a family member may provide, in lieu of this certification (or in addition to it):

- (1) A Federal, State, tribal, territorial, or local police or court record; or
- (2) Documentation signed by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence or stalking, or the effects of abuse, in which the professional attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation.

TO BE COMPLETED BY THE VICTIM OF DOMESTIC VIOLENCE:

Date Written Request Received By Family Member: _____

Name of the Victim of Domestic Violence: _____

Name(s) of other family members listed on the lease _____

Name of the abuser: _____

Relationship to Victim: _____

Date the incident of domestic violence occurred: _____

Time: _____

Location of Incident: _____

Name of victim: _____

Description of Incident:

[INSERT TEXT LINES HERE]

I hereby certify that the information that I have provided is true and correct and I believe that, based on the information I have provided, that I am a victim of domestic violence, dating violence or stalking and that the incident(s) in question are bona fide incidents of such actual or threatened abuse. I acknowledge that submission of false information relating to program eligibility is a basis for termination of assistance or eviction.

Signature _____ Executed on (Date) _____

All information provided to a PHA, owner or manager relating to the incident(s) of domestic violence, including the fact that an individual is a victim of domestic violence shall be retained in confidence by an owner and shall neither be entered into any shared database nor provided to any related entity, except to the extent that such disclosure is (i) requested or consented to by the individual in writing; (ii) required for use in an eviction proceeding or termination of assistance; or (iii) otherwise required by applicable law.

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

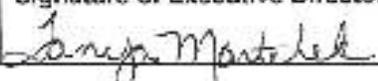
Part I: Summary

PHA Name: Millington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04550110 Replacement Housing Factor Grant No: Date of CFFP: _____	FFY of Grant: 2010 FFY of Grant Approval:
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Original Annual Statement **Reserve for Disasters/ Emergencies** **Revised Annual Statement (revision no:)**
 Performance and Evaluation Report for Period Ending: **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	-			
2	1406 Operations	\$10,000.00			
3	1408 Management Improvements	\$15,000.00			
4	1410 Administration	-			
5	1411 Audit	-			
6	1415 Liquidated Damages	-			
7	1430 Fees and Costs	\$20,000.00			
8	1440 Site Acquisition	-			
9	1450 Site Improvement	\$5,000.00			
10	1460 Dwelling Structures	\$60,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable	\$5,000.00			
12	1470 Nondwelling Structures	-			
13	1475 Nondwelling Equipment	\$30,000.00			
14	1485 Demolition	-			
15	1490 Replacement Reserve	-			
16	1492 Moving to Work Demonstration	-			
17	1495.1 Relocation Costs	\$5,000.00			

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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PIA Name: Millington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P04550110 Replacement Housing Factor Grant No:			Federal FY of Grant: 2010
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:				<input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
18	1498 Development Activities	-			
19	1501 Collateralization or Debt Service	-			
20	1502 Contingency	-			
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$150,000.00			
22	Amount of line 21 Related to LBP Activities	-			
23	Amount of line 21 Related to Section 504 compliance	-			
24	Amount of line 21 Related to Security – Soft Costs	-			
25	Amount of Line 21 Related to Security – Hard Costs	-			
26	Amount of line 21 Related to Energy Conservation Measures	-			
Signature of Executive Director		Date		Signature of Public Housing Director	
		1/11/10			

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

PHA Name: Millington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04550109 Replacement Housing Factor Grant No: Date of CFFP: _____	FFY of Grant: 2009 FFY of Grant Approval:
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$48,494.00	\$44,794.00	\$44,794.00	\$24,562.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$65,000.00	\$103,700.00	\$103,700.00	\$0.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$35,000.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00

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

PIA Name: Millington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04550109 Replacement Housing Factor Grant No:	Federal FY of Grant: 2009
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Original Annual Statement
 Reserve for Disasters/ Emergencies
 Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$148,494.00	\$148,494.00	\$148,494.00	\$26,571.00
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
26	Amount of line 21 Related to Energy Conservation Measures	\$35,000.00	\$103,700.00	\$103,700.00	\$0.00

Signature of Executive Director <i>Lanija Martel</i>	Date 1/11/10	Signature of Public Housing Director	Date
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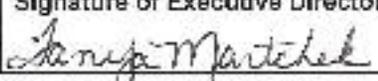
Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part I: Summary

PHA Name: Millington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43S04550109 ARRA Replacement Housing Factor Grant No: Date of CFFP: _____	FFY of Grant: 2009 ARRA FFY of Grant Approval:
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 1)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$0.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$0.00	\$0.00	\$0.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$37,000.00	\$0.00	\$0.00	\$0.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$151,000.00	\$188,570.00	\$188,385.00	\$22,919.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00

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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PIA Name: Millington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43S04550109 ARRA Replacement Housing Factor Grant No:			Federal FY of Grant: 2009 ARRA
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$188,570.00	\$188,570.00	\$188,385.00	\$22,919.00
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of Line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 21 Related to Energy Conservation Measures	\$100,000.00	\$120,645.00	\$120,460.00	\$0.00
Signature of Executive Director		Signature of Public Housing Director		Date	
				Date	
		Date			
		1/11/10			

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

PHA Name: Millington Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN43P04550108 Replacement Housing Factor Grant No: Date of CFFP: _____	FFY of Grant: 2008 FFY of Grant Approval:
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: 3)
 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	\$0.00	\$0.00	\$0.00	\$0.00
2	1406 Operations	\$1,973.00	\$0.00	\$0.00	\$0.00
3	1408 Management Improvements	\$0.00	\$0.00	\$0.00	\$0.00
4	1410 Administration	\$0.00	\$635.00	\$635.00	\$635.00
5	1411 Audit	\$0.00	\$0.00	\$0.00	\$0.00
6	1415 Liquidated Damages	\$0.00	\$0.00	\$0.00	\$0.00
7	1430 Fees and Costs	\$30,000.00	\$25,338.00	\$25,338.00	\$23,813.00
8	1440 Site Acquisition	\$0.00	\$0.00	\$0.00	\$0.00
9	1450 Site Improvement	\$0.00	\$0.00	\$0.00	\$0.00
10	1460 Dwelling Structures	\$117,000.00	\$123,000.00	\$123,000.00	\$92,386.00
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00	\$0.00	\$0.00	\$0.00
12	1470 Nondwelling Structures	\$0.00	\$0.00	\$0.00	\$0.00
13	1475 Nondwelling Equipment	\$0.00	\$0.00	\$0.00	\$0.00
14	1485 Demolition	\$0.00	\$0.00	\$0.00	\$0.00
15	1490 Replacement Reserve	\$0.00	\$0.00	\$0.00	\$0.00
16	1492 Moving to Work Demonstration	\$0.00	\$0.00	\$0.00	\$0.00
17	1495.1 Relocation Costs	\$0.00	\$0.00	\$0.00	\$0.00

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 and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Millington Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P04550108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
18	1499 Development Activities	\$0.00	\$0.00	\$0.00	\$0.00
19	1501 Collateralization or Debt Service	\$0.00	\$0.00	\$0.00	\$0.00
20	1502 Contingency	\$0.00	\$0.00	\$0.00	\$0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$148,973.00	\$148,973.00	\$148,973.00	\$118,841.00
22	Amount of line 21 Related to LBP Activities	\$0.00	\$0.00	\$0.00	\$0.00
23	Amount of line 21 Related to Section 504 compliance	\$0.00	\$0.00	\$0.00	\$0.00
24	Amount of line 21 Related to Security – Soft Costs	\$0.00	\$0.00	\$0.00	\$0.00
25	Amount of line 21 Related to Security – Hard Costs	\$0.00	\$0.00	\$0.00	\$0.00
28	Amount of line 21 Related to Energy Conservation Measures	\$17,000.00	\$0.00	\$0.00	\$0.00
Signature of Executive Director		Signature of Public Housing Director		Date	
				1/11/10	

Capital Fund Program – Five Year Action Plan

U.S. Department of Housing and Urban Development
OFFICE OF PUBLIC AND INDIAN HOUSING

Expires 4/30/2011

PART I: SUMMARY						
PHA Name/Number Millington Housing Authority / TN045		Locality (City/County & State) Millington / Shelby Co., Tennessee			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	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	\$135,000.00	\$135,000.00	\$135,000.00	\$135,000.00
C.	Management Improvements		\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment		-	-	-	-
E.	ADMINISTRATION		-	-	-	-
F.	Other		-	-	-	-
G.	Operations		-	-	-	-
H.	Demolition		-	-	-	-
I.	Development		-	-	-	-
J.	Capital Fund Financing – Debt Service		NA	NA	NA	NA
K.	Total CFP Funds		\$150,000.00	\$150,000.00	\$150,000.00	\$150,000.00
L.	Total Non-CFP Funds		\$0.00	\$0.00	\$0.00	\$0.00
M.	Grand Total		\$150,000.00	\$150,000.00	\$150,000.00	\$150,000.00

