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| PHA 5-Year and Annual Plan – 2010 TN071v01 - Hartsville Final Copy | 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>Hartsville Housing Authority</u> PHA Code: <u>TN071</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>07/2010</u> | | | | |
| 2.0 | Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>34</u> Number of HCV units: <u>0</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 |
| | PHA 1: Not Applicable | | | | PH HCV |
| | 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 HHA 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. See ATTACHMENT 2 | | | | |
| 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 HHA Financial Statement including PHA Operating and Capital Fund, Rental Income, Investments etc. change on an annual basis. The HHA maintains this information on file and makes it available for HUD and public review at the HHA Administration Office • Fiscal Year Audit: The HHA's most recent Audit is on file at the HHA 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. Hartsville 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 HHA is not proposing any of the above-listed activities. | | | | |
| 8.0 | Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. | | | | |

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| 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 FY 2010 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> |

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| 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 3</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 4</p> |

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| 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> |
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ATTACHMENTS:

1. Resident Advisory Board (RAB) Comments:

The Hartsville Housing Authority staff discussed the FY 2010 5-Year and Annual Agency Plan and the detailed list of proposed FY 2010 and 5-Year capital fund improvements with the MHA Resident Advisory Board (RAB) members present at the February 22, 2010 RAB meeting and at a Public Hearing conducted on March 29, 2010. The RAB supported the proposed improvements.

2. Goals and Objectives:

HHA Goal: Improve the quality of assisted housing

Objectives:

- Renovate or modernize public housing units
- Maintain the status of a high performer

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

Objectives:

- Increase the number and percentage of employed persons in assisted families

HHA Goal: Ensure equal opportunity and affirmatively further fair housing.

Objectives:

- Continue ongoing efforts to ensure equal opportunity and affirmatively further fair housing

HHA Goal: Promote energy efficiency practices and products when performing rehabilitation, repair and replacement.

Objectives:

- Incorporate, when applicable, Energy Star Program qualified products and practices.

HHA Goal: Support the requirements of the Violence Against Women Act (VAWA)

Objectives:

- Implement policies and procedures that support the VAWA
- Continue VAWA resident awareness efforts

3. Progress in Meeting Goals and Objectives:

Goal – Improve the quality of assisted housing

Progress:

- The HHA is making extra efforts to keep residents better informed of HA policy and programs through frequent notices and meetings related to the Agency Plan process.
- The HHA is continually upgrading and modernizing its public housing units. With the inception of the Capital Fund Program, we are now able to better plan and implement improvements.

- The implementation of our recent capital improvements has enabled the HHA to continue with the installation of new HVAC systems/electrical upgrades and new roofs on all buildings.
- The HHA continues to maintain high performer status.

Goal – Promote self-sufficiency and asset development of assisted households

Progress:

- Under our current ACOP, we give preference to working families to help increase the number of employed persons in assisted living. The HHA also promotes adult education and GED classes.

Goal – Ensure equal opportunity and affirmatively further fair housing

Progress:

- The HHA continues to operate its public housing program to ensure equal access to all regardless of race, color, religion, national origin, sex, familial status and disability. Our inspections, maintenance and modernization programs are spread equally among all of our units within our only development.

Goal: - Promote energy efficiency practices and products when performing rehabilitation, repair and replacement.

Progress:

- The HHA installed high-efficiency HVAC units as part of the recent modernization efforts. In addition, the HHA encourages the use of CFL bulbs in all fixtures.

Goal: Support the requirements of the Violence Against Women Act (VAWA)

Progress:

- The HHA continues to implement the adopted VAWA Policy and support programs that are intended to assist victims of domestic violence, dating violence, sexual assault, or stalking.

4). Substantial Deviation and Significant Amendment:

a. Substantial Deviation from the 5-Year Plan

HHA’s definition of “Significant Amendment or Substantial Deviation” from its 5-Year and Annual Plan:

1. 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) or a change in the use of replacement reserve funds under the Capital Fund.
3. Any change with regard to demolition or disposition, designation, or 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.

b. Significant Amendment or Modification to the Annual Plan

HHA’s definition of “Significant Amendment or Substantial Deviation” from its 5-Year and Annual Plan:

4. Changes to rent or admissions policies or organization of the waiting list.

5. Addition of non-emergency work items (items not included in the Annual Statement or 5-Year Action Plan) or a change in the use of replacement reserve funds under the Capital Fund.
6. Any change with regard to demolition or disposition, designation, or 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.

5. Challenged Elements:

The HHA does not have any challenged Elements.

6. Violence Against Women Act Policy:

Adopted by Board of Commissioners on November 12, 2007; Resolution No. 252.07

HARTSVILLE 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 Hartsville HA may not in such cases apply any stricter standard to you than to other tenants.
2. Prevents the PHA 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 Hartsville HA, you will not be protected from eviction by VAWA.
3. Limits the ability of the Hartsville HA 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 other occupants.

If you believe that you qualify for protection under VAWA, please notify the PHA. 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 PHA's request for it. Protections may not apply if the documentation is provided after 14 days. Form HUD 50066 will be provided at the office.

See copy of HUD Form 50066 below.

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 (05/31/2007)

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: _____

Form HUD-5066
(11/2006)

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.

Form HUD-5066(11/2006)

| Part I: Summary | | | | | | |
|--|--|---|----------------------|--------------------------------|---|--|
| PHA Name: Hartsville Housing Authority | | Grant Type and Number Capital Fund Program Grant No: TN43P07150110 Replacement Housing Factor Grant No: Date of CFFP: _____ | | | FFY of Grant:2010 FFY of Grant Approval: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 ¹ | | |
| | | Original | Revised ² | Obligated | Expended | |
| 1 | Total non-CFP Funds | - | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) ³ | \$54,505.00 | | | | |
| 3 | 1408 Management Improvements | - | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | - | | | | |
| 5 | 1411 Audit | - | | | | |
| 6 | 1415 Liquidated Damages | - | | | | |
| 7 | 1430 Fees and Costs | - | | | | |
| 8 | 1440 Site Acquisition | - | | | | |
| 9 | 1450 Site Improvement | - | | | | |
| 10 | 1460 Dwelling Structures | - | | | | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | - | | | | |
| 12 | 1470 Non-dwelling Structures | - | | | | |
| 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 NHAII be included here

| Part I: Summary | | | | | |
|--|---|--|--------------------------------------|--|----------|
| PHA Name: Hartsville Housing Authority | | Grant Type and Number Capital Fund Program Grant No: TN43P07150110 Replacement Housing Factor Grant No: | | Federal FY of Grant: 2010 FFY OF Grant Approval: 2010 | |
| Type of Grant <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 ¹ | |
| | | Original | Revised ² | Obligated | Expended |
| 18a | 1501 Colateralization or Debt Service paid by the PHA | - | | | |
| 18b | 9000 Colateralization or Debt Service paid Via System of Direct Payment | - | | | |
| 19 | 1502 Contingency (may not exceed 5% of line 20) | - | | | |
| 20 | Amount of Annual Grant: (sum of lines 2 – 19) | \$54,505.00 | | | |
| 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 <i>Don Satterfield</i> | | Date <i>3/25/10</i> | Signature of Public Housing Director | | Date |

| Part III: Implementation Schedule for Capital Fund Program | | | | | |
|---|---|-------------------------------|---|-----------------------------|---|
| PHA Name: Hartsville Housing Authority | | | | | Federal FY 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 Expended End Date | Actual Expended End Date | |
| TN071000001 | 6/30/2012 | | 6/30/2014 | | |
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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: Hartsville Housing Authority | | Grant Type and Number Capital Fund Program Grant No: TN43P07150109 Replacement Housing Factor Grant No: Date of CFFP: _____ | | | FFY of Grant:2009 FFY of Grant Approval:2009 | |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/30/2009 <input type="checkbox"/> 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 | \$50,003.00 | | \$50,003.00 | \$50,003.00 | |
| 3 | 1408 Management Improvements | - | | - | - | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | - | | - | - | |
| 5 | 1411 Audit | - | | - | - | |
| 6 | 1415 Liquidated Damages | - | | - | - | |
| 7 | 1430 Fees and Costs | - | | - | - | |
| 8 | 1440 Site Acquisition | - | | - | - | |
| 9 | 1450 Site Improvement | - | | - | - | |
| 10 | 1460 Dwelling Structures | - | | - | - | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | - | | - | - | |
| 12 | 1470 Non-dwelling Structures | - | | - | - | |
| 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 NHAI be included here

| Part I: Summary | | | | | |
|--|--|--|--------------------------------------|--|-------------|
| PHA Name: Hartsville Housing Authority | | Grant Type and Number Capital Fund Program Grant No: YN43P07150109 Replacement Housing Factor Grant No: | | Federal FY of Grant: 2009 FFY OF Grant Approval: 2009 | |
| Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/09 <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost | |
| | | Original | Revised ² | Obligated | Expended |
| 16a | 1501 Collateralization or Debt Service paid by the PHA | - | | - | - |
| 18b | 8000 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) | \$60,003.00 | | \$50,003.00 | \$50,003.00 |
| 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 <i>Gene Settefield</i> | | Date 3/25/10 | Signature of Public Housing Director | | Date |

| Part III: Implementation Schedule for Capital Fund Program | | | | | |
|---|---|-------------------------------|---|-----------------------------|---|
| PHA Name: Hartsville Housing Authority | | | | | Federal FY of Grant: 2009 |
| 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 Expended End Date | Actual Expended End Date | |
| PHA-Wide | 6/30/2011 | 10/07/2009 | 6/30/2013 | 10/07/2009 | |
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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: Hartsville Housing Authority | | Grant Type and Number Capital Fund Program Grant No: TN43S07150109 Replacement Housing Factor Grant No: Date of CFFP: _____ | | | FFY of Grant: ARRA 2009 FFY of Grant Approval: ARRA 2009 | |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/09 <input type="checkbox"/> 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 | - | | - | - | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | - | | - | - | |
| 5 | 1411 Audit | - | | - | - | |
| 6 | 1415 Liquidated Damages | - | | - | - | |
| 7 | 1430 Fees and Costs | - | | - | - | |
| 8 | 1440 Site Acquisition | - | | - | - | |
| 9 | 1450 Site Improvement | - | | - | - | |
| 10 | 1460 Dwelling Structures | \$62,455.00 | | \$0.00 | \$0.00 | |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | - | | - | - | |
| 12 | 1470 Non-dwelling Structures | \$838.00 | | \$0.00 | \$0.00 | |
| 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 NHAI be included here

| Part I: Summary | | | | | |
|---|--|--|--------------------------------------|---|----------|
| PHA Name: <u>Hartsville Housing Authority</u> | | Grant Type and Number Capital Fund Program Grant No: <u>TN43S07150109</u> Replacement Housing Factor Grant No: _____ | | Federal FY of Grant: <u>ARRA 2008</u> FFY OF Grant Approval: <u>ARRA 2009</u> | |
| Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>12/31/09</u> <input type="checkbox"/> Final Performance and Evaluation Report | | | | | |
| Line | Summary by Development Account | Total Estimated Cost | | Total Actual Cost ¹ | |
| | | Original | Revised ² | Obligated | Expended |
| 18a | 1501 Unilateral loan or Debt Service paid by the PHA | - | - | - | - |
| 18b | 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 – 18) | \$83,293.00 | - | \$0.00 | \$0.00 |
| 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 <i>Kenn Stettenfeld</i> | | Date <i>3/25/10</i> | Signature of Public Housing Director | | Date |

| Part II: Supporting Pages | | | | | | | | |
|--|--|--|----------|----------------------|---------|--|-----------------------------|----------------|
| PHA Name: Hartsville Housing Authority | | Grant Type and Number Capital Fund Program Grant No: TN43S07150109 CFFP (Yes/No): Replacement Housing Factor Grant No: | | | | Federal FFY of Grant: ARRA 2009 | | |
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | Dev. Acct No. | Quantity | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended ² | |
| TN071-001 | Replace water heaters | 1460 | 22 DU | \$6,380.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Water heater electrical improvements | 1460 | 22 DU | \$2,640.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Mechanical improvements for capping off vent piping and gas line for water heater, kitchen stove and furnace replacement. | 1460 | 22 DU | \$1,650.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Plumbing improvements including supply lines, drain lines, access panel and misc. | 1460 | 25 DU | \$4,125.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Replace air-handling and condensing units at select dwellings. Install new electrical disconnect, conductor wire and breaker | 1460 | 12 DU | \$20,280.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Replace air-handling and convert from gas to electric. Install new electrical disconnect, conductor wire and breaker. | 1460 | 22 DU | \$12,980.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Replace air-handling unit convert from gas to electric at the HHA Office. Install new electrical disconnect, conductor wire and breaker. | 1470 | 1 Bldg. | \$838.00 | | \$0.00 | \$0.00 | |
| TN071-001 | Mechanical improvements including replacing condensing units at select units, and misc. | 1460 | 12 | \$14,400.00 | | \$0.00 | \$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.

| Part III: Implementation Schedule for Capital Fund Program | | | | | |
|---|---|-------------------------------|---|-----------------------------|---|
| PHA Name: Hartsville Housing Authority | | | | | Federal FY of Grant: ARRA 2009 |
| 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 Expended End Date | Actual Expended End Date | |
| PHA-Wide | 03/18/10 | | 03/18/12 | | |
| TN071-001 | 03/18/10 | | 03/18/12 | | |
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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

Expires 4/30/2011

| PART I: SUMMARY | | | | | | |
|--|--|---|---------------------------------------|---------------------------------------|--|---------------------------------------|
| PHA Name/Number Hartsville Housing Authority / TN071 | | Locality (City/County & State) Hartsville/ Trousdale 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 (includes non-dwelling structures improvements) | Annual Statement | \$43,000.00 | \$43,000.00 | \$43,000.00 | - |
| C. | Management Improvements | | - | - | - | \$22,905.00 |
| D. | PHA-Wide Non-dwelling Structures and Equipment | | - | - | - | \$30,000.00 |
| E. | ADMINISTRATION | | - | - | - | 600.00 |
| F. | Other | | - | - | - | - |
| G. | Operations | | \$11,505.00 | \$11,505.00 | \$11,505.00 | \$1,000.00 |
| H. | Demolition | | - | - | - | - |
| I. | Development | | - | - | - | - |
| J. | Capital Fund Financing – Debt Service | | - | - | - | - |
| K. | Total CFP Funds | | \$54,505.00 | \$54,505.00 | \$54,505.00 | \$54,505.00 |
| L. | Total Non-CFP Funds | | - | - | - | - |
| M. | Grand Total | | \$54,505.00 | \$54,505.00 | \$54,505.00 | \$54,505.00 |

PART I: SUMMARY (CONTINUATION)

| PHA Name/Number Hartsville Housing Authority / TN071 | | Locality (City/county & State) Hartsville/ Trousdale 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 |
| | | Annual Statement | | | | |
| | TN071000001 | | \$54,505.00 | \$54,505.00 | \$54,505.00 | \$54,505.00 |
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| Part II: Supporting Pages – Physical Needs Work Statement(s) | | | | | | |
|---|--|----------|----------------|--|----------|----------------|
| Work Statement for Year 1 FFY 2010 | Work Statement for Year 2011 FFY 2011 | | | Work Statement for Year: 2012 FFY 2012 | | |
| | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost |
| SEE | TN071000001: | | | TN071000001: | | |
| ANNUAL | Replace water heaters | LS | \$4,500.00 | Kitchen Renovations | LS | \$3,500.00 |
| Statement | Water heater electrical improvements | LS | \$2,000.00 | Bathroom Renovations | LS | \$3,500.00 |
| | Mechanical improvements for capping off vent piping and gas line for water heater, kitchen stove and furnace replacement. | LS | \$1,000.00 | Electrical Renovations (lighting, receptacles, wiring, smoke/carbon monoxide detectors, service/panel improvements, misc.) | LS | \$3,500.00 |
| | Plumbing improvements including supply lines, drain lines, access panel and misc. | LS | \$3,000.00 | Plumbing | LS | \$1,500.00 |
| | Replace air-handling and condensing units at select dwellings. Install new electrical disconnect, conductor wire and breaker | LS | \$18,000.00 | Interior Doors/hardware | LS | \$1,500.00 |
| | Replace air-handling and convert from gas to electric. Install new electrical disconnect, conductor wire and breaker. | LS | \$9,000.00 | Exterior Doors/hardware | LS | \$1,500.00 |
| | Replace air-handling unit convert from gas to electric at the HHA Office. Install new electrical disconnect, conductor wire and breaker. | LS | \$500.00 | Interior Finishes (flooring, sheetrock, painting, trim) | LS | \$3,000.00 |
| | Mechanical improvements including replacing condensing units at select units, and misc. | LS | \$5,000.00 | Windows | LS | \$3,000.00 |
| | | | | Roofing | LS | \$3,000.00 |
| | | | | Office Improvements | LS | \$2,000.00 |
| | | | | Sidewalks/Site Improvements/ Parking/Landscaping/Water & Sewer Lines | LS | \$2,000.00 |
| | | | | Non-dwelling structures | LS | \$2,000.00 |
| | | | | Water heaters | LS | \$1,000.00 |
| | | | | HVAC | LS | \$5,000.00 |
| | | | | Refrigerators and Ranges | LS | \$3,000.00 |
| | | | | Termite Control | LS | \$2,000.00 |
| | | | | Building exterior improvements | LS | \$2,000.00 |
| | Subtotal of Estimated Cost | | \$43,000.00 | Subtotal of Estimated Cost | | \$43,000.00 |

