

AGENCY PLAN

2011

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
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1.0	PHA Information PHA Name: Johnson City Housing Authority PHA Code: 002 PHA Type: <input 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): 10/2011				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: 756 Number of HCV units: 493 (Mod-Rehab-14) (HUD-VASH-70)				
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" 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.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. <i>N/A</i>				
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: <i>N/A</i>				
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. <i>N/A</i>				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Resident's Personal Property Disposition, House Rules, Admissions & Occupancy Policy and Administrative Plan. (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. Central Administration Office, 901 Pardee Street, Johnson City, TN. 37601 / Community Safety Office, 500 Washington Ave., Johnson City, TN. 37604 / Physical Services Office, 215 Legion Street, Johnson City, TN. 37601 6.1,6.2,6.3,6.4,6.5,6.7,6.8,6.9,6.10,6.12,6.13 – Attached 6.6-N/A 6.11- The most recent fiscal year audit (2010) had no findings. A copy was sent to the local HUD field 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. (a) N/A / (b) N/A / (c) N/A / (e) N/A</i> (d) Homeownership-Homeownership- The Section 8 Homeownership Program continues to provide hope to eligible Section 8 tenants who would like to own their own home. To date, two (2) Section 8 recipients with Disability status, (1) non-elderly/disabled and two (2) Section 8 tenants with working-family status (a total of five (5) tenants), have been able to buy a home through our Section 8 Homeownership Program. Approximately 43 tenants have been assessed, and one (1) tenant is currently credit ready, seven (7) tenants are working on resolving some mild collection issues and thirty (30) tenants have severe collection issues which would need to be resolved before a lending institution would approve a loan. Letters were sent to new and existing eligible Section 8 families with incomes of \$10,000.00 or above regarding possibilities for homeownership in the spring and fall (orientations were held April, October, and November).				
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. <i>Attached</i>				

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. TN37P002501-09 P&E Report, date ending 03/31/2011 TN37P002501-10 P&E Report, date ending 03/31/2011 TN37P002501-11 Annual Statement</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. Attached</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. N/A</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. N/A</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. N/A</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. N/A</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" N/A</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) Attached</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) Attached</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) Attached</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) Attached</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only) N/A</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. Attached</p> <p>(g) Challenged Elements There were no challenged elements to the 2011 Agency Plan.</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) Attached</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) Attached</p>

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

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

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

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

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

3.0 ELIGIBILITY FOR ADMISSION

3.1 INTRODUCTION

There are five eligibility requirements for admission to Section 8:

- qualifies as a family
- has an income within the income limits
- meets citizenship/eligible immigrant criteria
- provides documentation of Social Security numbers
- and signs consent authorization documents.

In addition to the eligibility criteria, families must also meet the Johnson City Housing Authority screening criteria in order to be admitted to the Section 8 Program.

3.2 ELIGIBILITY CRITERIA

A. Family status.

1. **A family with or without children.** Such a family is defined as a group of people related by blood, marriage, adoption that lives together in a stable family relationship.
 - a. Children temporarily absent from the home due to placement in foster care are considered family members.
 - b. Unborn children and children in the process of being adopted are considered family members for purposes of determining bedroom size, but are not considered family members for determining income limit.
2. **An elderly family, which is:**
 - a. A family whose head, spouse, or sole member is a person who is at least 62 years of age;
 - b. Two or more persons who are at least 62 years of age living together; or
 - c. One or more persons who are at least 62 years of age living with one or more live-in aides
3. **A near-elderly family, which is:**
 - a. A family whose head, spouse, or sole member is a person who is at least 50 years of age but below the age of 62;

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- b. Two or more persons who are at least 50 years of age but below the age of 62 living together; or
 - c. One or more persons who are at least 50 years of age but below the age of 62 living with one or more live-in aides.
4. A **disabled family**, which is:
- a. A family whose head, spouse, or sole member is a person with disabilities;
 - b. Two or more persons with disabilities living together; or
 - c. One or more persons with disabilities living with one or more live-in aides.
5. A **displaced family** is a family in which each member, or whose sole member, has been displaced by governmental action, or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws.
6. A **remaining member of a tenant family**.
7. A **single person** who is not an elderly or displaced person, or a person with disabilities, or the remaining member of a tenant family.
- B. Income eligibility
1. To be eligible to receive assistance a family shall, at the time the family initially receives assistance under the Section 8 program shall be a low-income family that is:
- a. A very low-income family;
 - b. A low-income family continuously assisted under the 1937 Housing Act (families that have been assisted within six months);
 - c. A low-income family that meets additional eligibility criteria specified by the Housing Authority;
 - d. A low-income family that is a nonpurchasing tenant in a HOPE 1 or HOPE 2 project or a property subject to a resident homeownership program under 24 CFR 248.173;

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- e. A low-income family or moderate-income family that is displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing.
 - f. A low-income family that qualifies for voucher assistance as a non-purchasing family residing in a HOPE 1 (HOPE for public housing homeownership) or HOPE 2 (HOPE for homeownership of multifamily units) project.
2. Income limits apply only at admission and are not applicable for continued occupancy; however, as income rises the assistance will decrease.
 3. The applicable income limit for issuance of a voucher is the highest income limit for the family size for areas within the housing authority's jurisdiction. The applicable income limit for admission to the program is the income limit for the area in which the family is initially assisted in the program. The family may only use the voucher to rent a unit in an area where the family is income eligible at admission to the program.
 4. Families who are moving into the Johnson City Housing Authority's jurisdiction under portability and have the status of applicant rather than of participant at their initial housing authority, must meet the income limit for the area where they were initially assisted under the program.
 5. Families who are moving into the Johnson City Housing Authority's jurisdiction under portability and are already program participants at their initial housing authority do not have to meet the income eligibility requirement for the Johnson City Housing Authority program.
 6. Income limit restrictions do not apply to families transferring units within the Johnson City Housing Authority Section 8 Program.

C. Citizenship/Eligible Immigrant status

To be eligible each member of the family must be a citizen, national, or a noncitizen who has eligible immigration status under one of the categories set forth in Section 214 of the Housing and Community Development Act of 1980 (see 42 U.S.C. 1436a(a)).

Family eligibility for assistance.

1. A family shall not be eligible for assistance unless every member of the family residing in the unit is determined to have eligible status, with the exception noted below.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

2. Despite the ineligibility of one or more family members, a mixed family may be eligible for one of three types of assistance. (See Section 11.5(K) for calculating rents under the noncitizen rule).
3. A family without any eligible members and receiving assistance on June 19, 1995 may be eligible for temporary deferral of termination of assistance.

D. Social Security Number Documentation

To be eligible, all family members 6 years of age and older must provide a Social Security Number or certify that they do not have one.

E. Signing Consent Forms

1. In order to be eligible each member of the family who is at least 18 years of age, and each family head and spouse regardless of age, shall sign one or more consent forms.
2. The consent form must contain, at a minimum, the following:
 - a. A provision authorizing HUD and the Johnson City Housing Authority to obtain from State Wage Information Collection Agencies (SWICAs) any information or materials necessary to complete or verify the application for participation or for eligibility for continued occupancy;
 - b. A provision authorizing HUD or the Johnson City Housing Authority to verify with previous or current employers income information pertinent to the family's eligibility for or level of assistance;
 - c. A provision authorizing HUD to request income information from the IRS and the SSA for the sole purpose of verifying income information pertinent to the family's eligibility or level of benefits; and
 - d. A statement that the authorization to release the information requested by the consent form expires 15 months after the date the consent form is signed.

- F. Suitability for tenancy. The Johnson City Housing Authority determines eligibility for participation and will also conduct criminal background checks on all adult household members, including live-in aides. The Johnson City Housing Authority will deny assistance to a family because of drug-related criminal activity or violent criminal activity by family members. This check will be made

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

through state or local law enforcement or court records in those cases where the household member has lived in the local jurisdiction for the last three years. If the individual has lived outside the local area. The Johnson City Housing Authority may contact law enforcement agencies where the individual had lived or request a check through the FBI's National Crime Information Center (NCIC).

The Johnson City Housing Authority will check with the State sex offender registration program and will ban for life any individual who is registered as a lifetime sex offender.

Additional screening is the responsibility of the owner. Upon the request of a prospective owner, the Johnson City Housing Authority will provide any factual information or third party written information they have relevant to a voucher holder's history of, or ability to, comply with material standard lease terms or any history of drug trafficking.

4.0 MANAGING THE WAITING LIST

4.1 *OPENING AND CLOSING THE WAITING LIST*

Opening of the waiting list will be announced via public notice that applications for Section 8 will again be accepted. The public notice will state where, when, and how to apply. The notice will be published in a local newspaper of general circulation, and also by any available minority media. The public notice will state any limitations to who may apply.

The notice will state that applicants already on waiting lists for other housing programs must apply separately for this program, and that such applicants will not lose their place on other waiting lists when they apply for Section 8. The notice will include the Fair Housing logo and slogan and otherwise be in compliance with Fair Housing requirements.

Closing of the waiting list will be announced via public notice. The public notice will state the date the waiting list will be closed. The public notice will be published in a local newspaper of general circulation, and also by any available minority media.

4.2 *TAKING APPLICATIONS*

Families wishing to apply for the Section 8 Program will be required to complete an application for housing assistance. Applications will be accepted, until further notice, on Tuesday, Wednesday, and Thursday of each week, excepting holidays, from 9 a.m. to 11 a.m. and from 1 p.m. to 3 p.m. at the Department of Admissions and Occupancy located in the Central Administration Office of Johnson City Housing Authority, 901 Pardee Street, Johnson City, Tennessee 37601, telephone 423-232-4784.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

Applications are taken to compile a waiting list. Due to the demand for Section 8 assistance in the Johnson City Housing Authority jurisdiction, the Johnson City Housing Authority may take applications on an open enrollment basis, depending on the length of the waiting list.

When the waiting list is open, completed applications will be accepted from all applicants. The Johnson City Housing Authority will later verify the information in the applications relevant to the applicant's eligibility, admission, and level of benefit.

Applications may be made in person at the Central Administration Office, Johnson City Housing Authority, 901 Pardee Street, Johnson City, TN 37601, until further notice, on Tuesday, Wednesday, and Thursday of each week, excepting holidays, from 9 a.m. to 11 a.m. and from 1 p.m. to 3 p.m. Applications will be mailed to interested families upon request.

The completed application will be dated and time stamped upon its return to the Johnson City Housing Authority.

Persons with disabilities who require a reasonable accommodation in completing an application may call the Johnson City Housing Authority to make special arrangements to complete their application. A Telecommunication Device for the Deaf (TDD) is available for the deaf. The TDD telephone number is 423-232-4784.

The application process will involve two phases. The first phase is the initial application for housing assistance or the pre-application. The pre-application requires the family to provide limited basic information including name, address, phone number, family composition and family unit size, racial or ethnic designation of the head of household, income category, and information establishing any preferences to which they may be entitled. This first phase results in the family's placement on the waiting list.

Upon receipt of the families pre-application or application, the Johnson City Housing Authority will make a preliminary determination of eligibility. The Johnson City Housing Authority will notify the family in writing of the date and time of placement on the waiting list and the approximate amount of time before housing assistance may be offered. If the Johnson City Housing Authority determines the family to be ineligible, the notice will state the reasons therefore and offer the family the opportunity of an informal review of this determination.

An applicant may at any time report changes in their applicant status including changes in family composition, income, or preference factors. The Johnson City Housing Authority will annotate the applicant's file and will update their place on the waiting list. Confirmation of the changes will be confirmed with the family in writing.

The second phase is the final determination of eligibility, referred to as the full application. The full application takes place when the family nears the top of the waiting list. The Johnson City Housing Authority will ensure that verification of all preferences,

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

eligibility, suitability selection factors are current in order to determine the family's final eligibility for admission into the Section 8 Program.

4.3 ORGANIZATION OF THE WAITING LIST

The waiting list will be maintained in accordance with the following guidelines:

- A. The application will be a permanent file;
- B. All applications will be maintained in order of preference and then in order of date and time of application;
- C. Any contact between the Johnson City Housing Authority and the applicant will be documented in the applicant file.

Note: The waiting list cannot be maintained by bedroom size under current HUD regulations.

4.4 FAMILIES NEARING THE TOP OF THE WAITING LIST

When a family appears to be within three (3) months of being offered assistance, the family will be invited to an interview and the verification process will begin. It is at this point in time that the family's waiting list preference will be verified. If the family no longer qualifies to be near the top of the list, the family's name will be returned to the appropriate spot on the waiting list. The Johnson City Housing Authority must notify the family in writing of this determination, and give the family the opportunity for an informal review.

The aforesaid verification process timeframe may be waived due to the applicant's housing needs and availability.

Once the preference has been verified the family will complete a full application, present Social Security Number information, citizenship/eligible immigrant information, and sign the Consent for Release of Information forms.

4.5 MISSED APPOINTMENTS

All applicants who fail to keep a scheduled appointment with the Johnson City Housing Authority will be sent a notice of termination of the process for eligibility. Notice will be sent to applicant via U.S. Mail—Certified, Return Receipt Requested.

The Johnson City Housing Authority will allow the family to reschedule for good cause. Generally, no more than one opportunity will be given to reschedule without good cause, and no more than two opportunities will be given for good cause. When good cause exists for missing an appointment, the Johnson City Housing Authority will work closely with the family to find a more suitable time. Applicants will be offered the right to an informal review before being removed from the waiting list.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

4.6 PURGING THE WAITING LIST

The Johnson City Housing Authority will update and purge its waiting list at least annually to ensure that the pool of applicants reasonably represents interested families. Purging also enables the Housing Authority to update the information regarding address, family composition, income category and preferences.

4.7 REMOVAL OF APPLICANTS FROM THE WAITING LIST

The Johnson City Housing Authority will not remove an applicant's name from the waiting list unless:

- A. The applicant requests that the name be removed;
- B. The applicant fails to respond to a written request for information or a request to declare their continued interest in the program or misses scheduled appointments;
or
- C. The applicant does not meet either the eligibility or screening criteria for the program.
- D. The applicant violates any one or more of the conditions as set forth in Section 4.8 below.

4.8 GROUNDS FOR DENIAL

The Johnson City Housing Authority will deny assistance to applicants who:

- A. Do not meet any one or more of the eligibility criteria;
- B. Do not supply information or documentation required by the application process within ten (10) calendar days;
- C. Fail to respond to a written request for information or a request to declare their continued interest in the program;
- D. Fail to complete any aspect of the application or lease-up process;
- E. Have a history of criminal activity by any household member involving crimes of physical violence against persons or property, and any other criminal activity including drug-related criminal activity that would adversely affect the health, safety, or well being of other tenants or staff, or cause damage to the property.
- F. Currently owes rent or other amounts to any housing authority in connection with the public housing or Section 8 Programs.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- G. Currently owes rent or other amounts in connection with a Section 8 program or other HUD-assisted program;

Applicants that owe a HA or any other federally subsidized program funds will not be processed for occupancy. The applicant must pay the funds owed prior to the application being processed. After the application is processed the applicant must meet all other conditions for occupancy. Re-paying funds that are due does not necessarily qualify an applicant for occupancy. Such payments will be considered along with other factors in the application process. Any money owed to a HA which has been discharged by bankruptcy shall not be considered in making this determination.

- H. Have committed fraud, bribery, or any other corruption in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from;

- I. Have a family member who was evicted from public housing within the last three years;

- J. Have a family member who was evicted from assisted housing within five years of the projected date of admission because of drug-related criminal activity involving the illegal manufacture, sale, distribution, or possession with the intent to manufacture, sell, distribute a controlled substance as defined in Section 102 of the Controlled Substances Act, 21 U.S.C. 802;

- K. Have a family member who is illegally using a controlled substance or abuses alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents. The Johnson City Housing Authority may waive this requirement if:

1. The person demonstrates to the Johnson City Housing Authority's satisfaction that the person is no longer engaging in drug-related criminal activity or abuse of alcohol;
2. The person has successfully completed a supervised drug or alcohol rehabilitation program;
3. The person has otherwise been rehabilitated successfully; or
4. The person is participating in a supervised drug or alcohol rehabilitation program.

- L. Have engaged in or threatened abusive or violent behavior towards any Johnson City Housing Authority Housing staff or residents;

- M. Have a family household member who has been terminated under the Certificate or Voucher Program or Housing Choice Voucher Program during the last three years;

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- N. Have a family member who has been convicted of manufacturing or producing methamphetamine (speed) (Denied for life);
- O. Have a family member with a lifetime registration under a State sex offender registration program (Denied for life).
- P. No assistance shall be provided to any individual who
 - (1) Is enrolled as a student at an institution of higher education (as defined under section 102 of the Higher Education Act of 1965 (20U.S.C. 1002));
 - (2) Is under 24 years of age;
 - (3) Is not a veteran;
 - (4) Is unmarried;
 - (5) Does not have a dependent child; and
 - (6) Is not otherwise individually eligible, or has parents who, individually or jointly, are not eligible, to receive assistance under Section 8 of the United States Housing Act of 1937.

4.9 NOTIFICATION OF NEGATIVE ACTIONS

Any applicant whose name is being removed from the waiting list will be notified by the Johnson City Housing Authority, in writing, that they have ten (10) business days, from the date of the written correspondence, to present mitigating circumstances or request an informal review. The letter will also indicate that their name will be removed from the waiting list if they fail to respond within the timeframe specified. The Johnson City Housing Authority's system of removing applicants' names from the waiting list will not violate the rights of persons with disabilities. If an applicant's failure to respond to a request for information or updates was caused by the applicant's disability, the Johnson City Housing Authority will provide a reasonable accommodation. If the applicant indicates that they did not respond due to a disability, the Johnson City Housing Authority will verify that there is in fact a disability and that the accommodation they are requesting is necessary based on the disability. An example of a reasonable accommodation would be to reinstate the applicant on the waiting list based on the date and time of the original application.

4.10 INFORMAL REVIEW

If the Johnson City Housing Authority determines that an applicant does not meet the criteria for receiving Section 8 assistance, the Johnson City Housing Authority will promptly provide the applicant with written notice of the determination. The notice must contain a brief statement of the reason(s) for the decision, and state that the applicant may request an informal review of the decision within 10 business days of the denial. The Johnson City Housing Authority will describe how to obtain the informal review. The informal review process, adopted in accordance with Resolution FFY00-09, is attached hereto and becomes a part hereof (see Appendix A).

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

5.0 SELECTING FAMILIES FROM THE WAITING LIST

5.1 *WAITING LIST ADMISSIONS AND SPECIAL ADMISSIONS*

The Housing Authority may admit an applicant for participation in the program either as a special admission or as a waiting list admission.

If HUD awards funding that is targeted for families with specific characteristics or families living in specific units, the Johnson City Housing Authority will use the assistance for those families.

5.2 *PREFERENCES*

The Johnson City Housing Authority will select families based on the following preferences.

A. Displaced — individuals or families displaced by government action, or whose dwelling has been destroyed by disaster (i.e., fire).

B. Elderly and people with disabilities.

Elderly family is defined as a family whose head or spouse or whose sole member is at least 62 years of age, or disabled, or handicapped and may include two or more elderly, disabled, or handicapped persons living together, or one or more such persons living with another person who is determined to be essential to his or her care and well being.

Working families- Any eligible head or spouse that is employed and working no less than 20 hours per week (regardless of the amount of income) and the income is countable under HUD's definition of "annual income," qualifies for the working preference. Also, applicants whose head, spouse, or sole member is age 62 or older or is receiving social security disability, supplemental security income disability benefits, or any other payments based on the individual's inability to work. This preference is also extended to those who are in or have recently completed educational or training programs designed to prepare people for the job market.

C. Victims of domestic violence.

D. All other applicants.

5.3 *SELECTION FROM THE WAITING LIST*

Based on the above preferences, all families in preference A will be offered housing before any families in preference B, and preference B families will be offered housing before any families in preference C, and so forth.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

The date and time of application will be utilized to determine the sequence within the above-prescribed preferences.

Notwithstanding the above, if necessary to meet the statutory requirement that 75% of newly admitted families in any fiscal year be families who are extremely low-income, the Johnson City Housing Authority retains the right to skip higher income families on the waiting to reach extremely low-income families. This measure will only be taken if it appears the goal will not otherwise be met. To ensure this goal is met, the Housing Authority will monitor incomes of newly admitted families and the income of the families on the waiting list.

If there are not enough extremely low-income families on the waiting list we will conduct outreach on a non-discriminatory basis to attract extremely low-income families to reach the statutory requirement.

6.0 ASSIGNMENT OF BEDROOM SIZES (SUBSIDY STANDARDS)

The Johnson City Housing Authority will issue a voucher for a particular bedroom size – the bedroom size is a factor in determining the family’s level of assistance. The following guidelines will determine each family’s unit size without overcrowding or over-housing:

Number of Bedrooms	Number of Persons	
	Minimum	Maximum
0	1	1
1	1	2
2	2	4
3	3	6
4	4	8

These standards are based on the assumption that each bedroom will accommodate no more than two (2) persons. Two adults will share a bedroom unless related by blood.

In determining bedroom size, the Johnson City Housing Authority will include the presence of children to be born to a pregnant woman, children who are in the process of being adopted, children whose custody is being obtained, children who are temporarily away at school or temporarily in foster-care.

Bedroom size will also be determined using the following guidelines:

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- A. Children of the same sex will share a bedroom.
- B. Children of the opposite sex, both under the age of three will share a bedroom.
- C. Adults and children will not be required to share a bedroom.
- D. Foster-adults and children will not be required to share a bedroom with family members.
- E. Live-in aides will get a separate bedroom.

The Johnson City Housing Authority will grant exceptions to normal occupancy standards when a family requests a larger size than the guidelines allow and documents a medical reason why the larger size is necessary.

The family unit size will be determined by the Johnson City Housing Authority in accordance with the above guidelines and will determine the maximum rent subsidy for the family; however, the family may select a unit that may be larger or smaller than the family unit size. If the family selects a smaller unit, the payment standard for the smaller size will be used to calculate the subsidy. If the family selects a larger size, the payment standard for the family unit size will determine the maximum subsidy.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

7.0 TAKING APPLICATIONS

Families wishing to apply for the Public Housing Program will be required to complete an application for housing assistance. Applications will be accepted, until further notice, on Tuesday, Wednesday, and Thursday of each week, excepting holidays, from 9 a.m. to 11 a.m. and from 1 p.m. to 3 p.m. at the Department of Admissions and Occupancy located in the Central Administration Office of Johnson City Housing Authority, 901 Pardee Street, Johnson City, Tennessee 37601, telephone 423-232-4784.

Applications are taken to compile a waiting list. Due to the demand for housing in the Johnson City Housing Authority jurisdiction, the Johnson City Housing Authority may take applications on an open enrollment basis, depending on the length of the waiting list.

Completed applications will be accepted for all applicants and the Johnson City Housing Authority will verify the information.

Applications must be made in person. Applications will be mailed to interested parties upon request.

The completed application will be dated and time stamped upon its return to the Johnson City Housing Authority.

Persons with disabilities who require a reasonable accommodation in completing an application may call the Johnson City Housing Authority to make special arrangements. A Telecommunication Device for the Deaf (TDD) is available for the deaf. The TDD telephone number is 423-232-4784.

Upon receipt of the family's application, the Johnson City Housing Authority will make a determination of eligibility. If the Johnson City Housing Authority determines the family to be ineligible, the notice will state the reasons therefore and will offer the family the opportunity of an informal review of the determination.

The applicant may at any time report changes in their applicant status including changes in family composition, income, or preference factors. The Johnson City Housing Authority will annotate the applicant's file and will update their place on the waiting list. Confirmation of the changes will be confirmed with the family in writing.

The Johnson City Housing Authority will ensure that verification of all preferences, eligibility, suitability and selection factors are current in order to determine the family's final eligibility for admission into the Public Housing Program.

8.0 ELIGIBILITY FOR ADMISSION

8.1 INTRODUCTION

There are five eligibility requirements for admission to public housing:

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- ☞ qualifies as a family
- ☞ has an income within the income limits
- ☞ meets citizenship/eligible immigrant criteria
- ☞ provides documentation of Social Security numbers
- ☞ and signs consent authorization documents.

In addition to the eligibility criteria, families must also meet the Johnson City Housing Authority screening criteria in order to be admitted to public housing.

8.2 ELIGIBILITY CRITERIA

A. Family status.

1. **A family with or without children.** Such a family is defined as a group of people related by blood, marriage, or adoption that live together in a stable family relationship.
 - a. Children temporarily absent from the home due to placement in foster care are considered family members.
 - b. Unborn children and children in the process of being adopted are considered family members for the purpose of determining bedroom size but are not considered family members for determining income limit.
2. **An elderly family, which is:**
 - a. A family whose head, spouse, or sole member is a person who is at least 62 years of age;
 - b. Two or more persons who are at least 62 years of age living together; or
 - c. One or more persons who are at least 62 years of age living with one or more live-in aides.
3. **A near-elderly family, which is:**
 - a. A family whose head, spouse, or sole member is a person who is at least 50 years of age but below the age of 62;
 - b. Two or more persons, who are at least 50 years of age but below the age of 62, living together; or

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- c. One or more persons, who are at least 50 years of age but below the age of 62, living with one or more live-in aides.
 4. A **disabled family**, which is:
 - a. A family whose head, spouse, or sole member is a person with disabilities;
 - b. Two or more persons with disabilities living together; or
 - c. One or more persons with disabilities living with one or more live-in aides.
 5. A **displaced family**, which is a family in which each member, or whose sole member, has been displaced by governmental action, or whose dwelling has been extensively damaged or destroyed as a result of a disaster declared or otherwise formally recognized pursuant to Federal disaster relief laws.
 6. A **remaining member of a resident family**.
 7. A **single person** who is not an elderly or displaced person, or a person with disabilities, or the remaining member of a resident family.
- B. Income eligibility
 1. Income limits apply only at admission and are not applicable for continued occupancy.
 2. A family may not be admitted to the public housing program from another assisted housing program (e.g., tenant-based Section 8) or from a public housing program operated by another housing authority without meeting the income requirements of the Johnson City Housing Authority.
 3. If the Johnson City Housing Authority acquires a property for federal public housing purposes, the families living there must have incomes within the low-income limit in order to be eligible to remain as public housing residents.
 4. Income limit restrictions do not apply to families transferring within our Public Housing Program.
- C. Citizenship/Eligibility Status

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

1. To be eligible each member of the family must be a citizen, national, or a noncitizen who has eligible immigration status under one of the categories set forth in Section 214 of the Housing and Community Development Act of 1980 (see 42 U.S.C. 1436a(a)).
2. Family eligibility for assistance.
 - a. A family shall not be eligible for assistance unless every member of the family residing in the unit is determined to have eligible status, with the exception noted below.
 - b. Despite the ineligibility of one or more family members, a mixed family may be eligible for one of three types of assistance. (See Section 13.6 for calculating rents under the noncitizen rule)
 - c. A family without any eligible members and receiving assistance on June 19, 1995 may be eligible for temporary deferral of termination of assistance.

D. Social Security Number Documentation

To be eligible, all family members 6 years of age and older must provide a Social Security number or certify that they do not have one.

E. Signing Consent Forms

1. In order to be eligible, each member of the family who is at least 18 years of age, and each family head and spouse regardless of age, shall sign one or more consent forms.
2. The consent form must contain, at a minimum, the following:
 - a. A provision authorizing HUD or the Johnson City Housing Authority to obtain from State Wage Information Collection Agencies (SWICAs) any information or materials necessary to complete or verify the application for participation or for eligibility for continued occupancy; and
 - b. A provision authorizing HUD or the Johnson City Housing Authority to verify with previous or current employers income information pertinent to the family's eligibility for or level of assistance;
 - c. A provision authorizing HUD to request income information from the IRS and the SSA for the sole purpose of verifying income

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

information pertinent to the family's eligibility or level of benefits;
and

- d. A statement that the authorization to release the information requested by the consent form expires 15 months after the date the consent form is signed.

8.3 SUITABILITY

- A. Applicant families will be evaluated to determine whether, based on their recent behavior, such behavior could reasonably be expected to result in noncompliance with the public housing lease. The Johnson City Housing Authority will look at past conduct as an indicator of future conduct. Emphasis will be placed on whether a family's admission could reasonably be expected to have a detrimental effect on the development environment, other residents, Johnson City Housing Authority employees, or other people residing in the immediate vicinity of the property. Otherwise eligible families will be denied admission if they fail to meet the suitability criteria.
- B. The Johnson City Housing Authority will consider objective and reasonable aspects of the family's background, including the following:
 1. History of meeting financial obligations, especially rent;
 2. Ability to maintain (or with assistance would have the ability to maintain) their housing in a decent and safe condition based on living or housekeeping habits and whether such habits could adversely affect the health, safety, or welfare of other residents;
 3. History of criminal activity by any household member involving crimes of physical violence against persons or property and any other criminal activity including drug-related criminal activity that would adversely affect the health, safety, or well being of other residents or staff or cause damage to the property;
 3. History of disturbing neighbors or destruction of property;
 4. Having committed fraud in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from; and
 5. History of abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment by others.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- C. The Johnson City Housing Authority will ask applicants to provide information demonstrating their ability to comply with the essential elements of the lease. The Johnson City Housing Authority will verify the information provided. Such verification may include but may not be limited to the following:
1. A credit check of the head, spouse and co-head;
 2. A rental history check of all adult family members;
 3. A criminal background check on all adult household members, including live-in aides. This check will be made through State or local law enforcement or court records in those cases where the household member has lived in the local jurisdiction for the last three years. Where the individual has lived outside the local area, the Johnson City Housing Authority may contact law enforcement agencies where the individual had lived or request a check through the FBI's National Crime Information Center (NCIC);
 4. A check of the State's lifetime sex offender registration program for each adult household member, including live-in aides. No individual registered with this program will be admitted to public housing.

8.4 GROUNDNS FOR DENIAL

The Johnson City Housing Authority is not required or obligated to assist applicants who:

- A. Do not meet any one or more of the eligibility criteria;
- B. Do not supply information or documentation required by the application process;
- C. Furnish false or misleading information in the public housing application process;
- D. Have failed to respond to a written request for information or a request to declare their continued interest in the program;
- E. Have a history of not meeting financial obligations, especially rent;
- F. Do not have the ability to maintain (with assistance) their housing in a decent and safe condition where such habits could adversely affect the health, safety, or welfare of other residents;
- G. Have a history of criminal activity by any household member involving crimes of physical violence against persons or property and any other criminal activity including drug-related criminal activity that would adversely affect the health, safety, or well being of other residents or staff or cause damage to the property;
- H. Have a history of disturbing neighbors or destruction of property;

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- I. Currently owe rent or other amounts to any housing authority in connection with their public housing or Section 8 programs;
- J. Currently owe rent or other amounts in connection with a Section 8 program or other HUD-assisted program;

Applicants that owe a HA or any other federally subsidized program funds will not be processed for occupancy. The applicant must pay the funds owed prior to the application being processed. After the application is processed the applicant must meet all other conditions for occupancy. Re-paying funds that are due does not necessarily qualify an applicant for occupancy. Such payments will be considered along with other factors in the application process. Any money owed to a HA which has been discharged by bankruptcy shall not be considered in making the determination.

- K. Have committed fraud, bribery or any other corruption in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from;
- L. Were evicted from assisted housing within three years of the projected date of admission because of drug-related criminal activity involving the personal use or possession for personal use;
- M. Were evicted from assisted housing within five years of the projected date of admission because of drug-related criminal activity involving the illegal manufacture, sale, distribution, or possession with the intent to manufacture, sell, distribute a controlled substance as defined in Section 102 of the Controlled Substances Act, 21 U.S.C. 802;
- N. Are illegally using a controlled substance or are abusing alcohol in a way that may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents or Authority employees. The Johnson City Housing Authority may waive this requirement if:
 - 1. The person demonstrates to the Johnson City Housing Authority's satisfaction that the person is no longer engaging in drug-related criminal activity or abuse of alcohol;
 - 2. Has successfully completed a supervised drug or alcohol rehabilitation program;

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

3. Has otherwise been rehabilitated successfully; or
 4. Is participating in a supervised drug or alcohol rehabilitation program.
- O. Have engaged in or threatened abusive or violent behavior towards any Johnson City Housing Authority staff or residents;
- P. Have a household member who has ever been evicted from public housing;
- Q. Have a family household member who has been terminated under the certificate or voucher program;
- R. **Denied for Life:** If any family member has been convicted of manufacturing or producing methamphetamine (speed) in a public housing development or in a Section 8 assisted property;
- S. **Denied for Life:** Has a lifetime registration under a State sex offender registration program.

8.5 *INFORMAL REVIEW*

- A. If the Johnson City Housing Authority determines that an applicant does not meet the criteria for receiving public housing assistance, the Johnson City Housing Authority will promptly provide the applicant with written notice of the determination. The notice must contain a brief statement of the reason(s) for the decision and state that the applicant may request an informal review of the decision within 10 calendar days of the denial. The Johnson City Housing Authority will describe how to obtain the informal review.

The informal review may be conducted by any person designated by the Johnson City Housing Authority, other than a person who made or approved the decision under review or subordinate of this person. The applicant must be given the opportunity to present written or oral objections to the Johnson City Housing Authority's decision. The Johnson City Housing Authority must notify the applicant of the final decision within 15 calendar days after the informal review, including a brief statement of the reasons for the final decision.

- B. The participant family may request that the Johnson City Housing Authority provide for an Informal Hearing after the family has notification of an INS decision on their citizenship status on appeal, or in lieu of request of appeal to the INS. This request must be made by the participant family within 30 days of

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

receipt of the Notice of Denial or Termination of Assistance, or within 30 days of receipt of the INS appeal decision.

For the participant families, the Informal Hearing Process above will be utilized with the exception that the participant family will have up to 30 days of receipt of the Notice of Denial or Termination of Assistance, or of the INS appeal decision.

9.0 MANAGING THE WAITING LIST

9.1 *OPENING AND CLOSING THE WAITING LIST*

Opening of the waiting list will be announced with a public notice stating that applications for public housing will again be accepted. The public notice will state where, when, and how to apply. The notice will be published in a local newspaper of general circulation and also by any available minority media. The public notice will state any limitations to who may apply.

The notice will state that applicants already on waiting lists for other housing programs must apply separately for this program and such applicants will not lose their place on other waiting lists when they apply for public housing. The notice will include the Fair Housing logo and slogan and will be in compliance with Fair Housing requirements.

Closing of the waiting list will also be announced with a public notice. The public notice will state the date the waiting list will be closed and for what bedroom sizes. The public notice will be published in a local newspaper of general circulation and also by any available minority media.

9.2 *ORGANIZATION OF THE WAITING LIST*

The waiting list will be maintained in accordance with the following guidelines:

- A. The application will be a permanent file;
- B. All applications will be maintained in order of bedroom size, preference, and then in order of date and time of application; and
- C. Any contacts between the Johnson City Housing Authority and the applicant will be documented in the applicant file.

9.3 *FAMILIES NEARING THE TOP OF THE WAITING LIST*

When a family appears to be within three (3) months of being offered a unit, the family will be invited to an interview and the verification process will begin. It is at this point in time that the family's waiting list preference will be verified. If the family no longer qualifies to be near the top of the list, the family's name will be returned to the appropriate spot on the waiting list. The Johnson City Housing Authority must notify the

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

family in writing of this determination and give the family the opportunity for an informal review.

The aforesaid verification process timeframe may be waived due to the applicant's housing needs and availability.

Once the preference has been verified, the family will complete a full application, present Social Security number information, citizenship/eligible immigrant information, and sign the Consent for Release of Information forms.

9.4 ***REMOVAL OF APPLICANTS FROM THE WAITING LIST***

The Johnson City Housing Authority will not remove an applicant's name from the waiting list unless:

- A. The applicant requests in writing that the name be removed;
- B. The applicant fails to respond to a written request for information or a request to declare their continued interest in the program; or
- C. The applicant does not meet either the eligibility or suitability criteria for the program.

9.5 ***MISSED APPOINTMENTS***

All applicants who fail to keep a scheduled appointment with the Johnson City Housing Authority will be sent a notice of termination of the process for eligibility. Notice will be sent to applicant via U.S. Mail—Certified, Return Receipt Requested.

The Johnson City Housing Authority will allow the family to reschedule for good cause. Generally, no more than one opportunity will be given to reschedule without good cause, and no more than two opportunities will be given for good cause. When good cause exists for missing an appointment, the Johnson City Housing Authority will work closely with the family to find a more suitable time. Applicants will be offered the right to an informal review before being removed from the waiting list.

9.6 ***NOTIFICATION OF NEGATIVE ACTIONS***

Any applicant whose name is being removed from the waiting list will be notified by the Johnson City Housing Authority, in writing, that they have ten (10) calendar days from the date of the written correspondence to present mitigating circumstances or request an informal review. The letter will also indicate that their name will be removed from the waiting list if they fail to respond within the timeframe specified. The Johnson City Housing Authority system of removing applicant names from the waiting list will not violate the rights of persons with disabilities. If an applicant claims that their failure to respond to a request for information or updates was caused by a disability, the Johnson City Housing Authority will verify that there is in fact a disability and the disability

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

caused the failure to respond, and provide a reasonable accommodation. An example of a reasonable accommodation would be to reinstate the applicant on the waiting list based on the date and time of the original application.

10.0 RESIDENT SELECTION AND ASSIGNMENT PLAN

10.1 PREFERENCES

The Johnson City Housing Authority will select families based on the following preferences within each bedroom size category:

- A. Displaced---individuals or families displaced by government action, or whose dwelling has been destroyed by disaster (i.e., fire).
- B. Elderly and people with disabilities and working families
Elderly family is defined as a family whose head or spouse or whose sole member is at least 62 years of age, or disabled, or handicapped and may include two or more elderly, disabled, or handicapped persons living together, or one or more such persons living with another person who is determined to be essential to his or her care and well being.
Working families- Any eligible head or spouse that is employed and working no less than 20 hours per week (regardless of the amount of income) and the income is countable under HUD's definition of "annual income," qualifies for the working preference. Also, applicants whose head, spouse, or sole member is age 62 or older or is receiving social security disability, supplemental security income disability benefits, or any other payments based on the individual's inability to work. This preference is also extended to those who are in or have recently completed educational or training programs designed to prepare people for the job market.
- C. Victims of domestic violence.
- D. All other applicants.

Based on the above preferences, all families in preference A will be offered housing before any families in preference B, and preference B families will be offered housing before any families in preference C, etc.

The date and time of application will be noted and utilized to determine the sequence within the above-prescribed preferences.

All applications will be selected per preference, date, and time of application. If an applicant qualifying for a preference is made a housing offer, and the applicant refuses the offer, preference will be considered waived and application will be placed on the regular waiting list per date and time of initial application.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

Accessible Units: Accessible units will be first offered to families who may benefit from the accessible features. Applicants for these units will be selected utilizing the same preference system as outlined above. If there are no applicants who would benefit from the accessible features, the units will be offered to other applicants in the order that their names come to the top of the waiting list. *Such applicants, however, must sign a release form stating they will accept a transfer (at their own expense) if, at a future time, a family requiring an accessible feature applies.* Any family required to transfer, subject to availability of an alternative unit, will be given a 30-day notice.

10.2 ASSIGNMENT OF BEDROOM SIZES

The following guidelines will determine each family's unit size without overcrowding or over-housing:

Number of Bedrooms	Number of Persons	
	Minimum	Maximum
0	1	1
1	1	2
2	2	4
3	3	6
4	4	8

These standards are based on the assumption that each bedroom will accommodate no more than two (2) persons. Zero bedroom units will only be assigned to one-person families. Two adults will share a bedroom unless related by blood.

In determining bedroom size, the Johnson City Housing Authority will include the presence of children to be born to a pregnant woman, children who are in the process of being adopted, children whose custody is being obtained, children who are temporarily away at school, or children who are temporarily in foster-care.

In addition, the following considerations may be taken in determining bedroom size:

- A. Children of the same sex will share a bedroom.
- B. Children of the opposite sex, both under the age of three will share a bedroom.
- C. Adults and children will not be required to share a bedroom.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

- D. Foster – adults and/or foster - children will not be required to share a bedroom with family members.
- E. Live-in aides will get a separate bedroom.

Exceptions to normal bedroom size standards include the following:

- A. Units smaller than assigned through the above guidelines – A family may request a smaller unit size than the guidelines allow. The Johnson City Housing Authority will allow the smaller size unit so long as generally no more than two (2) people per bedroom are assigned. In such situations, the family will sign a certification stating they understand they will be ineligible for a larger size unit for three years or until the family size changes, whichever may occur first.
- B. Units larger than assigned through the above guidelines – A family may request a larger unit size than the guidelines allow. The Johnson City Housing Authority will allow the larger size unit if the family provides a verified medical need that the family be housed in a larger unit.
- C. If there are no families on the waiting list for a larger size, smaller families may be housed if they sign a release form stating they will transfer (at the family's own expense) to the appropriate size unit when an eligible family needing the larger unit applies. The family transferring will be given a 30-day notice before being required to move, subject to availability of an alternative appropriate unit.
- D. Larger units may be offered in order to improve the marketing of a development suffering a high vacancy rate.

10.3 SELECTION FROM THE WAITING LIST

The Johnson City Housing Authority shall follow the statutory requirement that at least 40% of newly admitted families in any fiscal year be families whose annual income is at or below 30% of the area median income. To insure this requirement is met we shall annually monitor the incomes of newly admitted families and the incomes of the families on the waiting list. If it appears that the requirement to house extremely low-income families will not be met, we will skip higher income families on the waiting list to reach extremely low-income families.

10.4 DECONCENTRATION POLICY

It is Johnson City Housing Authority's policy to provide for deconcentration of poverty and encourage income mixing by bringing higher income families into lower income developments and lower income families into higher income developments. Toward this end, we will skip families on the waiting list to reach other families with a lower or higher income. We will accomplish this in a uniform and non-discriminating manner.

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

The Johnson City Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Prior to the beginning of each fiscal year, we will analyze the income levels of families residing in each of our developments, the income levels of census tracts in which our developments are located, and the income levels of the families on the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentration incentives to implement.

10.5 OFFER OF A UNIT

When the Johnson City Housing Authority discovers that a unit will become available, we will contact the first family on the waiting list who has the highest priority for this type of unit or development and whose income category would help to meet the deconcentration goal and/or the income targeting goal.

The Johnson City Housing Authority will contact the family first by telephone to make the unit offer. If the family cannot be reached by telephone, the family will be notified of a unit offer via first class mail. The family will be given five (5) business days from the date the letter was mailed to contact the Johnson City Housing Authority regarding the offer.

The family will be offered the opportunity to view the unit. After the opportunity to view the unit, the family will accept or reject the unit. This verbal offer and the family's decision must be documented in the resident file. If the family rejects the offer of the unit, the Johnson City Housing Authority will send the family a letter documenting the offer and the rejection.

10.6 REJECTION OF UNIT

If in making the offer to the family the Johnson City Housing Authority skipped over other families on the waiting list in order to meet their deconcentration goal and the family rejects the unit, the family will not lose their place on the waiting list and will not be otherwise penalized.

If the family rejects the first unit offered, they will lose any preference and be placed at the bottom of the waiting list. If the family rejects the second unit offered, they will be removed from the waiting list. The family will be offered the right to an informal review of the decision to alter their application status.

10.7 ACCEPTANCE OF UNIT

Plan Element 6.1 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures

The family will be required to sign a lease that will become effective no later than three (3) business days after the date of acceptance or the business day after the day the unit becomes available, whichever is later.

Prior to signing the lease all families (head of household) and other adult family members will be required to attend the Lease and Occupancy Orientation when they are initially accepted for occupancy. The family will not be housed if they have not attended the orientation. Applicants who provide prior notice of an inability to attend the orientation will be rescheduled. Failure of an applicant to attend the orientation, without good cause, may result in the cancellation of the occupancy process.

The applicant will be provided a copy of the lease, the grievance procedure, utility allowances, utility charges, the current schedule of routine maintenance charges, and a request for reasonable accommodation form. These documents will be explained in detail. The applicant will sign a certification that they have received these documents and that they have reviewed them with Housing Authority personnel. The certification will be filed in the resident's file.

The signing of the lease and the review of financial information are to be privately handled. The head of household and all adult family members will be required to execute the lease prior to admission. One executed copy of the lease will be furnished to the head of household and the Johnson City Housing Authority will retain the original executed lease in the resident's file. A copy of the grievance procedure will be attached to the resident's copy of the lease.

The family will pay a security deposit at the time of lease signing. The security deposit will be equal to 50 percent of the Total Tenant Payment or flat rent, whichever is the lesser amount. Security deposit for verified victims of domestic violence will be waived until further notice.

In exceptional situations, the Johnson City Housing Authority reserves the right to allow a new resident to pay their security deposit in up to three (3) payments. The terms will be reflected in writing in the form of a Repayment Agreement.

In the case of a move within public housing, the security deposit for the first unit will be transferred to the second unit. Additionally, if the security deposit for the second unit is greater than that for the first, the difference will be collected from the family. Conversely, if the security deposit is less, the difference will be refunded to the family.

In the event there are costs attributable to the family for bringing the first unit into condition for re-renting, the family shall be billed for these charges.

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

2. Financial Resources

Plan Element 6.2 Financial Resources

Financial Resources: Planned Sources and Users		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY2011 grants)		
a) Public Housing Operating Fund	\$ 3,550,188	
b) Public Housing Capital Fund	\$ 1,189,865	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$ 2,756,580	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	\$ 128,248	
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only as of 12-31-2010), (list below)		
TN37P002501-09	\$ 284,158	Capital Fund Program
TN37P002501-10	\$ 1,189,865	Capital Fund Program
3. Public Housing Dwelling Rental Income	\$ 985,432	Operating Expenses
Other Income (list below)		
Excess Utilities	\$ 98,465	Operating Expenses
Non-Dwelling Rental	\$ 49,272	Operating Expenses
Non-Federal sources (list below)		
Total Resources	\$ 10,232,073	

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

3. Rent Determination

13.0 DETERMINATION OF TOTAL TENANT PAYMENT AND TENANT RENT

13.1 FAMILY CHOICE

At admission and each year in preparation for their annual reexamination, each family is given the choice of having their rent determined under the formula method or having their rent set at the flat rent amount.

- A. Families who opt for the flat rent will be required to go through the income reexamination process *every three years*. All other reexamination circumstances will be done annually.
- B. Families who opt for the flat rent may request to have a reexamination and return to the formula based method at any time for any of the following reasons:
 - 1. The family's income has decreased.
 - 2. The family's circumstances have changed increasing their expenses for childcare, medical care, etc.
 - 3. Other circumstances creating a hardship on the family such that the formula method would be more financially feasible for the family.

13.2 THE FORMULA METHOD

The total tenant payment is equal to the highest of:

- A. 10% of monthly gross income;
- B. 30% of monthly adjusted income; or
- C. The welfare rent.

The family will pay the greater of the total tenant payment or the minimum rent of twenty-five dollars (\$25.00) per month.

In the case of a family who has qualified for the income exclusion at Section 11.2(H)(11), upon the expiration of the 12-month period described in that section, an additional rent benefit accrues to the family. If the family member's employment continues, then for the 12-month period following the 12-month period of disallowance, the resulting rent increase will be capped at 50 percent of the rent increase the family would have otherwise received.

Plan Element 6.3 PH Rent Determination

13.3 *MINIMUM RENT*

The Johnson City Housing Authority has set the minimum rent at twenty-five dollars (\$25.00) per month. However if the family requests a hardship exemption, the Johnson City Housing Authority will immediately suspend the minimum rent for the family until the Housing Authority can determine whether the hardship exists and whether the hardship is of a temporary or long-term nature.

- A. A hardship exists in the following circumstances:
 - 1. When the family has lost eligibility for or is waiting an eligibility determination for a Federal, State, or local assistance program;
 - 2. When the family would be evicted as a result of the imposition of the minimum rent requirement;
 - 3. When the income of the family has decreased because of changed circumstances, including loss of employment;
 - 4. When the family has an increase in expenses because of changed circumstances, for medical costs, childcare, transportation, education, or similar items;
 - 5. When a death has occurred in the family.
- B. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum rent for the time of suspension.
- C. Temporary hardship. If the Housing Authority reasonably determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will be not be imposed for a period of 90 days from the date of the family's request. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The Housing Authority will offer a repayment agreement in accordance with the Section 19 of this policy for any rent not paid during the period of suspension. During the suspension period the Housing Authority will not evict the family for nonpayment of the amount of tenant rent owed for the suspension period.
- D. Long-term hardship. If the Housing Authority determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists.
- E. Appeals. The family may use the grievance procedure to appeal the Housing Authority's determination regarding the hardship. No escrow deposit will be required in order to access the grievance procedure.

13.4 THE FLAT RENT

The Johnson City Housing Authority has set flat rents for each public housing development. In doing so, it considered the size and type of the unit, as well as its condition, amenities, services, and neighborhood. The Johnson City Housing Authority determined the market value of the unit and set the rent at the market value. The amount of the flat rent will be reevaluated annually and adjustments applied. Affected families will be given a 30-day notice of any rent change. Adjustments are applied on the anniversary date for each affected family (for more information on flat rents, see Section 16.3).

The Johnson City Housing Authority will post the flat rents at each of the developments and at the central office and are incorporated in this policy upon approval by the Board of Commissioners.

13.5 RENT FOR FAMILIES UNDER THE NONCITIZEN RULE

A mixed family will receive full continuation of assistance if all of the following conditions are met:

- A. The family was receiving assistance on June 19, 1995;
- B. The family was granted continuation of assistance before November 29, 1996;
- C. The family's head or spouse has eligible immigration status; and
- D. The family does not include any person who does not have eligible status other than the head of household, the spouse of the head of household, any parent of the head or spouse, or any child (under the age of 18) of the head or spouse.

If a mixed family qualifies for prorated assistance but decides not to accept it, or if the family has no eligible members, the family may be eligible for temporary deferral of termination of assistance to permit the family additional time for the orderly transition of some or all of its members to locate other affordable housing. Under this provision, the family receives full assistance. If assistance is granted under this provision prior to November 29, 1996, it may last no longer than three (3) years. If granted after that date, the maximum period of time for assistance under the provision is eighteen (18) months. The Johnson City Housing Authority will grant each family a period of six (6) months to find suitable affordable housing. If the family cannot find suitable affordable housing, the Johnson City Housing Authority will provide additional search periods up to the maximum time allowable.

Suitable housing means housing that is not substandard and is of appropriate size for the family. Affordable housing means that it can be rented for an amount not exceeding the amount the family pays for rent, plus utilities, plus 25%.

Plan Element 6.3 PH Rent Determination

The family's assistance is prorated in the following manner:

- A. Determine the 95th percentile of gross rents (tenant rent plus utility allowance) for the Johnson City Housing Authority. The 95th percentile is called the maximum rent.
- B. Subtract the family's total tenant payment from the maximum rent. The resulting number is called the maximum subsidy.
- C. Divide the maximum subsidy by the number of family members and multiply the result times the number of eligible family members. This yields the prorated subsidy.
- D. Subtract the prorated subsidy from the maximum rent to find the prorated total tenant payment. From this amount subtract the full utility allowance to obtain the prorated tenant rent.

Plan Element 6.3 HCV Rent Determination

11.4.1 Setting the Payment Standard

HUD requires that the payment standard be set by the Housing Authority at between 90 and 110% of the FMR. The Johnson City Housing Authority will review its determination of the payment standard annually after publication of the FMRs. The Johnson City Housing Authority will consider vacancy rates and rents in the market area, size and quality of units leased under the program, rents for units leased under the program, success rates of voucher holders in finding units, and the percentage of annual income families are paying for rent under the Voucher Program. If it is determined that success rates will suffer or that families are having to rent low quality units or pay over 40% of income for rent, the payment standard may be raised to the level judged necessary to alleviate these hardships.

Payment standards will not be raised solely to allow the renting of luxury quality units.

If success levels are projected to be extremely high and rents are projected to be at or below 30% of income, the Housing Authority will reduce the payment standard. Payment standards for each bedroom size are evaluated separately so that the payment standard for one bedroom size may increase or decrease while another remains unchanged. The Johnson City Housing Authority may consider adjusting payment standards at times other than the annual review when circumstances warrant.

Before increasing any payment standard, the Housing Authority will conduct a financial feasibility test to ensure that in using the higher standard, adequate funds will continue to be available to assist families in the program.

11.4.2 Selecting the Correct Payment Standard for a Family

- A. For the voucher tenancy, the payment standard for a family is the lower of:
 1. The payment standard for the family unit size; or
 2. The payment standard for the unit size rented by the family.
- B. If the unit rented by a family is located in an exception rent area, the Housing Authority will use the appropriate payment standard for the exception rent area.
- C. During the HAP contract term for a unit, the amount of the payment standard for a family is the higher of:
 1. The initial payment standard (at the beginning of the lease term) minus any amount by which the initial rent to owner exceeds the current rent to owner; or

Plan Element 6.3 HCV Rent Determination

2. The payment standard as determined at the most recent regular reexamination of family income and composition effective after the beginning of the HAP contract term.
- D. At the next annual reexamination following a change in family size or composition during the HAP contract term and for any reexamination thereafter, paragraph C above does not apply.
 - E. If there is a change in family unit size resulting from a change in family size or composition, the new family unit size will be considered when determining the payment standard at the next annual reexamination.

11.4.3 Area Exception Rents

In order to help families find housing outside areas of high poverty or when voucher holders are having trouble finding housing for lease under the program, the Housing Authority may request that HUD approve an exception payment standard rent for certain areas within its jurisdiction. The areas may be of any size, though generally not smaller than a census tract. The Housing Authority may request one such exception payment standard area or many. Exception payment standard rent authority may be requested for all or some unit sizes, or for all or some unit types.

When an exception payment standard rent has been approved and the FMR increases, the exception rent remains unchanged until such time as the Housing Authority requests and HUD approves a higher exception payment standard rent. If the FMR decreases, the exception payment standard rent authority automatically expires.

11.5 ASSISTANCE AND RENT FORMULAS

A. Total Tenant Payment

The total tenant payment is equal to the highest of:

1. 10% of monthly gross income
2. 30% of adjusted monthly income
3. Minimum rent
4. The welfare rent
No participant when initially receiving tenant-based assistance on a unit shall pay more than 40% of their monthly-adjusted income.

B. Minimum Rent.

Plan Element 6.3 HCV Rent Determination

The Johnson City Housing Authority has set the minimum rent as \$25.00. However, if the family requests a hardship exemption, the Johnson City Housing Authority will suspend the minimum rent for the family beginning the month following the family's hardship request. The suspension will continue until the Housing Authority can determine whether hardship exists and whether the hardship is of a temporary or long-term nature. During suspension, the family will not be required to pay a minimum rent and the Housing Assistance Payment will be increased accordingly.

1. A hardship exists in the following circumstances:
 - a. When the family has lost eligibility for or is awaiting an eligibility determination for a Federal, State or local assistance program;
 - b. When the family would be evicted as a result of the imposition of the minimum rent requirement;
 - c. When the income of the family has decreased because of changed circumstances, including loss of employment;
 - d. When the family has an increase in expenses because of changed circumstances, for medical costs, childcare, transportation, education, or similar items;
 - e. When a death has occurred in the family.
2. No hardship. If the Housing Authority determines there is no qualifying hardship, the minimum rent will be reinstated, including requiring back payment of minimum rent to the Housing Authority for the time of suspension.
3. Temporary hardship. If the Housing Authority determines that there is a qualifying hardship but that it is of a temporary nature, the minimum rent will not be imposed for a period of 90 days from the date of the family's request. At the end of the 90-day period, the minimum rent will be imposed retroactively to the time of suspension. The Housing Authority will offer a reasonable repayment agreement for any minimum rent back payment paid by the Housing Authority on the family's behalf during the period of suspension.
4. Long-term hardship. If the Housing Authority determines there is a long-term hardship, the family will be exempt from the minimum rent requirement until the hardship no longer exists.

Plan Element 6.3 HCV Rent Determination

5. Appeals. The family may use the informal hearing procedure to appeal the Housing Authority's determination regarding the hardship. No escrow deposit will be required in order to access the informal hearing procedures.

C. Section 8 Merged Vouchers

1. The payment standard is set by the Housing Authority between 90% and 110% of the FMR or higher or lower with HUD approval.
2. The participant pays the greater of the Total Tenant Payment or the minimum rent, plus the amount by which the gross rent exceeds the payment standard.
3. No participant when initially receiving tenant-based assistance on a unit shall pay more than 40% of their monthly-adjusted income.

D. Section 8 Preservation Vouchers

1. Payment Standard

- a. The payment standard is the lower of:
 - i. The payment standard amount for the appropriate family unit size; or
 - ii. The payment standard amount for the size of the dwelling unit actually rented by the family.
- b. If the dwelling unit is located in an exception area, the Johnson City Housing Authority will use the appropriate payment standard for the exception area.
- c. During the HAP contract term, the payment standard for the family is the higher of :
 - i. The initial payment standard (at the beginning of the HAP contract term), as determined in accordance with paragraph (1)(a) or (1)(b) of this section, minus any amount by which the initial rent to the owner exceeds the current rent to the owner; or
 - ii. The payment standard as determined in accordance with paragraph (1)(a) or (1)(b) of this section, as determined at the most recent regular reexamination of family income and composition effective after the beginning of the HAP contract term.

Plan Element 6.3 HCV Rent Determination

- d. At the next regular reexamination following a change in family composition that causes a change in family unit size during the HAP contract term, and for any examination thereafter during the term:
 - i. Paragraph (c)(i) of this section does not apply; and
 - ii. The new family unit size must be used to determine the payment standard.
2. The Johnson City Housing Authority will pay a monthly housing assistance payment on behalf of the family that equals the lesser of:
 - a. The payment standard minus the total tenant payment; or
 - b. The gross rent minus the total tenant payment.
- E. Manufactured Home Space Rental: Section 8 Vouchers
 1. The payment standard for a participant renting a manufactured home space is the published FMR for rental of a manufactured home space.
 2. The space rent is the sum of the following as determined by the Housing Authority:
 - a. Rent to the owner for the manufactured home space;
 - b. Owner maintenance and management charges for the space; and
 - c. Utility allowance for tenant paid utilities.
 3. The participant pays the rent to owner less the HAP.
 4. HAP equals the lesser of:
 - a. The payment standard minus the total tenant payment; or
 - b. The rent paid for rental of the real property on which the manufactured home owned by the family is located.
- F. Rent for Families under the Non-citizen Rule

A mixed family will receive full continuation of assistance if all of the following conditions are met:

Plan Element 6.3 HCV Rent Determination

1. The family was receiving assistance on June 19, 1995;
2. The family was granted continuation of assistance before November 29, 1996;
3. The family's head or spouse has eligible immigration status; and
4. The family does not include any person who does not have eligible status other than the head of household, the spouse of the head of household, any parent of the head or spouse, or any child (under the age of 18) of the head or spouse.

If a mixed family qualifies for prorated assistance but decides not to accept it, or if the family has no eligible members, the family may be eligible for temporary deferral of termination of assistance to permit the family additional time for the orderly transition of some or all of its members to locate other affordable housing. Under this provision the family receives full assistance. If assistance is granted under this provision prior to November 29, 1996, it may last no longer than three years. If granted after that date, the maximum period of time for assistance under the provision is 18 months. The Johnson City Housing Authority will grant each family a period of 6 months to find suitable affordable housing. If the family cannot find suitable affordable housing, the Johnson City Housing Authority will provide additional search periods up to the maximum time allowable.

Suitable housing means housing that is not substandard and is of appropriate size for the family. Affordable housing means that it can be rented for an amount not exceeding the amount the family pays for rent, plus utilities, plus 25%.

The family's assistance is prorated in the following manner:

1. Find the prorated housing assistance payment (HAP) by dividing the HAP by the total number of family members, and then multiplying the result by the number of eligible family members.
2. Obtain the prorated family share by subtracting the prorated HAP from the gross rent (contract rent plus utility allowance).
3. The prorated tenant rent equals the prorated family share minus the full utility allowance.

11.6 UTILITY ALLOWANCE

The Housing Authority maintains a utility allowance schedule for all tenant-paid utilities (except telephone), for cost of tenant-supplied refrigerators and ranges, and for other tenant-paid housing services (e.g., trash collection (disposal of waste and refuse)).

Plan Element 6.3 HCV Rent Determination

The utility allowance schedule is determined based on the typical cost of utilities and services paid by energy-conservative households that occupy housing of similar size and type in the same locality. In developing the schedule, the Housing Authority uses normal patterns of consumption for the community as a whole and current utility rates.

The Housing Authority reviews the utility allowance schedule annually and revises any allowance for a utility category if there has been a change of 10% or more in the utility rate since the last time the utility allowance schedule was revised. The Housing Authority maintains information supporting the annual review of utility allowances and any revisions made in its utility allowance schedule.

The Housing Authority uses the appropriate utility allowance for the size of dwelling unit actually leased by the family (rather than the family unit size as determined under the Housing Authority subsidy standards).

At each reexamination, the Housing Authority applies the utility allowance from the most current utility allowance schedule.

The Housing Authority will approve a request for a utility allowance that is higher than the applicable amount on the utility allowance schedule if a higher utility allowance is needed as a reasonable accommodation to make the program accessible to and usable by the family member with a disability.

The utility allowance will be subtracted from the family's share to determine the amount of the Tenant Rent. The Tenant Rent is the amount the family owes each month to the owner. The amount of the utility allowance is then still available to the family to pay the cost of their utilities. Any utility cost above the allowance is the responsibility of the tenant. Any savings resulting from utility costs below the amount of the allowance belong to the tenant.

11.7 DISTRIBUTION OF HOUSING ASSISTANCE PAYMENT

The Housing Authority pays the owner the lesser of the housing assistance payment or the rent to owner. If payments are not made when due, the owner may charge the Johnson City Housing Authority a late payment, agreed to in the Contract and in accordance with generally accepted practices in the Johnson City Housing Authority jurisdiction.

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

4. Operation and Management

Plan Element 6.4 Operation and Management

6.4 Johnson City Housing Authority Maintenance Operation & Management

The mission of the Department of Physical Services is:

- To ensure that all units, buildings, grounds and equipment are maintained in a decent, safe, and sanitary manner
 - To continue to analyze and assess the Authority's needs and to address those needs in serving the Public Housing Community
 - To ensure that all emergency work orders are corrected or abated within a 24 Hr. period
 - To provide 24 Hour/7 days a week on-call maintenance service at all sites.
 - To assure departmental compliance with all HUD regulations and requirements
 - To prepare all vacant units for re-rental by efficient turnaround procedures that meet all HUD guidelines
 - To ensure all materials and supplies are obtained in accordance with the Authority's Procurement Policy, by assuring fair completion and cost efficient purchasing
- The schedule of Maintenance and Repair charges are located at Administrative Office and available for review.

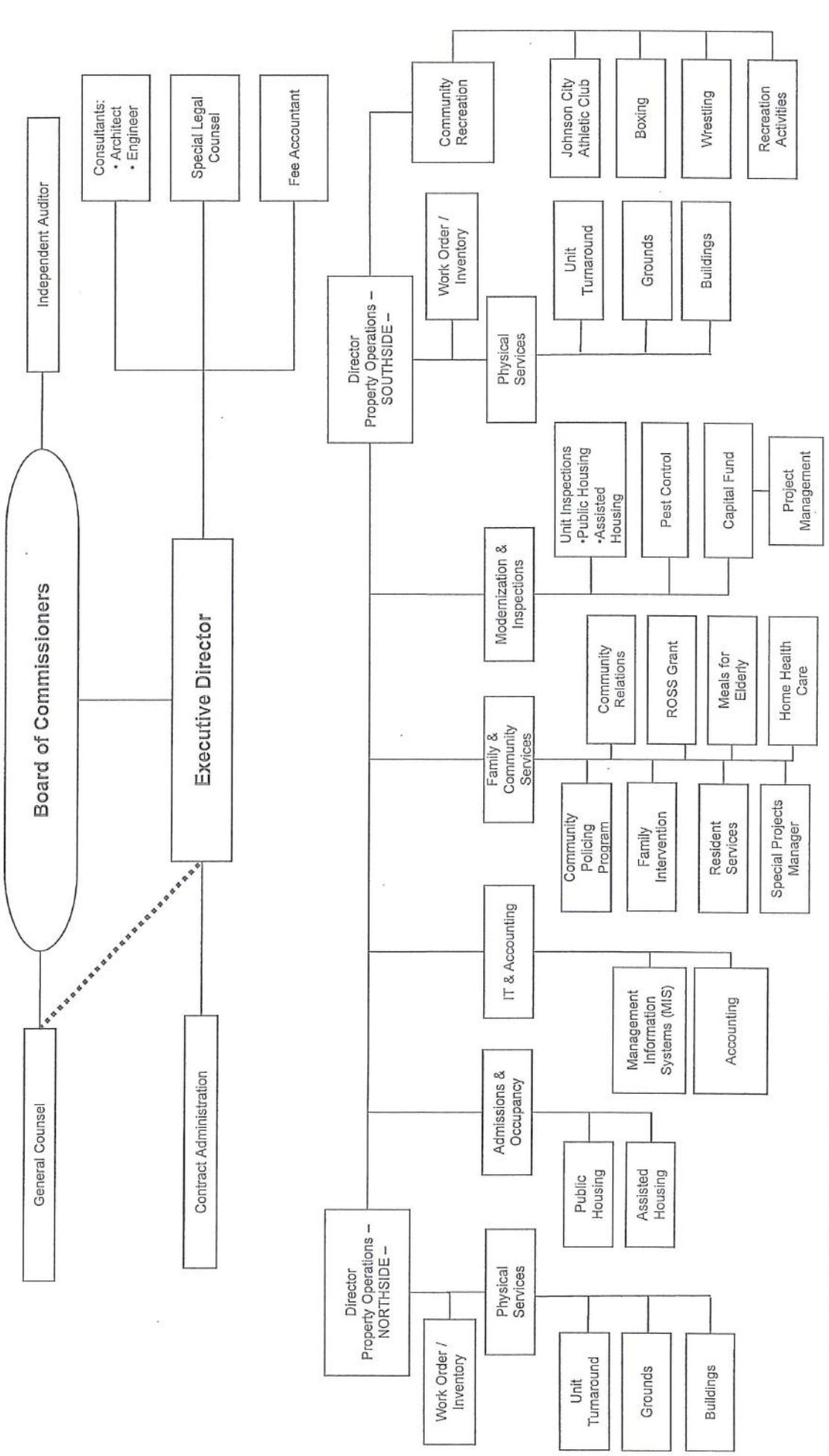
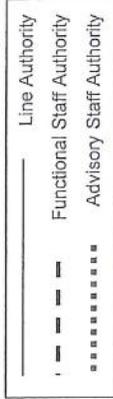
6.4 Johnson City Housing Authority Pest Control Operation & Management

The primary objective of Pest Control for the Johnson City Housing Authority is to eliminate pests such as roaches, etc. by treating units with approved pest control applications and educating residents concerning the eradication of these pests. The Johnson City Housing Authority has one licensed technician and one certified technician that are dedicated to these tasks. The technicians attend classes and seminars on a continuing basis to keep certifications intact and stay abreast of regulations. Units are inspected and treated monthly. The primary treatment application is a gel type that is safe but yet effective and does not have the residue or odor that many aerosol sprays do. Resident are also counseled on housekeeping and how their living conditions can contribute to minimizing and eliminating pests.

Pest Control Policy is located at Administrative Office and available for review.

JOHNSON CITY HOUSING AUTHORITY

Functional Organization Structure



Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

5. Grievance Procedures

JOHNSON CITY HOUSING AUTHORITY

901 Pardee Street
Post Office Box 59
Johnson City, TN 37605-0059
Office (423) 232-4784
Fax (423) 232-4789

Grievance Procedure

Adopted: October 21, 1999
Reference: Resolution No. FFY99-40

TABLE OF CONTENTS

GRIEVANCE PROCEDURE

1.0	PURPOSE.....	1
2.0	GOVERNING LAW.....	1
3.0	APPLICABILITY.....	1
4.0	DEFINITIONS.....	2
5.0	INCORPORATION IN LEASES.....	4
6.0	INFORMAL SETTLEMENT OF GRIEVANCES.....	4
7.0	FORMAL GRIEVANCE HEARING.....	5
8.0	SELECTION OF HEARING OFFICER.....	6
9.0	SCHEDULE OF HEARING.....	7
10.0	PROCEDURES GOVERNING HEARINGS.....	8
11.0	INFORMAL HEARING PROCEDURES FOR DENIAL OF ASSISTANCE ON THE BASIS OF INELIGIBLE IMMIGRATION STATUS.....	9
12.0	DECISION OF THE HEARING.....	9
13.0	NOTICES.....	10
14.0	MODIFICATION.....	11
15.0	MISCELLANEOUS.....	11
16.0	ROLL CALL FOR GRIEVANCE PROCEDURE.....	12
	EXHIBIT 1 — HEARING OFFICER.....	13

15.0	MISCELLANEOUS.....	11
16.0	ROLL CALL FOR GRIEVANCE PROCEDURE.....	13

JOHNSON CITY HOUSING AUTHORITY

PUBLIC HOUSING GRIEVANCE PROCEDURE

1.0 PURPOSE

This grievance procedure has been adopted to provide a forum and procedure for Residents to seek the just, effective, and efficient settlement of grievances against the Johnson City Housing Authority ("Authority").

2.0 GOVERNING LAW

- A. Quality Housing and Work Responsibility Act of 1998 ("Act"), Subtitle F – Safety and Security in Public and Assisted Housing, Section 575.
- B. March 28, 1996, President Clinton's "One-Strike and You're Out" Policy for public housing Residents; "Housing Opportunity Program Extension Act of 1996," P.L. 104-120.
- C. Section 6(k) of the U.S. Housing Act of 1937 (42 U.S.C. sec. 1437d (k)) and subpart B of 24 CFR part 966 (24 CFR secs. 966.50 - 966.57).

3.0 APPLICABILITY

In accordance with applicable federal law and regulations, this grievance procedure shall be applicable to all individual grievances (as defined in Section 4.0 – DEFINITIONS) between Resident and Authority with the following two exceptions:

- A. This grievance procedure is not applicable to disputes between Residents not involving the Authority, or to class grievances involving groups of Residents. Also, this grievance procedure is not intended as a forum for initiating or negotiating policy changes between Residents, or groups of Residents, and the Authority's Board of Commissioners.
- B. HUD has issued a due process determination that the law of the State of Tennessee requires that Resident be given the opportunity for a hearing in court which provides the basic elements of due process (as defined in Section 4.0 – DEFINITIONS) before eviction from a dwelling unit. Therefore, the Authority has elected to determine that this grievance procedure shall not be applicable to any termination of tenancy or eviction that involves:

1. ANY criminal activity by any household member or guest that threatens the health, safety, or right to peaceful enjoyment of the premises by other Residents or employees of the Authority.
2. ANY violent or drug-related criminal activity by any household member or guest, *on or off such premises*, or any activity resulting in a felony conviction.

NOTE: *The Authority has a One-Strike or "Zero Tolerance" Policy with respect to violation(s) of lease terms regarding violent or drug-related criminal activity.*

3. ANY alcohol abuse, if such abuse creates a threat to the health, safety, or the right to peaceful enjoyment of the premises by other Residents or employees of the Authority.

4.0 DEFINITIONS

The following definitions shall be applicable to this grievance procedure:

- A. ***Grievance:*** Any dispute which a Resident may have with respect to an action or a failure to act by the Authority in accordance with the individual Resident's lease or the Authority regulations, which adversely affects the individual Resident's rights, duties, welfare, or status. Grievance does not include any dispute a Resident may have with the Authority concerning a termination of tenancy or eviction that involves:
 1. ANY criminal activity by any household member or guest that threatens the health, safety, or right to peaceful enjoyment of the premises by other Residents or employees of the Authority.
 2. ANY violent or drug-related criminal activity by any household member or guest, *on or off such premises*, or any activity resulting in a felony conviction.
 3. ANY alcohol abuse, if such abuse creates a threat to the health, safety, or the right to peaceful enjoyment of the premises by other Residents or employees of the Authority.
- B. ***CFR:*** The Code of Federal Regulations, which contains the federal regulations governing this grievance procedure (CFR 966.50).

- C. **Complainant:** Any Resident (as defined in this section) whose grievance is presented to the Central Administrative Office of the Authority in accordance with the requirements set forth in this procedure.
- D. **Drug-Related Criminal Activity:** The illegal manufacture, sale, distribution, use or possession with intent to manufacture, sell, distribute, or use a controlled substance, as defined in sec. 102 of the Controlled Substances Act (21 U.S.C. sec. 802) as from time to time amended.
- E. **Alcohol Abuse:** The over-indulgence of alcohol to the point where such consumption interferes with the health, safety, or right to peaceful enjoyment of the premises by other Residents or employees of the Authority.
- F. **Authority:** The Johnson City Housing Authority, a body corporate organized and existing under the laws of the State of Tennessee.
- G. **Elements of Due Process:** The following procedural safeguards are required to be followed in any eviction action or a termination of tenancy in a state or local court:
1. Adequate notice to the Resident of the grounds for terminating the tenancy and for eviction;
 2. Right of the Resident to be represented by counsel;
 3. Opportunity for the Resident to refute the evidence presented by the Authority, including the right to confront and cross examine witnesses and to present any affirmative legal or equitable defense which the Resident may have;
 4. A decision on the merits.
- H. **Hearing Officer:** An impartial person selected in accordance with 24 CFR sec. 966.55 and this grievance procedure to hear grievances and render decisions with respect thereto.
- I. **HUD:** The United States Department of Housing and Urban Development.
- J. **Notice:** As used herein, the term notice shall, unless otherwise specifically provided, mean written notice. (See Section 13.0 – NOTICES for specific criteria regarding notices.)
- K. **The "Regulations":** The HUD regulations contained in subpart B of 24 CFR part 966.50.

- L. *Resident Organization:* An organization of Residents, which may include any Resident management corporation or Resident council.
- M. *Resident:* The adult person(s) other than a live-in aid:
1. Who resides in the unit and who executed the lease with the Authority as lessee of the dwelling unit, or, if no such person(s) resides in the unit,
 2. The person who resides in the unit, and who is the remaining head of household of the Resident family residing in the dwelling unit.
- N. *Business Days:* Monday through Friday of each week, except for legal holidays recognized by the federal government.

5.0 INCORPORATION IN LEASES

This grievance procedure shall supersede any and all prior grievance procedures heretofore adopted by the Johnson City Housing Authority Board of Commissioners ("Board"), and shall be incorporated by reference in all leases between Residents and the Authority at all public housing dwelling units, whether or not so specifically provided in such leases.

6.0 INFORMAL SETTLEMENT OF GRIEVANCES

- A. *Initial Presentation.* Any grievance must be personally presented, either orally or in writing, to the Authority's Director of Admissions and Occupancy, or the Director's designated representative, whose office is located at 901 Pardee Street, Post Office Box 59, Johnson City, Tennessee 37605-0059, no later than five (5) business days after the occurrence of the event. Subsequent to the presentation of the grievance by the Complainant, the Director will assign an informal settlement hearing number to the case and provide same to the Complainant for the purpose of confirming the presentation of the grievance by the Complainant.
- B. *Informal Settlement Conference.* If the grievance is determined by the Authority to not fall within one of the exclusions mentioned in Section 3.0 – APPLICABILITY, then the Authority will, within five (5) business days after the initial presentation of the grievance, informally discuss the grievance with the Complainant or his/her representative(s) in an attempt to settle the grievance without the necessity of a formal hearing. If the informal settlement conference cannot occur at the time the grievance is initially presented by the Complainant, then the Complainant will be

promptly notified in writing of the time and place for the informal settlement conference.

- C. *Written Summary.* Within five (5) business days after the informal settlement conference, a summary of the informal discussion must be prepared by the Authority and a copy thereof must be provided to the Complainant. The summary must be in writing and must specify the names of the participants in the discussion, the date of the discussion, the nature of the proposed disposition of the grievance, and the specific reasons for such disposition. This written summary will also specify the procedures by which the Complainant may obtain a formal hearing if not satisfied by the proposed disposition of the grievance. A copy of the written summary must also be placed in the Complainant's Resident file.

7.0 FORMAL GRIEVANCE HEARING

The following procedures apply to the request for a formal grievance hearing under this procedure:

- A. *Request for Hearing:* If the Complainant is not satisfied with the results of the informal settlement conference, the Complainant must submit a written request for a formal hearing to the Authority's Director of Admissions and Occupancy, whose office is located at 901 Pardee Street, Post Office Box 59, Johnson City, Tennessee 37605-0059, no later than five (5) business days after the date Complainant receives the written summary of the informal settlement conference delivered as required under Section 6.0 – INFORMAL SETTLEMENT OF GRIEVANCES.

Complainant's *WRITTEN* request for a formal hearing *MUST* specify:

1. The reasons for the grievance; and
 2. The action or relief sought by the Complainant; and
 3. If the Complainant so desires, a statement setting forth the times at which the Complainant will be available for a hearing during the next ten (10) business days; and
 4. If the Complainant has failed to attend an informal discussion conference, a request that the hearing officer waive this requirement.
- B. *Failure to Request Hearing:* If the Complainant fails to request a formal hearing within five (5) business days after receiving the written summary of the informal settlement conference, the Authority's decision rendered at the informal settlement

conference BECOMES FINAL and the Authority is not thereafter obligated to offer the Complainant a formal hearing.

8.0 SELECTION OF HEARING OFFICER

All grievance hearings must be conducted by an impartial person or persons appointed by the Authority after consultation with Resident organizations in accordance with 24 CFR 966.55.

- A. The person(s) who is(are) presently appointed to serve as hearing officer for grievances under this grievance procedure is listed in Exhibit 1, attached hereto and incorporated herein by reference. Additional appointments shall be made in the manner set forth in this section and Exhibit 1 will be modified or amended accordingly.
- B. The designation of hearing officers for particular grievance hearings shall be governed by the following provisions.
 1. All hearings will be held before a single hearing officer.
 2. Appointments to serve as a hearing officer with respect to a particular grievance shall be made by the Authority, if applicable, in random order, subject to availability of the hearing officer to serve in each such case. The Authority may employ any reasonable system for random order choice.
 3. No member of the Authority's Board of Commissioners or staff may be appointed as hearing officer in connection with the grievance contesting an action which was either made or approved by proposed appointee, or which was made or approved by a person under whom the proposed appointee works or serves as a subordinate.
 4. No person shall accept an appointment, or retain an appointment, once selected as a hearing officer, if it becomes apparent that such person is not fully capable of impartiality. Persons who are designated to serve as hearing officers must disqualify themselves from hearing grievances that involved personal friends, relatives, persons with whom they have any business relationship, or grievances in which they have some personal interest. Further, such persons are expected to disqualify themselves if the circumstances are such that a significant perception of partiality exists and is reasonable under the circumstances. If a Complainant fails to object to the designation of the hearing officer on the ground of partiality, at the commencement or before the hearing, such objection is deemed to be waived, and may not thereafter be made.

In the event that a hearing officer fails to disqualify him/herself as required in this grievance procedure, the Authority will remove the officer from the list of persons appointed for such purposes, invalidate the results of the grievance hearing in which such person should have, but did not, disqualify himself or herself. The Authority will then schedule a new hearing, and assign a new hearing officer.

9.0 SCHEDULE OF HEARINGS

A. *Formal Hearing Prerequisites:* A Complainant DOES NOT HAVE A RIGHT to a grievance hearing unless the Complainant has satisfied the following prerequisites to such a hearing:

1. The Complainant has requested a hearing in writing.
2. The Complainant has completed the informal settlement conference procedure or has requested a waiver for good cause.
3. **Rent Escrow Deposit.** If the matter involves the amount of rent which the Authority claims is due under the Complainant's lease, the Complainant must have paid to the Authority an amount equal to the amount due and payable as of the first of the month preceding the month in which the complained of act or failure to act took place. And, in the case of situations in which hearings are, for any reason delayed, the Complainant must thereafter deposit the same amount of the monthly rent in an escrow account monthly until the complaint is resolved by decision of the hearing officer. Unless waived by the Authority in writing, no waiver will be given by the Authority except in cases of extreme and undue hardship to the Complainant, determined in the sole and absolute discretion of the Authority. However, failure to make payment shall not constitute a waiver of any right the Resident may have to contest the Authority's disposition of Resident's grievance in any appropriate judicial proceeding.

B. *Time, Place, Notice:*

1. Upon Complainant's compliance with the prerequisites to the hearing set forth above, a hearing shall be scheduled by the hearing officer promptly for a time and place reasonably convenient to both the Complainant and the Authority, not later than the tenth (10th) business day after the Complainant has completed such compliance.

2. A written notification specifying the time, place, and the procedures governing the hearing shall be delivered to the Complainant and the appropriate Authority official.

10.0 PROCEDURES GOVERNING HEARINGS

A. *Fair Hearings.* The hearings shall be held before a hearing officer as described in Section 8.0 – SELECTION OF HEARING OFFICER. The Complainant shall be afforded a fair hearing, which shall include:

1. The opportunity to examine before the hearing any Authority documents, including records and regulations that are directly relevant to the hearing.

The Complainant will be allowed to copy any such document at the Complainant's expense. If the Authority does not make the document available for examination upon request by the Complainant, the Authority may not rely on such document at the grievance hearing.

2. The right to be represented by counsel or other person chosen as the Complainant's representative(s) and to have such person(s) make statements on the Complainant's behalf.
3. The right to a private hearing unless the Complainant requests a public hearing. The right to present evidence and arguments in support of the Complainant's complaint, to controvert evidence relied on by the Authority, and to confront and cross examine all witnesses upon whose testimony or information the Authority or its management relies; and
4. A decision solely and exclusively upon the facts presented at the hearing.

B. *Prior Decision in Same Manner.* The hearing officer may render a decision without proceeding with the hearing if they determine that the issue has been previously decided in another proceeding.

C. *Failure to Appear.* If the Complainant or the Authority fails to appear at a scheduled hearing, the hearing officer may make a determination to postpone the hearing for a period not to exceed five (5) business days or may make a determination that the party failing to attend has waived the right to a hearing. In such event, the hearing officer must notify the Complainant and the Authority of the determination.

The failure to attend a grievance hearing shall not constitute a waiver of any right for which the Complainant may have to contest the Authority's disposition of the grievance in an appropriate judicial proceeding.

- D. *Required Showing of Entitlement to Relief.* At the hearing, the Complainant must first make a showing of an entitlement to the relief sought and thereafter the Authority must sustain the burden of justifying the Authority's action or failure to act against which the complaint is directed.
- E. *Informality of Hearing.* The hearing shall be conducted informally by the hearing officer, and oral or documentary evidence pertinent to the facts and issues raised by the complaint may be received without regard to admissibility under the rules of evidence applicable to judicial proceeding.
- F. *Orderly Conduct Required.* The hearing officer shall require the Authority, the Complainant, counsel, and other participants or spectators, to conduct themselves in an orderly fashion. Failure to comply with the directions of the hearing officer to obtain order may result in exclusion from the proceedings or in a decision adverse to the interests of the disorderly party and granting or denial of the relief sought, as appropriate.
- G. *Transcript of Hearing.* The Complainant or the Authority may arrange in advance, and at the expense of the party making the arrangement, for a transcript of the hearing. Any interested party may purchase a copy of such transcript.
- H. *Accommodation to Persons with Disabilities.* The Authority shall provide reasonable accommodation for persons with disabilities to participate in grievance hearings. Reasonable accommodation may include qualified sign language interpreters, readers, accessible locations, or attendants.

11.0 INFORMAL HEARING PROCEDURES FOR DENIAL OF ASSISTANCE ON THE BASIS OF INELIGIBLE IMMIGRATION STATUS

The participant family may request that the Johnson City Housing Authority provide for an informal hearing after the family has notification of the INS decision on appeal, or in lieu of request of appeal to the INS. The participant family must make this request within 30 days of receipt of the *Notice of Denial or Termination of Assistance*, or within 30 days of receipt of the INS appeal decision.

12.0 DECISION OF THE HEARING

At or subsequent to the completion of the grievance hearing, the hearing officer shall make a determination as to the merits of the grievance and the following provisions shall govern.

- A. *Written Decision.* The hearing officer must prepare a written decision, together with the reasons for the decision, within ten (10) business days after the completion of the hearing.
1. A copy of the decision must be sent to the Complainant and the Authority's Executive Director. The Director of Admissions and Occupancy shall retain a copy of the decision in the Complainant's Resident folder.
 2. A copy of such decision, with all names and identifying references deleted, shall also be maintained on file by the Authority and made available for inspection by any prospective Complainant, his representative, or the hearing officer.
- B. *Binding Effect.* The written decision of the hearing officer shall be binding upon the Authority, which shall take all actions, or refrain from any actions, necessary to carry out the decision unless the Authority's Board of Commissioners determines, within ten (10) business days, and properly notifies the Complainant of its determination, that:
1. The grievance does not concern an Authority action or failure to act in accordance or involving the Complainant's lease, or Authority's regulations, which adversely affect the Complainant's rights, duties, welfare, or status; or
 2. The decision of the hearing officer is contrary to applicable Federal, State, or local laws, Authority regulations, HUD regulations, or requirements of the Annual Contributions Contract between HUD and the Authority.
- C. *Continuing Right of Complainant to Judicial Proceedings.* A decision by the hearing officer or Board of Commissioners in favor of the Authority or which denies the relief requested by the Complainant, in whole or in part, shall not constitute a waiver of, nor affect in any way, the rights of the Complainant to a trial or judicial review in any judicial proceedings, which may thereafter be brought in the matter.

13.0 NOTICES

All written notices under this grievance procedure, whether originating from the Authority or the Complainant, shall be deemed delivered: (1) upon personal service thereof upon the Complainant or an adult member of the Complainant's household; (2) upon the date received for or refused by the addressee, in the case of Certified or Registered U.S. Mail; or (3) five (5) business days after the postmark date when mailed via First Class U.S. Mail (other than Certified or Registered Mail).

If a Resident is visually impaired, any notice hereunder delivered to such Resident shall be in an accessible format.

14.0 MODIFICATION

This grievance procedure may not be amended or modified except by approval of a majority of the Board of Commissioners of the Authority, present at a regular meeting or a special meeting called for such purposes. Further, in addition to the foregoing, any changes proposed to be made to this grievance procedure must provide at least thirty (30) days advance notice to Residents and Resident organizations, setting forth the proposed changes and providing an opportunity to present written comments. The comments submitted shall be considered by the Authority, before final adoption of any amendments hereto.

15.0 MISCELLANEOUS

- A. *Captions.* Captions or paragraph headings set forth in this grievance procedure are for convenience of reference only and shall not be construed or interpreted to affect the substance of the paragraphs or sections so captioned.
- B. *Concurrent Notice.* If a Resident has filed a request for grievance hearing hereunder in a case involving the Authority's notice of termination of tenancy, the Complainant should be aware that the State law notice to vacate and the notice of termination of tenancy required under Federal law run concurrently. Therefore, if the hearing officer upholds the Authority's action to terminate tenancy, the Authority may commence an eviction action in court upon the sooner of, the expiration of the date for termination of tenancy and vacation of premises stated in the notice of termination delivered to Complainant, or the delivery of the report of decision of the hearing officer to Complainant.

16.0 ROLL CALL FOR GRIEVANCE PROCEDURE

Motion made by Commissioner Arnold and seconded by
 Commissioner Elrod.

ROLL CALL — GRIEVANCE PROCEDURE	Ayes	Nays	Absent	Abstain
Commissioner Arnold	✓			
Commissioner Elrod	✓			
Commissioner Lancaster			✓	
Commissioner Walters			✓	
Chairperson Wood	✓			

The foregoing is a true copy of a Resolution adopted at a Regular Meeting of the Johnson City Housing Authority of Johnson City, Tennessee, duly called and held on the 21st day of October, 1999.


 EDWARD ZIMBICKI
 Executive Director and Secretary

Exhibit 1 — HEARING OFFICER

Pursuant to 24 CFR Section 966.55, the Authority has selected:

John Taylor, Esq.

as an "impartial person" who will act as Hearing Officer to hear grievances and render decisions thereto.

JOHNSON CITY HOUSING AUTHORITY

TENANT-BASED INFORMAL REVIEW PROCEDURE

The Johnson City Housing Authority will investigate and respond to complaints by participant families, owners, and the general public. The Johnson City Housing Authority may require that complaints other than HQS violations be put in writing. Anonymous complaints are investigated whenever possible.

1.0 INFORMAL REVIEW FOR THE APPLICANT

A. Informal Review for the Applicant

The Johnson City Housing Authority will give an applicant for participation in the Housing Choice Voucher Program prompt notice of a decision denying assistance to the applicant. The notice will contain a brief statement of the reasons for the Johnson City Housing Authority decision. The notice will state that the applicant may request an informal review within 10 business days of the denial and will describe how to obtain the informal review.

B. When an Informal Review is not Required

The Johnson City Housing Authority will not provide the applicant an opportunity for an informal review for any of the following reasons:

1. A determination of the family unit size under the Johnson City Housing Authority subsidy standards.
2. A Johnson City Housing Authority determination not to approve an extension or suspension of a Housing Choice Voucher.
3. A Johnson City Housing Authority determination not to grant approval to lease a unit under the program or to approve a proposed lease.
4. A Johnson City Housing Authority determination that a unit selected by the applicant is not in compliance with HQS.
5. A Johnson City Housing Authority determination that the unit is not in accordance with HQS because of family size or composition.
6. General policy issues or class grievances.
7. Discretionary administrative determinations by the Johnson City Housing Authority.

C. Informal Review Process

The Johnson City Housing Authority will give an applicant an opportunity for an informal review of the Johnson City Housing Authority decision denying assistance to the applicant. The procedure is as follows:

1. The review will be conducted by any person or persons designated by the Johnson City Housing Authority other than the person who made or approved the decision under review or a subordinate of this person.
2. The applicant will be given an opportunity to present written or oral objections to the Johnson City Housing Authority decision.
3. The Johnson City Housing Authority will notify the applicant of the Johnson City Housing Authority decision after the informal review within 14 calendar days. The notification will include a brief statement of the reasons for the final decision.

D. Considering Circumstances

In deciding whether to deny assistance because of action or inaction by members of the family, the Housing Authority may consider all of the circumstances in each case, including the seriousness of the case, the extent of participation or culpability of individual family members, and the effects of denial or termination of assistance on other family members who were not involved in the action or failure.

Evidence of criminal activity. In determining whether to deny assistance based on drug-related criminal activity or violent criminal activity, the Housing Authority may deny assistance if the preponderance of evidence indicates that a family member has engaged in such activity, regardless of whether the family member has been arrested or convicted.

Persons evicted from public housing, Indian housing, Section 23, or any Housing Choice Voucher program because of drug-related criminal activity are ineligible for admission to Housing Choice Voucher programs for a three-year period beginning on the date of such eviction.

If the Housing Authority seeks to deny assistance because of illegal use, or possession for personal use, of a controlled substance, or pattern of abuse of alcohol, such use or possession or pattern of abuse must have occurred within one year before the date that the Housing Authority provides notice to the family of the Housing Authority determination to deny or terminate assistance. In

determining whether to terminate assistance for these reasons the Johnson City Housing Authority will consider evidence of whether the household member:

- A. Has successfully completed a supervised drug or alcohol rehabilitation program (as applicable) and is no longer engaging in the illegal use of a controlled substance or abuse of alcohol;
- B. Has otherwise been rehabilitated successfully and is no longer engaging in the illegal use of a controlled substance or abuse of alcohol; or
- C. Is participating in a supervised drug or alcohol rehabilitation program and is no longer engaging in the illegal use of a controlled substance or abuse of alcohol.
- D. The circumstances leading to the eviction no longer exist. For example, the individual involved in drugs is no longer in the household because the person is incarcerated.
- E. Informal Review Procedures for Denial of Assistance on the Basis of Ineligible Immigration Status

The applicant family may request that the Johnson City Housing Authority provide for an informal review after the family has notification of the INS decision on appeal, or in lieu of request of appeal to the INS. This request must be made by the applicant family within 30 days of receipt of the *Notice of Denial or Termination of Assistance*, or within 30 days of receipt of the INS appeal decision.

For applicant families, the Informal Review Process above will be utilized with the exception that the applicant family will have up to 30 days of receipt of the *Notice of Denial or Termination of Assistance*, or of the INS appeal decision to request the review.

2.0 INFORMAL HEARINGS FOR PARTICIPANTS

- A. When a Hearing is Required
 - 1. The Johnson City Housing Authority will give a participant family an opportunity for an informal hearing to consider whether the following Johnson City Housing Authority decisions relating to the individual circumstances of a participant family are in accordance with the law, HUD regulations, and Johnson City Housing Authority policies:
 - a. A determination of the family's annual or adjusted income, and the use of such income to compute the housing assistance payment.

- b. A determination of the appropriate utility allowance (if any) for tenant-paid utilities from the Johnson City Housing Authority utility allowance schedule.
 - c. A determination of the family unit size under the Johnson City Housing Authority subsidy standards.
 - d. A determination that a Housing Choice Voucher Program family is residing in a unit with a larger number of bedrooms than appropriate for the family unit size under the Johnson City Housing Authority subsidy standards, or the Johnson City Housing Authority determination to deny the family's request for an exception from the standards.
 - e. A determination to terminate assistance for a participant family because of the family's action or failure to act.
 - f. A determination to terminate assistance because the participant family has been absent from the assisted unit for longer than the maximum period permitted under the Johnson City Housing Authority policy and HUD rules.
2. In cases described in paragraphs 2(A)(1)(d), (e), and (f), of this section, the Johnson City Housing Authority will give the opportunity for an informal hearing before the Johnson City Housing Authority terminates housing assistance payments for the family under an outstanding HAP contract.

B. When a Hearing is not Required

The Johnson City Housing Authority will not provide a participant family an opportunity for an informal hearing for any of the following reasons:

- 1. Discretionary administrative determinations by the Johnson City Housing Authority.
- 2. General policy issues or class grievances.
- 3. Establishment of the Johnson City Housing Authority schedule of utility allowances for families in the program.
- 4. A Johnson City Housing Authority determination not to approve an extension or suspension of a Housing Choice Voucher term.

5. A Johnson City Housing Authority determination not to approve a unit or lease.
6. A Johnson City Housing Authority determination that an assisted unit is not in compliance with HQS. (However, the Johnson City Housing Authority will provide the opportunity for an informal hearing for a decision to terminate assistance for a breach of the HQS caused by the family.)
7. A Johnson City Housing Authority determination that the unit is not in accordance with HQS because of the family size.
8. A determination by the Johnson City Housing Authority to exercise or not exercise any right or remedy against the owner under a HAP contract.

C. Notice to the Family

1. In the cases described in paragraphs 2(A)(1)(a), (b), and (c), of this section, the Johnson City Housing Authority will notify the family that the family may ask for an explanation of the basis of the Johnson City Housing Authority's determination, and that if the family does not agree with the determination, the family may request an informal hearing on the decision.
2. In the cases described in paragraphs 2(A)(1)(d), (e), and (f), of this section, the Johnson City Housing Authority will give the family prompt written notice that the family may request a hearing within 10 business days of the notification. The notice will:
 - a. Contain a brief statement of the reasons for the decision; and
 - b. State this if the family does not agree with the decision, the family may request an informal hearing on the decision within 10 business days of the notification.

D. Hearing Procedures

The Johnson City Housing Authority and participants will adhere to the following procedures:

1. Discovery
 - a. The family will be given the opportunity to examine before the hearing any Johnson City Housing Authority documents that are directly relevant to the hearing. The family will be allowed to copy

any such document at the family's expense. If the Johnson City Housing Authority does not make the document(s) available for examination on request of the family, the Johnson City Housing Authority may not rely on the document at the hearing.

- b. The Johnson City Housing Authority will be given the opportunity to examine, at the Johnson City Housing Authority's offices before the hearing, any family documents that are directly relevant to the hearing. The Johnson City Housing Authority will be allowed to copy any such document at the Johnson City Housing Authority's expense. If the family does not make the document(s) available for examination on request of the Johnson City Housing Authority, the family may not rely on the document at the hearing.

Note: The term **document** includes records and regulations.

2. Representation of the Family

At its own expense, a lawyer or other representative may represent the family.

3. Hearing Officer

- a. The hearing will be conducted by any person or persons designated by the Johnson City Housing Authority, other than a person who made or approved the decision under review or a subordinate of this person.
- b. The person who conducts the hearing will regulate the conduct of the hearing in accordance with the Johnson City Housing Authority hearing procedures.

4. Evidence

The Johnson City Housing Authority and the family must have the opportunity to present evidence and may question any witnesses. Evidence may be considered without regard to admissibility under the rules of evidence applicable to judicial proceedings.

5. Issuance of Decision

The person who conducts the hearing must issue a written decision within 14 calendar days from the date of the hearing, stating briefly the reasons for the decision. Factual determinations relating to the individual

circumstances of the family shall be based on a preponderance of the evidence presented at the hearing.

6. Effect of the Decision

The Johnson City Housing Authority is not bound by a hearing decision:

- a. Concerning a matter for which the Johnson City Housing Authority is not required to provide an opportunity for an informal hearing under this section, or that otherwise exceeds the authority of the person conducting the hearing under the Johnson City Housing Authority hearing procedures.
- b. Contrary to HUD regulations or requirements, or otherwise contrary to Federal, State, or local law.
- c. If the Johnson City Housing Authority determines that it is not bound by a hearing decision, the Johnson City Housing Authority will notify the family within 14 calendar days of the determination, and of the reasons for the determination.

E. Considering Circumstances

In deciding whether to terminate assistance because of action or inaction by members of the family, the Housing Authority may consider all of the circumstances in each case, including the seriousness of the case, the extent of participation or culpability of individual family members, and the effects of denial or termination of assistance on other family members who were not involved in the action or failure.

The Housing Authority may impose, as a condition of continued assistance for other family members, a requirement that family members who participated in or were culpable for the action or failure will not reside in the unit. The Housing Authority may permit the other members of a participant family to continue receiving assistance.

At any time, the Housing Authority may deny assistance to an applicant, or terminate assistance to a participant family, if any family member commits: (1) drug-related criminal activity; or (2) violent criminal activity.

If the Housing Authority seeks to terminate assistance because of illegal use, or possession for personal use, of a controlled substance, or pattern of abuse of alcohol, such use or possession or pattern of abuse must have occurred within one year before the date that the Housing Authority provides notice to the family of the Housing Authority determination to deny or terminate assistance. In

determining whether to terminate assistance for these reasons the Johnson City Housing Authority will consider evidence of whether the household member:

1. Has successfully completed a supervised drug or alcohol rehabilitation program (as applicable) and is no longer engaging in the illegal use of a controlled substance or abuse of alcohol;
2. Has otherwise been rehabilitated successfully and is no longer engaging in the illegal use of a controlled substance or abuse of alcohol; or
3. Is participating in a supervised drug or alcohol rehabilitation program and is no longer engaging in the illegal use of a controlled substance or abuse of alcohol.

F. Informal Hearing Procedures for Denial of Assistance on the Basis of Ineligible Immigration Status

The participant family may request that the Johnson City Housing Authority provide for an informal hearing after the family has notification of the INS decision on appeal, or in lieu of request of appeal to the INS. This request must be made by the participant family within 30 days of receipt of the *Notice of Denial or Termination of Assistance*, or within 30 days of receipt of the INS appeal decision.

For the participant families, the Informal Hearing Process above will be utilized with the exception that the participant family will have up to 30 days of receipt of the *Notice of Denial or Termination of INS Decision*, or of the INS appeal decision..

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

6. Designated Housing for Elderly and Disabled Families

NOT APPLICABLE

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

7. Community Service and Self-Sufficiency

JOHNSON CITY HOUSING AUTHORITY

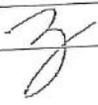
901 Pardee Street
Post Office Box 59
Johnson City, TN 37605-0059
Office (423) 232-4784
Fax (423) 232-4789

Community Service Policy

Issue Date:	05-18-06
Effective Date:	07-01-06
Supersedes:	n/a
Reference:	FFY06-21

Johnson City Housing Authority

Community Service Policy

Section	A&O-005
Page	Page 1 of 6
Issue Date	05-18-06
Effective Date	07-01-06
Supersedes	N/A
Reference	FFY06-21
Approved By	

AUTHORIZATION

Resolution No. FFY06-21¹

PURPOSE

- A. To provide an opportunity for residents of the Johnson City Housing Authority (hereinafter referred to as "Authority") to perform voluntary work or duties that:
- Are a public benefit.
 - Enhance resident self-sufficiency.
 - Increase resident self-responsibility in the community.
 - Serve to improve the quality of life of residents and other citizens of Johnson City.

GOVERNING LAW

- A. The Quality Housing and Work Responsibility Act of 1998, Section 512 Community Service and Family Self-Sufficiency Requirements.
- B. Johnson City Housing Authority Admissions and Continued Occupancy Policy, Section 14.0—Continued Occupancy and Community Service.
- C. Johnson City Housing Authority Lease.

¹ Resolution approving and adopting a Johnson City Housing Authority Community Service Policy.

Johnson City Housing Authority

Community Service Policy

Section	A&O-005
Page	Page 2 of 6
Issue Date	05-18-06
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Approved By	

BACKGROUND

The Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes or other activities that help an individual toward self-sufficiency and economic independence. This is a requirement of the Public Housing Lease.

DEFINITIONS

A. Community Service—volunteer work which includes, but is not limited to:

- Work at a local institution including but not limited to: school, child care center, hospital hospice, recreation center, senior center, adult day care center, homeless shelter, indigent feeding program, cooperative food bank, etc.;
- Work with non-profit organization that serves PHA residents or their children such as: Boy Scouts, Girl Scouts, or Boys or Girls clubs, 4-H program, PAL, Garden Center, Community clean-up programs, beautification programs, other youth or senior organizations;
- Work at the Authority to help improve physical conditions;
- Work at the Authority with youth programs;
- Work at the Authority to help with senior programs;
- Helping neighborhood groups with special projects;
- Working through resident organization to help other residents with problems, serving as an officer in a Resident organization, serving on the Resident Advisory Board; and

Johnson City Housing Authority

Community Service Policy

Section	A&O-005
Page	Page 3 of 6
Issue Date	05-18-06
Effective Date	07-01-06
Supersedes	N/A
Reference	FFY06-21
Approved By	<i>Z</i>

- Caring for the children of other residents so they may volunteer.

NOTE: Political activity is excluded.

B. Self-sufficiency Activities—activities that include, but are not limited to:

- Job readiness programs;
- Job training programs;
- GED classes;
- Substance abuse or mental health counseling;
- English proficiency or literacy (reading) classes;
- Apprenticeships;
- Budgeting and credit counseling;
- Any kind of class that helps a person toward economic independence; and
- Full time student status at any school, college or vocational school.

C. Exempt Adult—an adult member of the family who

- Is 62 years of age or older;
- Has a disability that prevents him/her from being gainfully employed;
- Is the caretaker of a disabled person;
- Is working at least 20 hours per week; or

Johnson City Housing Authority

Community Service Policy

Section	A&O-005
Page	Page 4 of 6
Issue Date	05-18-06
Effective Date	07-01-06
Supersedes	N/A
Reference	FFY06-21
Approved By	<i>[Signature]</i>

- Is participating in a welfare to work program.

REQUIREMENTS OF THE PROGRAM

- A. The eight (8) hours per month may be either volunteer work or self-sufficiency program activity, or a combination of the two.
- B. At least eight (8) hours of activity must be performed each month. An individual may not skip a month and then double up the following month, unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule.
- C. Activities must be performed within the community and not outside the jurisdictional area of the Authority.

FAMILY OBLIGATIONS

- At lease execution or re-examination all adult members (18 or older) of a public housing resident family must:
 1. provide documentation that they are exempt from Community Service requirement if they qualify for an exemption (Attachment 1), and
 2. sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in non-renewal of their lease. (Attachment 2)
- At each annual re-examination, non-exempt family members must present a completed documentation form of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors, or counselors certifying to the number of hours contributed. (Attachment 3)

Johnson City Housing Authority

Community Service Policy

Section	A&O-005
Page	Page 5 of 6
Issue Date	05-18-06
Effective Date	07-01-06
Supersedes	N/A
Reference	FFY06-21
Approved By	

- If a family member is found to be non-compliant at re-examination, he/she and the Head of Household will sign an agreement with the Authority to make up the deficient hours over the next twelve (12) month period. (Attachment 4)

RESPONSIBILITY

- The Department of Admissions and Occupancy has primary responsibility for administration and oversight of and ensuring compliance with the Community Service Policy requirements.

AUTHORITY OBLIGATIONS

1. To the greatest extent possible and practicable, the Authority will:
 - Provide names and contacts at agencies (Attachment 5) that can provide opportunities for residents, including disabled, to fulfill their Community Service obligations. (*According to the Quality Housing and Work Responsibility Act, a disable person who is other wise able to be gainfully employed is not necessarily exempt from the Community Service requirement*); and
 - Provide in-house opportunity for volunteer work or self-sufficiency programs.
- D. The Authority will provide the family with exemption verification forms and Recording/Certification documentation forms and a copy of this policy at lease execution.
- E. The Authority will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Resident may use the Authority's Grievance Procedure if they disagree with the Authority's determination.
- F. Non-Compliance of family member:

Johnson City Housing Authority

Community Service Policy

Section	A&O-005
Page	Page 6 of 6
Issue Date	05-18-06
Effective Date	07-01-06
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Reference	FFY06-21
Approved By	<i>AJ</i>

- At least thirty (30) days prior to annual re-examination and/or lease expiration, the Authority will begin reviewing the exempt or non-exempt status and compliance of family members.
- If the Authority determines a family member to be non-compliant, the Authority will enter into an agreement with the non-compliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period. Failure on the part of the non-compliant family member and/or head of household to enter into an agreement to cure the deficiency will be cause for the Authority to initiate Lease termination action.
- If, at the next annual re-examination, the family member still is not compliant the lease will not be renewed and the entire family will have to vacate unless the non-compliant member agrees to move out of the unit.
- The family may use the Authority's Grievance Procedure to protest the lease termination.

ATTACHMENTS:

- Attachment 1 — Community Service Exemption Certification
- Attachment 2 — Community Service Agreement
- Attachment 3 — Volunteer Time Sheet
- Attachment 4 — Cure Agreement
- Attachment 5 — Volunteer Opportunities
- Attachment 6 — Flowchart

JOHNSON CITY HOUSING AUTHORITY

901 Pardee Street
Post Office Box 59
Johnson City, TN 37605-0059
Office (423) 232-4784 • Fax (423) 232-4789
TDD: 1-800-545-1833, Ext. 762

COMMUNITY SERVICE EXEMPTION CERTIFICATION

I am a Public Housing resident of the Housing Authority. I have been advised by the Housing Authority that the Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt public housing adult residents (18 or older) perform eight (8) hours per month of community service or participate in eight (8) hours of self-sufficiency activities. I have also been provided with a copy of the Housing Authority's Community Service Policy.

I certify that I am eligible for an exemption from the Community Service requirement for the following reason:

- I am 62 years old or older
- I have a disability which prevents me from working (*Certification of Disability Form will serve as documentation*)
- I am the caretaker of a disabled person who is not capable of work or community service (*Certification of Disability Form for the person will serve as documentation*)
- I am engaged in work activities (as defined by the Social Security Act) at least 20 hours every week (*Employment Verification form will serve as documentation*)
- I am participating in a Welfare-to-Work Program (*Must provide verification letter from agency*)
- I am receiving TANF and I am participating in a required economic self sufficiency program or work activity (*Must provide verification from the funding agency that you are complying with job training or work requirements*)
- I am a full time student (*Must provide verification letter from school*)

Resident Name: _____ Date: _____

Signature: _____

Johnson City Housing Authority
Community Service Agreement

This Agreement, by and between the Johnson City Housing Authority (hereinafter referred to as "Authority"), whose principal place of business is 901 Pardee St., Johnson City, TN, and _____, hereinafter referred to as "Resident"), who resides at _____, is for the performance of Community Service work by the Resident in order that s/he may satisfy the requirements of Section 512 of the Quality Housing and Work Responsibility Act of 1998 (CFR 960.600).

WHEREAS, the Resident has interviewed with the Authority's Department of Admission and Occupancy and understands the Community Service requirement; and

WHEREAS, the Resident understands that failure to comply with the Community Service requirement may result in the Authority's not renewing the lease on his/her residence at the end of the 12-month lease term unless the Resident enters into and satisfies an agreement to cure the noncompliance.

THEREFORE, BE IT UNDERSTOOD that this constitutes an official agreement between the Resident and the Authority, effective this ____ day of _____, 200_.

Resident

Occupancy Specialist
Johnson City Housing Authority

JOHNSON CITY HOUSING AUTHORITY

901 Pardee Street
Post Office Box 59
Johnson City, TN 37605-0059
Phone (423) 232-4784 Fax (423) 232-4789

Community Service Requirement CURE AGREEMENT

I, _____, currently residing at _____, hereby agree that I am in non-compliance with the Johnson City Housing Authority's Community Service Policy.

I agree to contribute community service or enter an economic self-sufficiency program for _____ hours to comply with the requirement over the past 12-month period.

I understand that this agreement covers both current commitment and hours in default. I also understand that the first eight hours I work each month will be applied to the current commitment and the balance of _____ hours will be applied to the hours in default.

I promise to continue to work _____ hours each month for _____ months until the past due commitment is satisfied.

I further promise to submit the Community Service Monthly Verification Form— Volunteer Time Sheet at my next annual re-examination.

I have read the policy statement below and understand that my failure to abide by this Cure Agreement will result in one or more of the actions listed.

If, at the next annual re-examination, the family member still is not compliant the lease will not be renewed and the entire family will have to vacate unless the non-compliant member agrees to move out of the unit.

WITNESS MY SIGNATURE this _____ day of _____, _____.

WITNESS

Resident's Signature

Leaseholder's Signature

Approved by
(Housing Authority Representative) Telephone Number

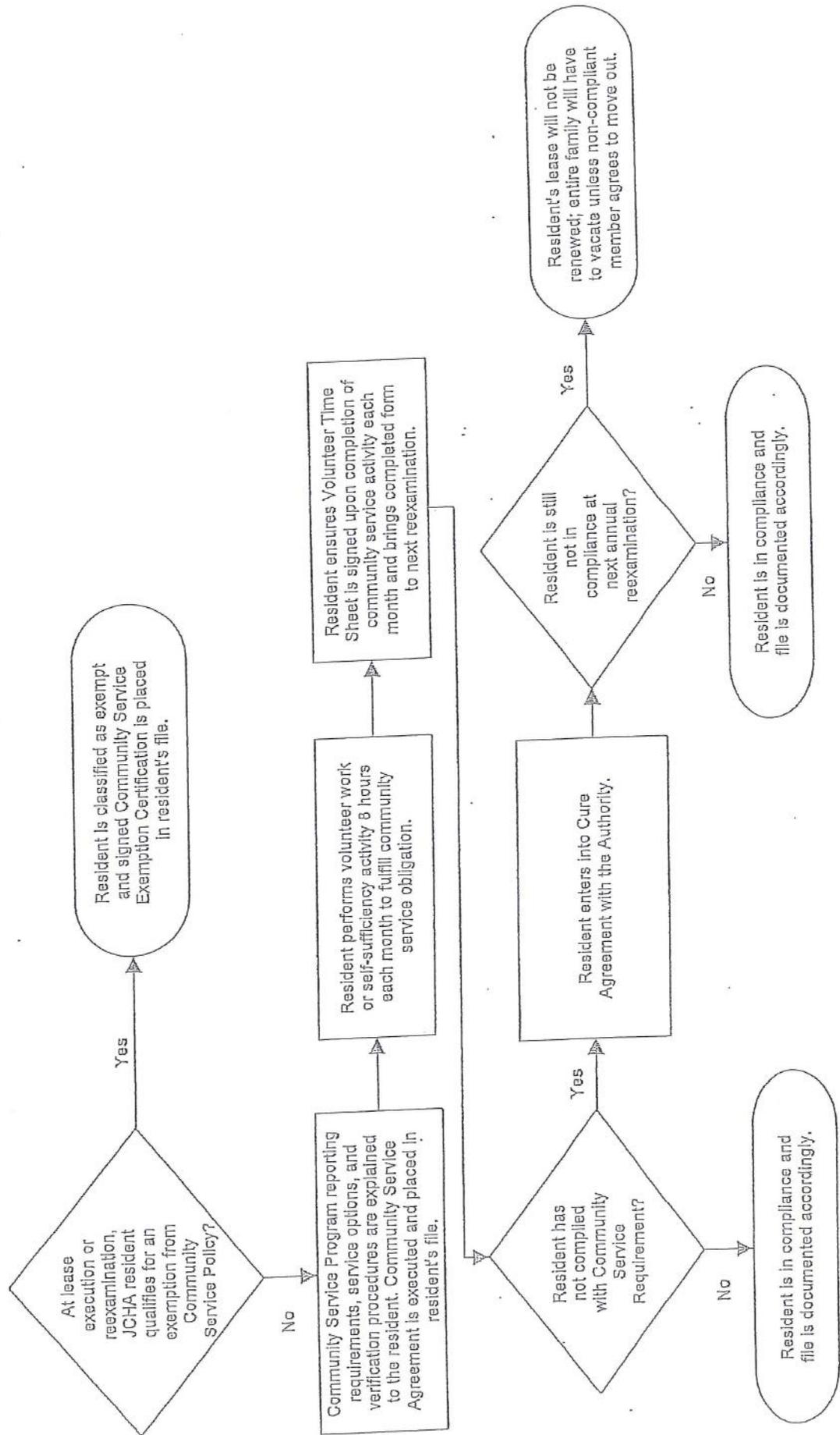
Community Work Service Volunteer Opportunities

Volunteers call:

Coalition for Kids	Amanda Beattie	434-2031
Salvation Army:	Herman Rice	926-2101; 791-1350
Johnson City Public Library:	Willie Weems	434-4474 (or reference 434-4454)
Good Samaritan:		928-0288
Haven of Mercy:	Bill Ingram	929-0616
Carver Recreation Center:	Herb Greenlee	461-8830
Legion Recreation Center:	Bart Lyon	461-4850
Girls Incorporated:	Laura Waddey	928-4251
Mountain View School	Christy Gambrell	434-5260
Keystone Recreation Center	Marilyn Yorrick	232-4627
Headstart	Millie Wainscott	926-7821
J.C. Area United Way	Linda Hoit	282-5682
Haven of Mercy Thrift Store	Joe	929-1474

Community Service Policy Flowchart

Attachment 6



JOHNSON CITY HOUSING AUTHORITY

Agenda Item # 6.c.
Meeting Date: 05/18/06

RESOLUTION NO. FFY06-21

Resolution approving and adopting a Johnson City Housing Authority Community Service Policy.

BY THE JOHNSON CITY HOUSING AUTHORITY

WHEREAS, Section 512 of the Quality Housing and Work Responsibility Act outlines Community Service and Family Self-Sufficiency requirements for PHA residents; and

WHEREAS, said Community Service work requirements are also identified in the Johnson City Housing Authority's ("Authority") Admissions and Continued Occupancy Policy; and

WHEREAS, the Authority's Executive Director drafted a Community Service Policy to provide residents with an opportunity to perform voluntary work or duties that are a public benefit, enhance resident self-sufficiency, increase resident self-responsibility in the community, and serve to improve the quality of life of residents and other citizens of the community while ensuring compliance with the federally mandated program; and

WHEREAS, the Authority's Board of Commissioners have reviewed the Executive Director's proposed Community Service Policy.

NOW, THEREFORE, BE IT RESOLVED BY THE COMMISSIONERS OF THE JOHNSON CITY HOUSING AUTHORITY that they hereby revoke any previously adopted Community Service Policies and adopt the Community Service Policy as presented by the Executive Director, which is attached hereto and becomes a part hereof.

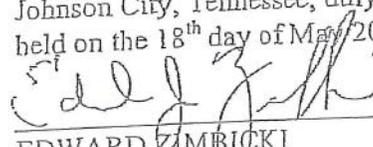
NOW BE IT FURTHER RESOLVED that said Community Service Policy be incorporated into and become a part of the Johnson City Housing Authority's Admissions and Continued Occupancy Policy.

This Resolution shall take effect immediately.

Date of Adoption: May 18, 2006

RESOLUTION NO. FFY06-21	Moved	Seconded	Ayes	Nays	Absent	Abstain
Commissioner Herrin			✓		✓	
Commissioner Murray		✓	✓			
Commissioner Trivett	✓		✓			
Vice Chairperson Elrod			✓			
Chairperson Ross						

The foregoing is a true copy of a Resolution adopted at a Regular Meeting of the Johnson City Housing Authority of Johnson City, Tennessee, duly called and held on the 18th day of May 2006.


 EDWARD ZIMBICKI
 Executive Director and Secretary

Attachment: *Community Service Policy*

Plan Element 6.7 Community Service and Self Sufficiency (Welfare Statement)

Welfare assistance.

1. If the welfare assistance payment includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance income to be included as income consists of:
 - a. The amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus
 - b. The maximum amount that the welfare assistance agency could in fact allow the family for shelter and utilities. If the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under this requirement is the amount resulting from one application of the percentage.
2. If the amount of welfare is reduced due to an act of fraud by a family member or because of any family member's failure to comply with requirements to participate in an economic self-sufficiency program or work activity, the amount of rent required to be paid by the family will not be decreased. In such cases, the amount of income attributable to the family will include what the family would have received had they complied with the welfare requirements and/or had not committed an act of fraud.
3. If the amount of welfare assistance is reduced as a result of a lifetime time limit, the reduced amount is the amount that shall be counted as income.

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

8. Safety and Crime Prevention

Plan Element 6.8 Safety and Crime Prevention

1. The JCHA has 756 units. Anytime you have a large quantity of people living closely together there is the possibility for conflict to arise at some point. The JCHA and the Johnson City Police Department have a partnership to help curtail any issues that come up. Officers respond to calls for service in all JCHA developments and keep the Housing Authority apprised of any problem issues. They also do extra patrol in the developments 24 hours a day, seven days a week.
2. The JCHA has a Memorandum of Understanding with the Johnson City Police Department. This MOU enables the JCPD to be contracted to work details for the JCHA. During those details officers patrol all 8 of our developments. The officers answer the calls for service in Housing, assist the residents as needed and cite unauthorized vehicles. In addition the Community Policing Program Coordinator regularly drives through the developments and answers residents questions and/or concerns.
3. The JCHA and the JCPD work very closely together. There is a Housing Officer that is assigned primarily to patrol the developments and answer calls for service. He also brings all reports related to Housing addresses or residents. The Community Policing Program Coordinator is always available to answer any questions officers might have regarding people in Housing (ie – who is actually on the lease, who is on the Trespass List, which addresses have had numerous complaints and the type of complaints).

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

9. Pets

Johnson City Housing Authority
901 Pardee Street
Johnson City, TN 37605-0059
Office (423) 232-4784
TDD: 1-800-545-1833, Ext. 762
Fax (423) 232-4789

Pet Policy

Adopted : July 20, 2000
Reference: Resolution No. FFY00-41
AO-003

TABLE OF CONTENTS

SECTION	PAGE
I. PURPOSE.....	1
II. GOVERNING LAW.....	1
III. APPLICABILITY.....	1
IV. PET SIZE AND PET TYPE.....	1
V. RESIDENT'S FINANCIAL OBLIGATION.....	2
VI. PET RULES-GENERAL.....	2
VII. INCORPORATION IN LEASES.....	4
VIII. PET INFORMATION SHEET.....	6
IX. ANIMAL REGISTRATION CERTIFICATE.....	7

JOHNSON CITY HOUSING AUTHORITY

PET POLICY

I. PURPOSE

This Pet Policy has been adopted to provide reasonable rules governing the keeping of common household pets by residents of the Authority's owned and managed dwelling accommodations. These rules were adopted to further the contractual interest of the Authority in its continued interest to provide a decent, safe, and sanitary living environment for existing and prospective residents and in protecting and preserving the physical and financial interest in the Authority's facilities.

II. GOVERNING LAW

Section 526 Quality Housing Work Responsibility Act, Section 31 United States Housing Act of 1937 as amended, City of Johnson City Ordinance #3425-Animal Control Ordinance. Pet Ownership in Public Housing (24CFR Part 960 et seq.)

III. APPLICABILITY

In accordance with applicable state, local, and federal regulations, this policy shall be applicable to all residents and prospective residents of the Johnson City Housing Authority's dwelling units.

This Pet Policy is incorporated by reference into the resident lease and violation of the rules may be grounds for removal of the pet or termination of the pet owner's tenancy (or both). See Lease and Grievance Procedure.

Residents are permitted to own and keep common household pets in their dwelling units only in accordance with the Pet Policy and Pet Rules. All residents are strictly prohibited from keeping common household pets that are not housed within the resident's unit.

IV. PET SIZE AND PET TYPE

A companion animal will be defined as a common household pet such as a dog, cat, bird, gerbil, hamster or fish. Pets, other than cats and dogs, shall have suitable housing, e.g. cages or aquariums. There will be no more than one cat or dog or caged mammal per apartment. Under no circumstances will there be more than one pet per apartment allowed. A maximum of two birds may be permitted and in the case of fish, no more than one aquarium with a 20 gallon capacity shall be allowed. The mature size of a dog is limited to a weight not

to exceed 20 pounds (except for a registered service animal). Animals that are exotic, wild, unusual, or different from normal household pets, such as chickens, turkeys, ducks, geese, or similar animals or fowl either domesticated or non-domesticated are prohibited. Raccoons, lizards, rabbits, hedgehogs, snakes, potbelly pigs, ferrets, or any other warm blooded or cold-blooded animal which can normally be found in the wild state and which may pose a nuisance or danger to other residents and/or employees are prohibited. Any animal or animals that attacks, bites, injures or poses a threat to a person or other animals without adequate provocation; or which, because of temperament, conditioning or training, has a known propensity to attack, bite or injure people or other animals are prohibited. *Pit bulls and rottweilers* are not permitted at any time as pets.

V. RESIDENTS' FINANCIAL OBLIGATION

- A. A pet deposit shall be equal to one month Total Tenant Payment or Flat Rent whichever is lesser of the two.
- B. A non-refundable fee of \$100.00 will also be required to cover the reasonable operating costs to the development relating to the presence of pets.
- C. Owners of pets will be charged a \$25.00 maintenance charge for each occasion that the maintenance staff needs to clean up after the pet. If the cost for cleaning up or damage repair exceeds \$25.00, the tenant will be charged the actual cost.
- D. Owners of pets are responsible for all physical damages and/or personal injuries attributed to the pet.
- E. It is at the option of the Housing Authority to let pet owner make installments on the pet deposit and non-refundable fee. This will be done thru a Repayment Agreement with installments broken down to a maximum (3) equal monthly payments.
- F. Birds, fish and small caged mammals are exempt from the pet deposit and non-refundable fee.

VI. PET RULES-GENERAL

- A. No pets may be brought on the premises before it is registered with the Johnson City Housing Authority.
- B. To register a cat or dog, the pet owner must provide:

1. A certificate signed by a licensed veterinarian or state or local authority stating that the pet has received all inoculations required by applicable state and local law. All cats and dogs over the age of six months must be neutered or spayed and tenant must provide such evidence to the Housing Authority.
 2. Proof that the animal is properly licensed and registered in accordance with the City of Johnson City requirements. The ANIMAL REGISTRATION CERTIFICATE, Appendix 1 and 2 must be filled out per City of Johnson City Animal Control Ordinance. See example B. Pet owner is responsible for compliance with City of Johnson City Animal Control Ordinance, currently in effect or as may be amended from time to time.
 3. Information sufficient to identify the pet.
 4. Name, address, and phone number of one or more responsible parties who will care for the pet if the pet owner dies, is incapacitated, or is otherwise unable to care for the pet.
 5. Pet Information Sheet must be filled out. See Exhibit A.
 6. Pet Information Sheet must be updated annually at the annual recertification.
- C. Pets not owned by a resident may be permitted on the premises, however, the animal must be on a leash if brought outside of the apartment and the animal is confined to the resident's unit only. Further, the head of household is responsible for any damage to the personal property or Housing Authority property by the visitor's animal. *There is a (5) day limit per visit.* Visitor must register with Housing Authority before letting animal stay in unit.
- D. Dogs must always be secured by a leash at any time they are brought outside of the unit on development property.
- E. Pets must always be accompanied by and under the control of a responsible individual.
- F. Pets are not allowed to remain stationary in any common area, such as a building entrance, lobbies, hallways, community room, laundry room, etc., which may be used for ingress and egress purposes.
- G. No outdoor cages, runs, shelter, or the like, may be constructed.

H. The pet owner is responsible for cleaning up after the pet inside the apartment and anywhere on development property. Litter boxes must be emptied at least twice weekly. All wastes must be bagged and disposed of properly in the appropriate trash receptacles. Toilets are not designed to handle pet litter. Under no circumstances should any pet debris be deposited in a toilet as blockages will occur. Tenants will be responsible for the cost of repairs or replacements of any damaged toilets or pipes.

In the event that the owner of a pet is hospitalized or institutionalized, he/she must have made prior arrangements for the temporary placement and care of the pet. If no prior arrangement has been made and the pet is left unattended for a period exceeding 48 hours, the Humane Society or other appropriate agency will be contacted to remove the pet.

I. Pets will not be allowed to disturb the health, safety, rights, comfort or quiet enjoyment of other residents. A pet will not create a nuisance to neighbors with excessive barking, whining, chirping, odor or other unruly behavior.

J. Pets shall not interfere with the delivery of maintenance or management or social services provided by the Housing Authority.

K. Pets disturbing the peace and tranquility of neighbors through noise, smell, animal excrement, or other nuisance, which is substantiated, must be removed from premises. Resident will receive one (1) warning letter to correct the situation. Upon a second notice of a written legitimate complaint, the resident shall be advised that a further notice shall be cause for termination of the Lease. In the case of a serious problem, e.g. a vicious dog, this procedure may be shortened in the interest of public safety.

L. The pet owner will be responsible for proper care—good nutrition, grooming, exercise, flea control, routine veterinary care and yearly inoculations.

M. The pet owner will be responsible for the cost of exterminating his/her apartment to supplement regular Housing Authority maintenance pest control, if said service is deemed necessary by the Housing Authority. *Cost will be assessed at \$25 per treatment.*

N. Residents will not encourage stray animals to congregate or inhabit on or in the Authority Building or grounds, including, but not limited to, feeding stray cats, dogs, or wild animals. Any animal shall be deemed to be harbored if it is fed or sheltered for three (3) consecutive days or more. Said animals will be removed from the Authority's premises by appropriated animal protection agencies and the cost could be charged to the tenant violating this rule.

O. The resident is responsible for keeping management informed of any change of information.

VII. INCORPORATION IN LEASES

This Pet Policy shall be incorporated by attachment to and by reference in all leases between tenants and the Johnson City Housing Authority and all Public Housing Dwelling Leases between tenants and Authority whether or not so specifically provided in such leases.

Resident

Date

PET INFORMATION SHEET

Exhibit A

Date: _____

From: _____
Pet Owner

_____ Address

1. Identifying description of the pet _____
2. Breed of pet _____
3. Attending veterinarian's name, address and telephone number _____
4. Certificates of spaying or neutering YES _____ NO _____
5. Certificate of rabies vaccination YES _____ NO _____
6. Dog or Cat licensing certificates in accordance with local and state law. YES ___ NO ___
7. Two alternate caretakers, names, addresses etc. YES ___ NO ___
8. Estimated weight of pet at maturity. _____

EXAMPLE B

APPENDIX 1

ANIMAL REGISTRATION CERTIFICATE
(Top To Be Completed By A Veterinarian)

CERTIFICATE NO. _____ TAG NO. _____

This is to certify that _____ (Owner Name)

(Phone) _____ (Address)

has this date shown evidence of the vaccination and proof of animal being altered on the following described animal.

This license expires on _____

DESCRIPTION OF ANIMAL:

Name _____
Color _____
Dog _____
Cat _____
Breed _____
Male _____
Female _____
Altered _____
Unaltered _____

NOT VALID UNLESS SIGNED BY AN
A Licensed Veterinarian.

BY _____
Veterinarian
Representative

DATE OF ISSUANCE: _____

THE CERTIFICATE BELOW IS AN EXAMPLE (Center will have original)

APPENDIX 2

ANIMAL REGISTRATION CERTIFICATE
CITY OF JOHNSON CITY, TENNESSEE
423-926-8769
CERTIFICATE TAG NO. _____

This is to certify that _____ (Owner Name)

(Phone) _____ (Address)

has this date shown evidence of the rabies vaccination of the following described animal.

DESCRIPTION OF ANIMAL;

Name _____
Breed _____
Color _____

NOT VALID UNLESS SIGNED BY AN ANIMAL
CONTROL CENTER REPRESENTATIVE

Date of Issuance: _____

By _____
Center Representative

Cat Male
 Dog Female

This license expires on _____

JOHNSON CITY HOUSING AUTHORITY

901 Pardee Street

P.O. Box 59

Johnson City, TN 37605-0059

Office (423) 232-4784 Fax (423) 232-4789

PET RIDER

This pet rider to the lease between _____, who resides at _____, and Johnson City Housing Authority, 901 Pardee Street, is made a part of the lease entered between parties on _____.

It is agreed that a pet deposit of \$ _____ and a non-refundable \$ _____ is being collected as in accordance to the Pet Policy.

The pet deposit will be refunded at the time the resident vacates or no longer has ownership of the pet, provided that no damage has been done to the property. Sums necessary to repair such damage will be deducted from the deposit.

1. The resident has read, agreed to, and signed the attached Pet Policy.
2. The resident will keep his/her pet in a responsible manner and provide proper care for it as stated in the Pet Policy.
3. In accordance with the Pet Policy, the resident will provide the name, address, and telephone number, in the space provided below, of two pet caretakers who by signing this form will assume responsibility for the pet should the resident become unable to care for the pet, including medical expenses.

JOHNSON CITY HOUSING AUTHORITY

901 Pardee Street

P.O. Box 59

Johnson City, TN 37605-0059

Office (423) 232-4784 Fax (423) 232-4789

PET CARETAKER # 1

NAME: _____

ADDRESS: _____

TELEPHONE _____

SIGNATURE: _____

PET CARETAKER # 2

NAME: _____

ADDRESS: _____

TELEPHONE _____

SIGNATURE: _____

4. If resident is unable to provide the name of a pet caretaker he/she will provide details of other arrangements which have been made for the proper care of the pet.
5. The pet owner agrees to abide by each rule enumerated in the Pet Policy as outlined, attached hereto, and incorporated by reference.
6. Non-compliance shall be sufficient cause for termination of the resident's lease to which this rider is attached.
7. It is the pet owners responsibility to keep information updated.

Resident

HA Representative

Date

Date

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

10. Civil Rights Certification

Civil Rights CertificationU.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.

Johnson City Housing Authority

TN002

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 Tommy Burleson	Title Chairman of the Board
Signature 	Date 05/19/2011

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

11. Fiscal Year Audit

The most recent fiscal year audit had no findings.

Johnson City Housing Authority
Johnson City, Tennessee

September 30, 2010

SCHEDULE OF FINDINGS AND QUESTIONED COSTS

Section I - Summary of Auditor's Results:

Financial Statements

Type of report issued on the financial statements:	Unqualified
Internal control over financial reporting:	
Material weakness(es) identified?	No
Significant deficiencies identified not considered to be material weaknesses?	None Reported
Noncompliance material to the financial statements noted?	No

Federal Awards

Internal controls over major programs:		
Material weakness(es) identified?		No
Significant deficiencies identified not considered to be material weaknesses?		None Reported
Type of report issued on the compliance for major programs:		Unqualified
Any audit findings disclosed that are required to be reported In accordance with Circular A-133, Section .510(a)?		No
Identification of major programs:	14.871 14.885	Section 8 – Housing Choice Voucher Capital Fund Stimulus Grant
Dollar threshold used to distinguish between Type A and Type B programs:		\$300,000
Did the Authority qualify as a low-risk auditee?		Yes

Section II - Financial Statement Findings:

There were no findings relating to this area for the period ended September 30, 2010.

Section III - Federal Awards:

There were no findings relating to this area for the period ended September 30, 2010.

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

12. Asset Management

Plan Element 6.12 Johnson City Housing Authority Asset Management Statement

The Johnson City Housing Authority (JCHA) recognizes that strategic Asset Management is necessary for the long-term operation of its housing communities. In its Asset Management Plan, JCHA has developed a framework for consideration of each housing community's needs and goals over a five-year period.

JCHA's goals include providing affordable housing over the long-term to its target population, while fostering JCHA's financial health and community reputation. The role of JCHA's Asset Management Plan is to assure that established standards and expectations regarding financial and physical condition, regulatory and statutory compliance, and reporting requirement is being met.

In general JCHA will carry out its Asset Management functions by:

- Addressing strategic objectives of each development
- Planning and addressing the individual physical and modernization needs of each development
- Monitoring financial trends and performance indicators linked to occupancy and vacancies
- Analyze the needs for capital investment within each housing community
- Assure long-term viability by making adequate allowances for maintenance costs and major repairs and replacements
- Perform on-site physical needs assessments at each development
- Developing comprehensive operating budgets at part of JCHA's overall long-range planning

Johnson City Housing Authority

HUD-50075

6.0 PHA Plan Update

PHA Plan Elements

13. Violence Against Women Act (VAWA)

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	1 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A.
Reference	FFY07-10
Approved By	3

I. AUTHORIZATION

Resolution FFY07-10¹

II. PURPOSE AND APPLICABILITY

The purpose of this policy ("Policy") is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and more generally to set forth the Johnson City Housing the Authority's ("Authority") policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by the Authority of all federally subsidized public housing and Section 8 rental assistance under the United States Housing Act of 1937 (42 U.S.C. §1437 *et seq.*). Notwithstanding its title, this Policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

III. COMPLIANCE RESPONSIBILITY

The Director of the Department of Admissions and Occupancy has primary responsibility for ensuring full compliance with the Violence Against Women Act (VAWA) Policy, unless said responsibility has otherwise been designated by the Executive Director in writing.

IV. GOALS AND OBJECTIVES

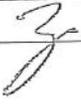
This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by the Authority;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between the Authority, law enforcement authorities, victim service providers, and others to promote the safety and

¹ Resolution approving and adopting a Johnson City Housing Authority Violence Against Women Act Policy.

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section.	AW-AO-030-POL
Page	2 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

well-being of victims of actual and threatened domestic violence, dating violence and stalking, who are assisted by the Authority; and

- B. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by the Authority.

V. OTHER APPLICABLE POLICIES AND PROCEDURES

This Policy shall be referenced in and attached to the Authority's Five-Year Public Housing Agency Plan and shall be incorporated in and made a part of the Authority's Admissions and Continued Occupancy Policy.

The Authority's annual public housing agency plan shall also contain information concerning the Authority's activities, services or programs relating to domestic violence, dating violence, and stalking.

To the extent any provision of this Policy shall vary or contradict any previously adopted policy or procedure of the Authority, the provisions of this Policy shall prevail.

VI. DEFINITIONS

As used in this Policy:

A. *Domestic Violence* – The term '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 cohabiting with or has cohabited 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."

B. *Dating Violence* – means violence committed by a person –

- a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- b) where the existence of such a relationship shall be determined based on a consideration of the following factors:

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	3 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

- i) The length of the relationship.
- ii) The type of relationship.
- iii) The frequency of interaction between the persons involved in the relationship.

C. *Stalking* – means –

- a) (i) to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and (ii) to place under surveillance with the intent to kill, injure, harass or intimidate another person; and
- b) 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 –
 - i) that person;
 - ii) a member of the immediate family of that person; or
 - iii) the spouse or intimate partner of that person;

D. *Immediate Family Member* – means, with respect to a person –

- a) a spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in loco parentis; or
- b) any other person living in the household of that person and related to that person by blood or marriage.

E. *Perpetrator* – means person who commits an act of domestic violence, dating violence or stalking against a victim.

VII. ADMISSIONS AND SCREENING

A. *Non-Denial of Assistance*. The Authority will not deny admission to public housing or to the Section 8 rental assistance program to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	4 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

B. *Mitigation of Disqualifying Information.* When so requested in writing by an applicant for assistance whose history includes incidents in which the applicant was a victim of domestic violence, the Authority, may but shall not be obligated to, take such information into account in mitigation of potentially disqualifying information, such as poor credit history or previous damage to a dwelling. If requested by an applicant to take such mitigating information into account, the Authority shall be entitled to conduct such inquiries as are reasonably necessary to verify the claimed history of domestic violence and its probable relevance to the potentially disqualifying information. The Authority will not disregard or mitigate potentially disqualifying information if the applicant household includes a perpetrator of a previous incident or incidents of domestic violence.

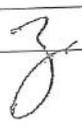
VIII. TERMINATION OF TENANCY OR ASSISTANCE

A. *VAWA Protections.* Under VAWA, public housing residents and persons assisted under the Section 8 rental assistance program have the following specific protections, which will be observed by the Authority:

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be a "serious or repeated" violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights of or assistance to the victim of that violence.
2. In addition to the foregoing, tenancy or assistance will not be terminated by the Authority as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant's control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance described in this paragraph is subject to the following limitations:
 - a) Nothing contained in this paragraph shall limit any otherwise available authority of the Authority or a Section 8 owner or manager to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant's household. However, in taking any such action, neither the Authority nor a Section 8 manager or owner may apply a more demanding standard to the victim of domestic violence dating violence or stalking than that applied to other tenants.

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	5 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

b) Nothing contained in this paragraph shall be construed to limit the authority of the Authority or a Section 8 owner or manager to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or the Authority, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance.

B. **Removal of Perpetrator.** Further, notwithstanding anything in paragraph VIII.A.2. or Federal, State or local law to the contrary, the Authority or a Section 8 owner or manager, as the case may be, may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to a 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 acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the tenant or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by the Authority. Leases used for all public housing operated by the Authority and, at the option of Section 8 owners or managers, leases for dwelling units occupied by families assisted with Section 8 rental assistance administered by the Authority, shall contain provisions setting forth the substance of this paragraph.

IX. VERIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE OR STALKING

A. **Requirement for Verification.** The law allows, but does not require, the Authority or a Section 8 owner or manager to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this Policy. Subject only to waiver as provided in paragraph IX.C., the Authority shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by the Authority. Section 8 owners or managers receiving rental assistance administered by the Authority may elect to require verification, or not to require it as permitted under applicable law.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	6 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

1. **HUD-approved form** – by providing to the Authority or to the requesting Section 8 owner or manager a written certification, on a form approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in this Policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator. (See Exhibit A, form HUD-50066.)
 2. **Other documentation** – by providing to the Authority or to the requesting Section 8 owner or manager 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 the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The professional providing the documentation must sign and 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 meeting the requirements of the applicable definition(s) set forth in this Policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the documentation must also sign and attest to the documentation under penalty of perjury.
 3. **Police or court record** – by providing to the Authority or to the requesting Section 8 owner or manager a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.
- B. **Time allowed to provide verification / failure to provide.** An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by the Authority, or a Section 8 owner or manager to provide verification, must provide such verification within 14 business days (*i.e.*, 14 calendar days, excluding Saturdays, Sundays, and federally-recognized holidays) after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this Policy against a proposed adverse action.
- C. **Waiver of verification requirement.** The Executive Director of the Authority, or a Section 8 owner or manager, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this Policy based on the victim's

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	7 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director, owner or manager. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

X. CONFIDENTIALITY

A. *Right of confidentiality.* All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to the Authority or to a Section 8 owner or manager in connection with a verification required under section IX of this Policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:

1. requested or consented to by the individual in writing, or
2. required for use in a public housing eviction proceeding or in connection with termination of Section 8 assistance, as permitted in VAWA, or
3. otherwise required by applicable law.

B. *Notification of rights.* All tenants of public housing and tenants participating in the Section 8 rental assistance program administered by the Authority shall be notified in writing concerning their right to confidentiality and the limits on such rights to confidentiality.

XI. TRANSFER TO NEW RESIDENCE

A. *Application for transfer.* In situations that involve significant risk of violent harm to an individual as a result of previous incidents or threats of domestic violence, dating violence, or stalking, the Authority will, if an approved unit size is available at a location that may reduce the risk of harm, approve transfer by a public housing or Section 8 tenant to a different unit in order to reduce the level of risk to the individual. A tenant who requests transfer must attest in such application that the requested transfer is necessary to protect the health or safety of the tenant or another member of the household who is or was the victim of domestic violence dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	8 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

- B. *Action on applications.* The Authority will act upon such an application within fourteen (14) business days.
- C. *No right to transfer.* The Authority will make every effort to accommodate requests for transfer when suitable alternative vacant units are available and the circumstances warrant such action. However, except with respect to portability of Section 8 assistance as provided in paragraph XI.E. below the decision to grant or refuse to grant a transfer shall lie within the sole discretion of the Authority, and this Policy does not create any right on the part of any applicant to be granted a transfer.
- D. *Family rent obligations.* If a family occupying the Authority public housing moves before the expiration of the lease term in order to protect the health or safety of a household member, the family will remain liable for the rent during the remainder of the lease term unless released by the Authority. In cases where the Authority determines that the family's decision to move was reasonable under the circumstances, the Authority may wholly or partially waive rent payments and any rent owed shall be reduced by the amounts of rent collected for the remaining lease term from a tenant subsequently occupying the unit.
- E. *Portability.* Notwithstanding the foregoing, a Section 8-assisted tenant will not be denied portability to a unit located in another jurisdiction (notwithstanding the term of the tenant's existing lease has not expired, or the family has not occupied the unit for 12 months) so long as the tenant has complied with all other requirements of the Section 8 program and has moved from the unit in order to protect a health or safety of an individual member of the household who is or has been the victim of domestic violence dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.

XII. COURT ORDERS/FAMILY BREAK-UP

- A. *Court orders.* It is the Authority's policy to honor orders entered by courts of competent jurisdiction affecting individuals assisted by the Authority and their property. This includes cooperating with law enforcement authorities to enforce civil protection orders issued for the protection of victims and addressing the distribution of personal property among household members in cases where a family breaks up.
- B. *Family break-up.* Other Authority policies regarding family break-up are contained in the Authority's Public Housing Admissions and Continuing Occupancy Plan (ACOP) and its Section 8 Administrative Plan.

Johnson City Housing the Authority

Violence Against Women Act (VAWA) Policy

Section	AW-AO-030-POL
Page	9 of 9
Issue Date	04/20/2007
Effective Date	04/20/2007
Supersedes	N/A
Reference	FFY07-10
Approved By	

XIII. RELATIONSHIPS WITH SERVICE PROVIDERS

It is the policy of the Authority to cooperate with organizations and entities, both private and governmental, that provide shelter and/or services to victims of domestic violence. If the Authority staff become aware that an individual assisted by the Authority is a victim of domestic violence, dating violence or stalking, the Authority will refer the victim to such providers of shelter or services as appropriate. Notwithstanding the foregoing, this Policy does not create any legal obligation requiring the Authority either to maintain a relationship with any particular provider of shelter or services to victims of domestic violence or to make a referral in any particular case. The Authority's annual public housing agency plan shall describe providers of shelter or services to victims of domestic violence with which the Authority has referral or other cooperative relationships.

XIV. RELATIONSHIP WITH OTHER APPLICABLE LAWS

Neither VAWA nor this Policy implementing it shall preempt or supersede any provision of Federal, State or local law that provides greater protection than that provided under VAWA for victims of domestic violence, dating violence or stalking.

XV. AMENDMENT

This policy may be amended from time to time by the Authority as approved by the Authority Board of Commissioners.

XVI. EXHIBITS

EXHIBIT A..... form HUD-50066, *Certification of Domestic Violence, Dating Violence, or Stalking*

EXHIBIT B..... Sample Cover Letter for form HUD-50066

* * *

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 attests 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.

DATE: April 15, 2007

TO: Johnson City Housing Authority
901 Pardee Street, P.O. Box 59
Johnson City, TN 37605-0059

CONFIDENTIAL AND PERSONAL

ATTN: Director, Admissions & Occupancy

FROM: Jane Doe
123 Any Street
Anytown, Any State
Home phone: (555) 555-5555
Cell phone: (555) 555-5555

SUBJECT: *Report of Alleged Domestic Violence*

Dear Admissions & Occupancy Director:

Enclosed is form HUD-50066, Certification of Domestic Violence, Dating Violence, or Stalking.

I am submitting this form in confidence for your review and consideration of appropriate action.

If you have any questions, please do not hesitate to contact me at (insert home phone and/or cell phone) between the hours of _____ and _____.

Signature

Address

Enclosure: form HUD-50066

JOHNSON CITY HOUSING AUTHORITY

Agenda Item # 6.d.
Meeting Date: 04/19/07

RESOLUTION NO. FFY07-10

Resolution approving and adopting a Johnson City Housing Authority Violence Against Women Act (VAWA) Policy.

BY THE JOHNSON CITY HOUSING AUTHORITY

WHEREAS, President Bush signed the Violence Against Women Act and Department of Justice Reauthorization Act (VAWA) into law as Public Law 109-162; and

WHEREAS, Section 603 of VAWA amends Section 5A of the U.S. Housing Act (42 U.S.C. 1437c-1) requiring public housing authorities to include in their five-year and annual plan information regarding goals, activities, objectives, or programs that the PHA intends to support or assist victims of domestic violence; and

WHEREAS, among other things the VAWA prohibits the eviction of and removal of assistance from certain persons living in public or Section 8-assisted housing if the grounds for such action includes but is not limited to instances of domestic violence, dating violence, sexual assault, or stalking; and

WHEREAS, it is the goal and objective of the Johnson City Housing Authority ("Authority") to maintain and ensure compliance with all legal requirements of VAWA; and

WHEREAS, the Executive Director has developed a comprehensive policy including objectives and programs intended to support or assist victims of domestic violence et al.; and

WHEREAS, the Authority's Board of Commissioners have reviewed and approve the Violence Against Women Act (VAWA) Policy as presented by the Executive Director, which is attached hereto and becomes a part hereof.

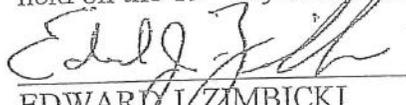
NOW, THEREFORE, BE IT RESOLVED by the Board of Commissioners of the Johnson City Housing Authority that they hereby approve and adopt the Violence Against Women Act (VAWA) Policy as presented and direct the Executive Director to inform residents participating in all public housing and Section 8-assisted housing programs as well as owners participating in the Section 8 Voucher program of said Policy and VAWA.

This Resolution shall take effect immediately.

Date of Adoption: April 19, 2007

RESOLUTION NO. FFY07-10	Moved	Seconded	Ayes	Nays	Absent	Abstain
Commissioner Herrin	✓		✓		✓	
Commissioner Murray		✓	✓			
Commissioner Trivett					✓	
Vice Chairperson Elrod			✓			
Chairperson Ross						

The foregoing is a true copy of a Resolution adopted at a Regular Meeting of the Johnson City Housing Authority of Johnson City, Tennessee, duly called and held on the 19th day of April 2007.


 EDWARD J. ZIMBICKI
 Executive Director and Secretary

Attachment: *Violence Against Women Act (VAWA) Policy*

Johnson City Housing Authority

TN37P002501-09 P&E HUD-50075.1
(including annual statement revision)

HUD-50075 8.0 Capital Improvement

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report

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		Grant Type and Number Capital Fund Program Grant No. TN37P00250109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
PHA Name: Johnson City Housing Authority		Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011		Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant	Summary by Development Account	Original	Revised ²	Obligated	Expended
Line					Total Actual Cost ¹
1	Total non-CFP Funds	0.00	0.00	0.00	0.00
2	1406 Operations (may not exceed 20% of line 21) ³	239,757.00	0.00	239,757.00	239,757.00
3	1408 Management Improvements	239,757.00	0.00	239,757.00	228,761.72
4	1410 Administration (may not exceed 10% of line 21)	119,878.00	0.00	119,878.00	119,878.00
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	25,000.00	0.00	6,595.54	5,295.54
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	16,398.00	0.00	118,336.15	25,861.15
10	1460 Dwelling Structures	507,995.00	0.00	230,281.88	218,174.99
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Non-dwelling Structures	0.00	0.00	0.00	0.00
13	1475 Non-dwelling Equipment	50,000.00	0.00	79,217.36	79,217.36
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
16	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
17	1499 Development Activities ⁴	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, 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		Grant Type and Number		FFY of Grant: 2009	
PEHA Name: Johnson City Housing Authority		Capital Fund Program Grant No: TN37P00250109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant Approval: 2009	
Type of Grant		<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/2011			
		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹
		Total Estimated Cost		Expended	
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	0.00	0.00	0.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	0.00	0.00	0.00
19	1502 Contingency (may not exceed 8% of line 20)	0.00	0.00	0.00	0.00
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,198,785.00	0.00	1,033,822.93	916,945.76
21	Amount of line 20 Related to LBP Activities	0.00	0.00	0.00	0.00
22	Amount of line 20 Related to Section 504 Activities	0.00	0.00	0.00	0.00
23	Amount of line 20 Related to Security - Soft Costs	0.00	0.00	0.00	0.00
24	Amount of line 20 Related to Security - Hard Costs	0.00	0.00	0.00	0.00
25	Amount of line 20 Related to Energy Conservation Measures	0.00	0.00	0.00	0.00
Signature of Executive Director		Signature of Public Housing Director		Date	
				5/19/11	

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
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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		Federal FFY of Grant: 2009						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P00250109 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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 061 NORTH								
TN002-001/Carver	Operations	1406		19,099		19,099.00	19,099.00	100%
	Management Improvements	1408		19,099		19,099.00	19,099.00	100%
	Fees And Costs	1430		2,500		2,500.03	2,500.03	100%
	Trash Blinds/Pads	1450		0.00		35,554.46	21,000.00	59%
	Cyclical painting Program	1460		15,342		14,125.11	11,754.89	83%
	Floor Replacement Program	1460		4,625		13,635.06	6,211.12	45%
	Reasonable Accommodation	1460		2,500		2,456.29	2,456.29	100%
	HVAC	1460		0.00		9,774.67	9,774.67	100%
	Water Heaters	1460		0.00		1,976.38	1,976.38	100%
	Weatherstripping/Thresholds	1460		28,120		0.00	0.00	0%
	SUB-TOTAL			91,285		118,220.00	93,871.38	
TN002-003/Dunbar	Operations	1406		9,442		9,442.00	9,442.00	100%
	Management Improvements	1408		9,442		9,442.00	9,442.00	100%
	Fees And Costs	1430		1,000		1,000.00	722.65	72%
	Trash Blinds/Pads	1450		0.00		3,594.00	0.00	0%
	Cyclical painting Program	1460		3,200		3,200.00	3,200.00	100%
	Floor Replacement Program	1460		1,875		1,973.74	1,875.00	95%
	Reasonable Accommodation	1460		1,000		818.76	818.76	100%
	SUB-TOTAL			25,959		29,470.50	25,500.41	

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226

Part II: Supporting Pages		Federal FFY of Grant: 2009						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P00250109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:						
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	
TN002-004/Fairview	Operations	1406		22,033		22,033.00	22,033.00	100%
	Management Improvements	1408		22,033		22,033.00	22,033.00	100%
	Fees And Costs	1430		2,250		242.65	0.00	0%
	Trash Blinds/Pads	1450		0.00		8,086.50	0.00	0%
	Cyclical painting Program	1460		7,500		7,119.42	7,119.42	100%
	Floor Replacement Program	1460		4,375		4,597.16	4,375.00	95%
	Reasonable Accommodation	1460		2,250		2,321.88	2,321.88	100%
	SUB-TOTAL			60,441		66,433.61	57,882.30	
TN002-005/Parkway	Operations	1406		15,737		15,737.00	15,737.00	100%
	Management Improvements	1408		15,737		15,737.00	15,737.00	100%
	Fees And Costs	1430		1,750		0.00	0.00	0%
	Trash Blinds/Pads	1450		0.00		5,391.00	0.00	0%
	Cyclical painting Program	1460		5,300		858.55	858.55	100%
	Floor Replacement Program	1460		3,125		3,273.11	3,125.00	95%
	Reasonable Accommodation	1460		1,750		1,932.52	1,932.52	100%
	SUB-TOTAL			43,399		42,929.18	37,390.07	
TN-002-010/Lake Terr -ace	Operations	1406		25,496		25,496.00	25,496.00	100%
	Management Improvements	1408		25,496		28,184.50	28,184.50	100%
	Fees And Costs	1430		2,750		0.00	0.00	0%
	Trash Blinds/Pads	1450		0.00		4,314.04	0.00	0%
	Cyclical painting Program	1460		8,600		0.00	0.00	0%
	Floor Replacement Program	1460		5,000		5,271.54	5,000.00	94%
	Reasonable Accommodation	1460		2,750		4,280.98	4,280.98	100%
	SUB-TOTAL			70,092		67,547.06	62,961.48	

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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		Federal FFY of Grant: 2009						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P00250109 CFFP (Yes/ No): No Replacement Housing Factor Grant No:						
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 062 SOUTH								
TN002-002/Keystone	Operations	1406		76,110		76,110.00	76,110.00	100%
	Management Improvements	1408		76,110		73,421.50	62,426.22	85%
	Fees And Costs	1430		7,500		2,852.86	2,072.86	72%
	Dumpster pads/screening	1450		16,398		34,441.15	4,861.15	14%
	Cyclical Painting Program	1460		25,000		32,935.13	32,844.00	99%
	Floor Replacement Program	1460		14,125		15,954.74	15,214.22	95%
	Kitchen Cabinets Renovations	1460		0.00		15,900.00	15,900.00	100%
	Exterior Brick Repairs	1460		0.00		1,352.00	1,352.00	100%
	Reasonable Accommodation	1460		7,500		7,484.48	7,484.48	100%
	HVAC	1460		0.00		13,418.94	13,418.94	100%
	Water Heaters	1460		0.00		2,964.57	2,964.57	100%
	Weatherstripping/Thresholds	1460		10,880		0.00	0.00	0%
	Window Replacement	1460		307,703		0.00	0.00	0%
	SUB-TOTAL			541,326		276,835.37	234,648.44	
TN002-003/Memorial Park	Operations	1406		39,911		39,911.00	39,911.00	100%
	Management Improvements	1408		39,911		39,911.00	39,911.00	100%
	Fees And Costs	1430		4,000		0.00	0.00	0%
	Trash Blinds/Pads	1450		0.00		15,274.50	0.00	0%
	Cyclical Painting Program	1460		13,500		13,500.00	13,500.00	100%
	Floor Replacement Program	1460		7,875		18,742.01	18,322.38	97%
	Foundation Repairs	1460		0.00		2,350.00	2,350.00	100%
	Reasonable Accommodation	1460		4,000		10,229.12	10,229.12	100%
	SUB-TOTAL			109,197		139,917.63	124,223.50	

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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 III: Implementation Schedule for Capital Fund Financing Program						Federal FFY 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 Expenditure End Date	Actual Expenditure End Date		
061 NORTHSIDE PROPERTIES						
TN002-001/Carver	09/14/2011			09/14/2013		
TN002-003/Dunbar	09/14/2011			09/14/2013		
TN002-004/Fairview	09/14/2011			09/14/2013		
TN002-005/Parkway	09/14/2011			09/14/2013		
TN002-010Lake Terrace	09/14/2011			09/14/2013		
062 SOUTHSIDE PROPERTIES						
TN002-002/Keystone	09/14/2011			09/14/2013		
TN002-006/Memorial Park	09/14/2011			09/14/2013		
TN002-007/Pinecrest	09/14/2011			09/14/2013		

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		FFY of Grant: 2009	FFY of Grant Approval: 2009
PHA Name: Johnson City Housing Authority			
Grant Type and Number			
Capital Fund Program Grant No: TN37-PO02-501-09			
Replacement Housing Factor Grant No:			
Date of CFFP:			
Type of Grant	Summary by Development Account	Revised Annual Statement (revision no:2)	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input checked="" type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:2)	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Obligated
		Revised ²	Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	241,198.00	239,757.00
3	1408 Management Improvements	241,198.00	239,757.00
4	1410 Administration (may not exceed 10% of line 21)	120,599.00	119,878.00
5	1411 Audit	0.00	
6	1415 Liquidated Damages	0.00	
7	1430 Fees and Costs	25,000.00	
8	1440 Site Acquisition	0.00	
9	1450 Site Improvement	20,000.00	16,398.00
10	1460 Dwelling Structures	557,995.00	507,995.00
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	
12	1470 Non-dwelling Structures	0.00	
13	1475 Non-dwelling Equipment	0.00	50,000.00
14	1485 Demolition	0.00	
15	1492 Moving to Work Demonstration	0.00	
16	1495.1 Relocation Costs	0.00	
17	1499 Development Activities ⁴	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, 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		FFY of Grant: 2009 FFY of Grant Approval: 2009	
PHA Name: Johnson City Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37-PO02-501-09 Replacement Housing Factor Grant No: Date of CFFP:		
Type of Grant	<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ²
18a	1501 Collateralization or Debt Service paid by the PHA	0.00	Obligated
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0.00	Expended
19	1502 Contingency (may not exceed 8% of line 20)	0.00	
20	Amount of Annual Grant: (sum of lines 2 - 19)	1,205,990.00	1,198,785.00
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>Edul J. Zulk</i>		Date 06/16/2010	Signature of Public Housing Director
			Date

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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		Federal FFY of Grant: 2009						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37-PO02-501-09 CFPP (Yes/No): No Replacement Housing Factor Grant No:						
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 061 NORTHSIDE								
TN002-001/Carver	Operations	1406		19,099				
	Management Improvements	1408		19,099				
	Fees and Costs	1430		2,500				
	Cyclical Painting Program	1460		15,342				
	Floor Replacement Program	1460		4,625				
	Reasonable Accommodation	1460		2,500				
	Weatherstripping/Thresholds	1460		28,120				
	SUB-TOTAL			91,285				
TN002-003/Dunbar	Operations	1406		9,442				
	Management Improvements	1408		9,442				
	Fees and Costs	1430		1,000				
	Cyclical Painting Program	1460		3,200				
	Floor Replacement Program	1460		1,875				
	Reasonable Accommodation	1460		1,000				
	SUB-TOTAL			25,959				
TN002-004/Fairview	Operations	1406		22,033				
	Management Improvements	1408		22,033				
	Fees and Costs	1430		2,250				
	Cyclical Painting Program	1460		7,500				
	Floor Replacement Program	1460		4,375				
	Reasonable Accommodation	1460		2,250				
	SUB-TOTAL			60,441				

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
 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		Federal FFY of Grant: 2009						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37-PO02-501-09 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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 061 NORTHSIDE								
TN002-005/Parkway	Operations	1406		15,737				
	Management Improvements	1408		15,737				
	Fees and Costs	1430		1,750				
	Cyclical Painting Program	1460		5,300				
	Floor Replacement Program	1460		3,125				
	Reasonable Accommodation	1460		1,750				
	SUB-TOTAL			43,399				
TN002-010/Lake Terrace	Operations	1406		25,496				
	Management Improvements	1408		25,496				
	Fees and Costs	1430		2,750				
	Cyclical Painting Program	1460		8,600				
	Floor Replacement Program	1460		5,000				
	Reasonable Accommodation	1460		2,750				
	SUB-TOTAL			70,092				

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
 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		Federal FFY of Grant: 2009						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37-PO02-501-09 CFFP (Yes/ No): No Replacement Housing Factor Grant No:						
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 062 SOUTHSIDE								
TN002-002/Keystone	Operations	1406		77,551	76,110			
	Management Improvements	1408		77,551	76,110			
	Fees and Costs	1430		7,500				
	Dumpster pads/screening	1450		20,000	16,398			
	Cyclical Painting Program	1460		25,000				
	Floor Replacement Program	1460		14,125				
	Reasonable Accommodation	1460		7,500				
	Weatherstripping/Thresholds	1460		60,880	10,880			
	Window Replacement	1460		307,703				
	SUB-TOTAL			597,810	541,326			
TN002-006/Memorial Park	Operations	1406		39,911				
	Management Improvements	1408		39,911				
	Fees and Costs	1430		4,000				
	Cyclical Painting Program	1460		13,500				
	Floor Replacement Program	1460		7,875				
	Reasonable Accommodation	1460		4,000				
	SUB-TOTAL			109,197				

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.

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
 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 III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Johnson City Housing Authority						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹	Federal FFY of Grant: 2009
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
061 NORTHSIDE PROPERTIES						
TN002-001/Carver	09/14/2011		09/14/2013			
TN002-003/Dunbar	09/14/2011		09/14/2013			
TN002-004/Fairview	09/14/2011		09/14/2013			
TN002-005/Parkway	09/14/2011		09/14/2013			
TN002-010/Lake Terrace	09/14/2011		09/14/2013			
062 SOUTHSIDE PROPERTIES						
TN002-002/Keystone	09/14/2011		09/14/2013			
TN002-006/Memorial Park	09/14/2011		09/14/2013			
TN002-007/Pinecrest	09/14/2011		09/14/2013			

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.

Johnson City Housing Authority

TN37P002501-10 P&E HUD-50075.1

HUD-50075 8.0 Capital Improvement

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report

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		Grant Type and Number		FFY of Grant: 2010
PHA Name: Johnson City Housing Authority		Capital Fund Program Grant No: TN37P002501-10		FFY of Grant Approval: 2010
		Replacement Housing Factor Grant No:		
		Date of CFFP:		
Type of Grant		<input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2011		
Line	Summary by Development Account	Total Estimated Cost Revised ²	Obligated	Total Actual Cost ¹ Expended
1	Total non-CFP Funds			
2	1406 Operations (may not exceed 20% of line 21) ³	237,973.00	237,973.00	0.00
3	1408 Management Improvements	237,973.00	237,973.00	0.00
4	1410 Administration (may not exceed 10% of line 21)	118,986.00	118,986.00	0.00
5	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs	20,000.00	0.00	0.00
8	1440 Site Acquisition			
9	1450 Site Improvement	31,000.00	2,853.87	2,853.87
10	1460 Dwelling Structures	408,393.00	0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	58,000.00	0.00	0.00
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment	77,540.00	0.00	0.00
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		FFY of Grant: 2010 FFY of Grant Approval: 2010	
PHA Name: Johnson City Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P0025010 Replacement Housing Factor Grant No: Date of CFPP:		
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2011		<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Revised ²
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)	1,189,865.00	597,785.87
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	25,000	0.00
23	Amount of line 20 Related to Security - Soft Costs	24,500	0.00
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures	81,500	0.00
Signature of Executive Director		Signature of Public Housing Director	
			
Date		Date	
5/18/11		5/18/11	

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 CFPP 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		Federal FFY of Grant: 2010						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-10 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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	
HA Wide Operations	Operations-NS Operations-SS	1406 1406	LS LS	142,784 95,189		142,784 95,189	0.00 0.00	0% 0%
HA Wide Mgmt. Improvements	Security-NS Security-SS CS Coordinator-Salary-NS CS-Coordinator-Salary-SS CS Coordinator-Benefits-NS CS Coordinator-Benefits-SS Director of CS-Salary-NS Director of CS-Salary-SS Director of CS-Benefits-NS Director of CS- Benefits-SS Project Manager-Salary-NS Project Manager-Salary-SS Project Manager-Benefits-NS Project Manager-Benefits-SS Computer Software Training/Travel	1408 1408 1408 1408 1408 1408 1408 1408 1408 1408 1408 1408 1408 1408 1408	LS LS I Position I Position I Position I Position I Position I Position I Position I Position I Position I Position LS LS	237,973 14,700 9,800 28,500 19,000 6,000 4,000 36,000 24,000 6,000 4,000 28,500 19,000 6,000 4,000 24,473 4,000		237,973 14,700 9,800 28,500 19,000 6,000 4,000 36,000 24,000 6,000 4,000 28,500 19,000 6,000 4,000 24,473 4,000	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0% 0%
HA Wide Administration	Director Mod. & Inspections-Salary Director Mod.& Inspections-Benefits Ast.Director Account. & Budgets-Salary Ast.Director Account& Budgets-Benefit Admin. Costs-NS Admin. Costs-SS	1410 1410 1410 1410 1410 1410	I Position I Position I Position30% I Position30% LS LS	237,973 59,000 10,000 15,000 3,000 12,794 19,192		237,973 59,000 10,000 15,000 3,000 12,794 19,192	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0% 0% 0% 0% 0% 0% 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

Part II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-10 CFFP (Yes/ No): No Replacement Housing Factor Grant No:						
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	
			Subtotal	118,986		118,986	0.00	
HA Wide	Computer Hardware/Server	1475	LS	15,540		0.00	0.00	0%
	Comp.Communications-Phone Upgrade	1475	LS	50,000		0.00	0.00	0%
	CF/Mod Vehicle	1475	LS	12,000		0.00	0.00	0%
			Subtotal	77,540		0.00	0.00	
AMP 061	Fees and Costs	1430	N/A	8,000		0.00	0.00	0%
	Concrete Repairs(sidewalks,porches,foundations,etc)	1450	N/A	8,000		0.00	0.00	0%
	Replacement Flooring Supplies - Mod	1460	12 (ut)	8,000		0.00	0.00	0%
	HVAC - Mod	1460	8 (ut)	10,000		0.00	0.00	0%
	Cyclical Painting/ Painter(s)	1460	52 (ut)	36,000		0.00	0.00	0%
	Cabinets - Mod	1460	5 (ut)	10,000		0.00	0.00	0%
	Water Heaters - Mod	1465	8 (ut)	4,000		0.00	0.00	0%
			Subtotal	84,000		0.00	0.00	
AMP 062	Fees and Costs	1430	N/A	12,000		0.00	0.00	0%
	Concrete Repairs(sidewalks,porches,foundations,etc)	1450	N/A	12,000		0.00	0.00	0%
	Replacement Flooring Supplies - Mod	1460	18 (ut)	12,000		0.00	0.00	0%
	HVAC - Mod	1460	12 (ut)	15,000		0.00	0.00	0%
	Cyclical Painting/ Painter(s)	1460	78 (ut)	54,000		0.00	0.00	0%
	Cabinets - Mod	1460	7 (ut)	15,000		0.00	0.00	0%
	Water Heaters - Mod	1465	12 (ut)	15,000		0.00	0.00	0%
			Subtotal	135,000		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 II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-10 CFEP (Yes/No): No Replacement Housing Factor Grant No:						
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 061 NORTH	Reasonable Accommodations	1460	LS	2,500		0.00	0.00	0%
TN002-001/Carver	Floor Replacement Program	1460	LS	4,625		0.00	0.00	0%
	Electrical Upgrade II (200AMP/Power)	1460	30u	68,143		0.00	0.00	0%
	Parking /Paving	1450	10%	10,000		0.00	0.00	0%
	Sub-Total			85,268		0.00	0.00	
TN002-003/Dunbar	Reasonable Accommodations	1460	LS	1,000		0.00	0.00	0%
	Floor Replacement Program	1460	LS	1,875		0.00	0.00	0%
	Sub-Total			2,875		0.00	0.00	
TN002-004/Fairview	Reasonable Accommodations	1460	LS	2,250		0.00	0.00	0%
	Floor Replacement Program	1460	LS	4,375		0.00	0.00	0%
	Sub-Total			6,625		0.00	0.00	
TN002-005/Parkway	Reasonable Accommodations	1460	LS	1,750		0.00	0.00	0%
	Floor Replacement Program	1460	LS	3,125		0.00	0.00	0%
	Stove Replacement	1465.1	LS	15,000		0.00	0.00	0%
	Sub-Total			19,875		0.00	0.00	
TN-002-010/Lake Terr -ace	Reasonable Accommodations	1460	LS	2,750		0.00	0.00	0%
	Floor Replacement Program	1460	LS	5,000		0.00	0.00	0%
	Stove Replacement	1465.1	LS	24,000		0.00	0.00	0%
	Sub-Total			31,750		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 II: Supporting Pages		Federal FFY of Grant: 2010						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-10 CFPP (Yes/No): No Replacement Housing Factor Grant No:						
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 062 SOUTH								
TN002-002/Keystone	Reasonable Accommodations	1460	LS	7,500		0.00	0.00	0%
	Floor Replacement Program	1460	LS	14,125		0.00	0.00	0%
	Erosion Control	1450	LS	1,000		2,853.87	2,853.87	100%
	Electrical Upgrade I (200AMP/Power Serv.)	1460	29u	56,500		0.00	0.00	0%
	HVAC Replacement I	1460	29u	56,500		0.00	0.00	0%
	Sub-Total			135,625		2,853.87	2,853.87	
TN002-003/Memorial Park	Reasonable Accommodations	1460	LS	4,000		0.00	0.00	0%
	Floor Replacement Program	1460	LS	2,875		0.00	0.00	0%
	Sub-Total			6,875		0.00	0.00	
TN002-007/Pinecrest	Reasonable Accommodations	1460	LS	3,250		0.00	0.00	0%
	Floor Replacement Program	1460	LS	6,250		0.00	0.00	0%
	Sub-Total			9,500		0.00	0.00	
	Grand Total for Grant			1,189,865		597,785.87	2,853.87	

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.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program						Federal FFY of Grant: 2010
PHA Name: Johnson City Housing Authority						
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		Actual Obligation End Date	All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date			Original Expenditure End Date	Actual Expenditure End Date	
061 NORTH AMP						
TN002-001/Carver	07/14/2012			07/14/2014		
TN002-003/Dunbar	07/14/2012			07/14/2014		
TN002-004/Fairview	07/14/2012			07/14/2014		
TN002-005/Parkway	07/14/2012			07/14/2014		
TN002-010/Lake Terrace	07/14/2012			07/14/2014		
062 SOUTH AMP						
TN002-002/Keystone	07/14/2012			07/14/2014		
TN002-006/Memorial Park	07/14/2012			07/14/2014		
TN002-007/Pinecrest	07/14/2012			07/14/2014		
HA Wide	07/14/2012			07/14/2014		

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.

Johnson City Housing Authority

Annual Statement HUD-50075.1

HUD-50075 8.0 Capital Improvement

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report

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		FFY of Grant: 2011 FFY of Grant Approval: 2011	
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-11 Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant	<input type="checkbox"/> Reserve for Disasters/Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Original Annual Statement <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 Revised ²	Obligated Total Actual Cost ¹ Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	237,973.00	
3	1408 Management Improvements	237,973.00	
4	1410 Administration (may not exceed 10% of line 21)	118,986.00	
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs	20,000.00	
8	1440 Site Acquisition		
9	1450 Site Improvement	26,000.00	
10	1460 Dwelling Structures	486,393.00	
11	1465.1 Dwelling Equipment—Nonexpendable	19,000.00	
12	1470 Non-dwelling Structures	3,000.00	
13	1475 Non-dwelling Equipment	40,540.00	
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		FFY of Grant: 2011	
PHA Name: Johnson City Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P002501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval: 2011	
Type of Grant	<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		
	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <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 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)	1,189,865.00	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities	25,000.00	
23	Amount of line 20 Related to Security - Soft Costs	24,500.00	
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures	159,097.00	
Signature of Executive Director		Date 05/19/2011	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 CFFP 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		Federal FFY of Grant: 2011						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-11 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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	
HA Wide	Operations-SS	1406	LS	142,784				
Operations	Operations-NS	1406	LS	95,189				
HA Wide	Security-SS	1408	Subtotal	237,973				
Mgmt. Improvements	Security-NS	1408	LS	14,700				
	Comm. Policing Coordinator-Salary-SS	1408	LS	9,800				
	Comm. Policing Coordinator-Salary-NS	1408	1Position	28,500				
	Comm Policing Coordinator BenefitsSS	1408	1Position	19,000				
	Comm. PolicingCoordinatorBenefitsNS	1408	1Position	6,000				
	Director of CS-Salary-SS	1408	1Position	4,000				
	Director of CS-Salary-NS	1408	1Position	37,642				
	Director of CS-Benefits-SS	1408	1Position	25,095				
	Director of CS- Benefits-NS	1408	1Position	6,000				
	Project Manager-Salary-SS	1408	1Position	4,000				
	Project Manager-Salary-NS	1408	1Position	28,500				
	Project Manager-Benefits-SS	1408	1Position	19,000				
	Project Manager-Benefits-NS	1408	1Position	6,000				
	Computer Software	1408	1Position	4,000				
	Training/Travel	1408	LS	22,736				
		1408	LS	3,000				
HA Wide	Director Mod. & Inspections-Salary	1410	Subtotal	237,973				
Administration	Director Mod.& Inspections-Benefits	1410	1Position	61,000				
	Accounts Mgr(Budget&Ledger)-Salary	1410	1Position	10,000				
	Accounts Mgr(Budget&Ledger)-Benefit	1410	1Position30%	15,000				
	Admin. Costs-NS	1410	1Position30%	3,000				
	Admin. Costs-SS	1410	LS	11,794				
		1410	LS	18,192				
			Subtotal	118,986				

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
 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		Federal FFY of Grant: 2011						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-11 CFPP (Yes/No): No Replacement Housing Factor Grant No:						
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	
HA Wide	Communications/Office Equip. Computer Hardware/Server CF/Mod Vehicle	1475 1475 1475	LS LS LS	10,000 15,540 15,000				
AMP 061	Fees and Cost	1430	LS	8,000				
North Amp Wide	Concrete Repairs	1450	As needed	8,000				
	Site Improvements	1450	As needed	2,000				
	Replacement Flooring Supplies-Mod	1460	12 (ut)	8,000				
	HVAC-Mod	1460	8 (ut)	10,000				
	Cyclical Painting / Painter(s)	1460	52(ut)	36,000				
	Cabinets-Mod	1460	5 (ut)	10,000				
	Unit/Bldg. Upgrade (renovations)	1460	As needed	3,280				
	Water Heaters-Mod	1465	8 (ut)	4,000				
	Common Buildings Upgrade (renovations)	1470	As needed	1,200				
			Sub-Total	90,480				
AMP 062	Fees and Cost	1430	LS	12,000				
South Amp Wide	Concrete Repairs	1450	As needed	12,000				
	Site Improvements	1450	As needed	3,000				
	Replacement Flooring Supplies-Mod	1460	18 (ut)	12,000				
	HVAC-Mod	1460	12 (ut)	15,000				
	Cyclical Painting / Painter(s)	1460	78 (ut)	54,000				
	Cabinets-Mod	1460	7 (ut)	15,000				
	Unit/Bldg. Upgrade (renovations)	1460	As needed	4,920				
	Water Heaters-Mod	1465	12(ut)	15,000				
	Common Buildings Upgrade (renovations)	1470	As needed	1,800				
			Sub-Total	144,720				

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
 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		Federal FFY of Grant: 2011						
PHA Name: Johnson City Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P002501-11 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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 061 NORTH	Reasonable Accommodations	1460	LS	2,500				
TN002-001/Carver	Floor Replacement Program	1460	LS	2,500				
	Sub-Total			5,000				
TN002-003/Dunbar	Reasonable Accommodations	1460	LS	1,000				
	Floor Replacement Program	1460	LS	1,000				
	HVAC Replacement	1460	30u	45,000				
	Electrical Upgrade (200Amp)	1460	30u	45,000				
	Sub-Total			92,000				
TN002-004/Fairview	Reasonable Accommodations	1460	LS	2,250				
	Floor Replacement Program	1460	LS	2,250				
	Elect. Upgrade (200 Amp) I	1460	35u	52,500				
	HVAC Replacement I	1460	35u	52,500				
	Sub-Total			109,500				
TN002-005/Parkway	Reasonable Accommodations	1460	LS	1,750				
	Floor Replacement Program	1460	LS	1,750				
	Sub-Total			3,500				
TN-002-010/Lake Terrace	Reasonable Accommodations	1460	LS	2,750				
	Floor Replacement Program	1460	LS	2,750				
	Sub-Total			5,500				

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
 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 III: Implementation Schedule for Capital Fund Financing Program						Federal FFY of Grant: 2011
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		
061 NORTH AMP	07/14/2013		07/14/2015			
TN002-001/Carver	07/14/2013		07/14/2015			
TN002-003/Dunbar	07/14/2013		07/14/2015			
TN002-004/Fairview	07/14/2013		07/14/2015			
TN002-005/Parkway	07/14/2013		07/14/2015			
TN002-010Lake Terrace	07/14/2013		07/14/2015			
062 SOUTH AMP	07/14/2013		07/14/2015			
TN002-002/Keystone	07/14/2013		07/14/2015			
TN002-006/Memorial Park	07/14/2013		07/14/2015			
TN002-007/Pinecrest	07/14/2013		07/14/2015			
HA Wide	07/14/2013		07/14/2015			

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.

Johnson City Housing Authority

Capital Fund Program Five-Year Action Plan HUD-50075.2

HUD-50075 8.0 Capital Improvement

8.2 Capital Fund Program Five-Year Action Plan

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 Johnson City HA TN-002		Locality (City/County & State) Johnson City, Washington, TN.		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number and Name	Work Statement for Year 1 FFY <u>2011</u>	Work Statement for Year 2 FFY <u>2012</u>	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 4 FFY <u>2014</u>	Work Statement for Year 5 FFY <u>2015</u>
A.	Annual Statement	544,393	544,393	544,393	544,393
B.	Physical Improvements Subtotal				
C.	Management Improvements	237,973	237,973	237,973	237,973
D.	PHA-Wide Non-dwelling Structures and Equipment	30,540	30,540	30,540	30,540
E.	Administration	118,986	118,986	118,986	118,986
F.	Other	20,000	20,000	20,000	20,000
G.	Operations	237,973	237,973	237,973	237,973
H.	Demolition				
I.	Development				
J.	Capital Fund Financing – Debt Service				
K.	Total CFP Funds	1,189,865	1,189,865	1,189,865	1,189,865
L.	Total Non-CFP Funds				
M.	Grand Total	1,189,865	1,189,865	1,189,865	1,189,865

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 (Continuation)

PHA Name/Number Johnson City Housing Authority TN-002	Development Number and Name	Work Statement for Year 1 FFY 2011	Locality (City/county & State) Johnson City, Washington, TN.		Original 5-Year Plan FFY 2014	Revision No:
			Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013		
A.		Annual Statement	90,480	90,480	90,480	90,480
B.	Amp061-North Wide-Phy		144,720	144,720	144,720	144,720
B.	Amp062-South Wide-Phy		235,200	235,200	235,200	235,200
B.	Sub-Total					
B.	AMP 061 Northside-Phy					
B.	TN002-001/Carver	45,000	9,500	75,193	42,000	42,000
B.	TN002-003/Dunbar	12,000	2,000	2,000	34,000	34,000
B.	TN002-004/Fairview	79,500	4,500	4,500	53,693	53,693
B.	TN002/005/Parkway	13,500	35,500	83,500	15,500	15,500
B.	TN002-010/ Lake Terrace	5,500	21,500	5,500	20,500	20,500
B.	Sub-Total	155,500	73,000	170,693	165,693	165,693
B.	AMP 062 Southside-Phy					
B.	TN002-002/Keystone	139,193	111,693	20,000	75,000	75,000
B.	TN002-006/Mem. Park	8,000	68,000	112,000	35,000	35,000
B.	TN002-007/Pinecrest	6,500	56,500	6,500	33,500	33,500
B.	Sub-Total	153,693	236,193	138,500	143,500	143,500
B.	B - Total	544,393	544,393	544,393	544,393	544,393
C.	HA Wide- Mgmt. Improv.	237,973	237,973	237,973	237,973	237,973
C.	C-Total	237,973	237,973	237,973	237,973	237,973
D.	HA Wide-NonDwell.-Phy	30,540	30,540	30,540	30,540	30,540
D.	D-Total	30,540	30,540	30,540	30,540	30,540
E.	HA Wide-Admin.	118,986	118,986	118,986	118,986	118,986
E.	E-Total	118,986	118,986	118,986	118,986	118,986
F.	Amp061North Wide-Fees	8,000	8,000	8,000	8,000	8,000
F.	Amp062South Wide-Fees	12,000	12,000	12,000	12,000	12,000
F.	F-Total	20,000	20,000	20,000	20,000	20,000
G.	HA Wide Operations	237,973	237,973	237,973	237,973	237,973
G.	G-Total	237,973	237,973	237,973	237,973	237,973
M.	TOTAL	1,189,865	1,189,865	1,189,865	1,189,865	1,189,865

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012			Work Statement for Year 3 FFY 2013		
	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 Annual Statement	HA Wide Non Dwell-Phy			HA Wide Non Dwell-Phy		
	1475 Computer Hardware/Servers	LS	15,270	1475 Computer Hardware/Servers	LS	15,270
	1475 Communications/ Office Equip.	LS	15,270	1475 Communications/Office Equip.	LS	15,270
	Sub-Total		30,540	Sub-Total		30,540
	AMP061-North Amp Wide-Phy			AMP061-North Amp Wide-Phy		
	1450 Concrete Repairs	As needed	8,000	1450 Concrete Repairs	As needed	8,000
	1450 Site Improvements	As needed	2,000	1450 Site Improvements	As needed	2,000
	1460 Repl. Flooring Supplies-Mod	12 (ut)	8,000	1460 Repl. Flooring Supplies-Mod	12 (ut)	8,000
	1460 HVAC- Mod	8 (ut)	10,000	1460 HVAC- Mod	8 (ut)	10,000
	1460Cyclical Painting/Painter(s)	52 (ut)	36,000	1460Cyclical Painting/Painter(s)	52 (ut)	36,000
	1460 Cabinets-Mod	5 (ut)	10,000	1460 Cabinets-Mod	5 (ut)	10,000
	1460 Unit/Bldg. Upgrade(renovation)	As needed	11,280	1460 Unit/Bldg. Upgrade(renovation)	As needed	11,280
	1460 Water Heaters-Mod	8 (ut)	4,000	1460 Water Heaters-Mod	8 (ut)	4,000
	1470Com. Bldgs Upgrade(renovation)	As needed	1,200	1470Com.Bldgs Upgrade(renovation)	As needed	1,200
	Sub-Total		90,480	Sub-Total		90,480
	AMP062-South Amp Wide-Phy			AMP062-South Amp Wide-Phy		
	1450 Concrete Repairs	As needed	12,000	1450 Concrete Repairs	As needed	12,000
	1450 Site Improvements	As needed	3,000	1450 Site Improvements	As needed	3,000
	1460 Repl. Flooring Supplies-Mod	18 (ut)	12,000	1460 Repl. Flooring Supplies-Mod	18 (ut)	12,000
	1460 HVAC- Mod	12 (ut)	15,000	1460 HVAC- Mod	12 (ut)	15,000
	1460Cyclical Painting/Painter(s)	78 (ut)	54,000	1460Cyclical Painting/Painter(s)	78 (ut)	54,000
	1460 Cabinets-Mod	7 (ut)	15,000	1460 Cabinets-Mod	7 (ut)	15,000
	1460 Unit/Bldg. Upgrade(renovation)	As needed	16,920	1460 Unit/Bldg. Upgrade(renovation)	As needed	16,920
	1460 Water Heaters-Mod	12 (ut)	15,000	1460 Water Heaters-Mod	12 (ut)	15,000
	1470Com. Bldgs Upgrade(renovation)	As needed	1,800	1460Com.Bldgs Upgrade(renovation)	As needed	1,800
	Sub-Total		144,720	Sub-Total		144,720
	Subtotal of Estimated Cost		\$ 265,740	Subtotal of Estimated Cost		\$ 265,740

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012			Work Statement for Year 3 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	AMP 061-Northside			AMP 061-Northside		
	TN002-004/Fairview			TN002-004/Fairview		
	1460 Reasonable Accommodation	LS	2,250	1460 Reasonable Accommodation	LS	2,250
	1460 Floor Replacement	LS	2,250	1460 Floor Replacement	LS	2,250
	1460 Electrical Upgrade II	LS	32,500			
	1460 HVAC Replacement II	LS	32,500			
	1450 Parking/Paving	LS	10,000			
	Sub-Total		79,500	Sub-Total		4,500
	TN002-005/Parkway			TN002-005/Parkway		
	1460 Reasonable Accommodation	LS	1,750	1460 Reasonable Accommodation	LS	1,750
	1460 Floor Replacement	LS	1,750	1460 Floor Replacement	LS	1,750
	1450 Paving/Parking-Curbing	LS	10,000	1460 Kitchen Cabinets/Renovations	LS	23,000
				1465.1 Water Heater Replacement	LS	9,000
	Sub-Total		13,500	Sub-Total		35,500
	Subtotal of Estimated Cost		\$ 93,000	Subtotal of Estimated Cost		\$ 40,000

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012			Work Statement for Year 3 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	AMP062-Southside			AMP062-Southside		
	TN002-002/Keystone			TN002-002/Keystone		
	1460 Reasonable Accommodation	LS	7,500	1460 Reasonable Accommodation	LS	7,500
	1460 Floor Replacement	LS	7,500	1460 Floor Replacement	LS	7,500
	1460 Kitchen Cabinets/Renovations I	LS	44,193	1460 Kitchen Cabinets / Renovations II	LS	81,693
	1460 Electrical Upgrade II	LS	40,000	1450 Playground Equip.	LS	7,500
	1460 Electrical Upgrade II	LS	40,000	1450 Mailbox Replacement	LS	7,500
	Sub-Total		139,193	Sub-Total		111,693
	TN002-006/Memorial Park			TN002-006/Memorial Park		
	1460 Reasonable Accommodation	LS	4,000	1460 Reasonable Accommodation	LS	4,000
	1460 Floor Replacement	LS	4,000	1460 Floor Replacement	LS	4,000
				1465 Stove Replacement		60,000
	Sub-Total		8,000	Sub-Total		68,000
	Subtotal of Estimated Cost		\$ 147,193	Subtotal of Estimated Cost	\$	179,693

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014			Work Statement for Year 2 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	HA Wide Non Dwell.-Phy			HA Wide Non Dwell.-Phy		
	1475 Computer Hardware/Servers	LS	15,270	1475 Computer Hardware/Servers	LS	10,000
	1475 Communications/Office Equip.	LS	15,270	1475 Communications/Office Equip.	LS	10,540
	Sub-Total		30,540	Sub-Total		30,540
	AMP061-North Amp Wide-Phy			AMP061-North Amp Wide-Phy		
	1450 Concrete Repairs	As needed	8,000	1450 Concrete Repairs	As needed	8,000
	1450 Site Improvements	As needed	2,000	1450 Site Improvements	As needed	2,000
	1460 Repl. Flooring Supplies-Mod	12 (ut)	8,000	1460 Repl. Flooring Supplies-Mod	12 (ut)	8,000
	1460 HVAC- Mod	8 (ut)	10,000	1460 HVAC- Mod	8 (ut)	10,000
	1460Cyclical Painting/Painter(s)	52 (ut)	36,000	1460Cyclical Painting/Painter(s)	52 (ut)	36,000
	1460 Cabinets-Mod	5 (ut)	10,000	1460 Cabinets-Mod	5 (ut)	10,000
	1460 Unit/Bldg. Upgrade (renovation)	As needed	11,280	1460 Unit/Bldg. Upgrade(renovation)	As needed	11,280
	1460 Water Heaters-Mod	8 (ut)	4,000	1460 Water Heaters-Mod	8 (ut)	4,000
	1470 Com. Bldgs Upgrade(renovation)	As needed	1,200	1470 Com. Bldgs Upgrade(renovation)	As needed	1,200
	Sub-Total		90,480	Sub-Total		90,480
	AMP062-South Amp Wide-Phy			AMP062-South Amp Wide-Phy		
	1450 Concrete Repairs	As needed	12,000	1450 Concrete Repairs	As needed	12,000
	1450 Site Improvements	As needed	3,000	1450 Site Improvements	As needed	3,000
	1460 Repl. Flooring Supplies-Mod	18 (ut)	12,000	1460 Repl. Flooring Supplies-Mod	18 (ut)	12,000
	1460 HVAC- Mod	12 (ut)	15,000	1460 HVAC- Mod	12 (ut)	15,000
	1460Cyclical Painting/Painter(s)	78 (ut)	54,000	1460Cyclical Painting/Painter(s)	78 (ut)	54,000
	1460 Cabinets-Mod	7 (ut)	15,000	1460 Cabinets-Mod	7 (ut)	15,000
	1460 Unit/Bldg. Upgrade(renovation)	As needed	16,920	1460 Unit/Bldg. Upgrade(renovation)	As needed	16,920
	1460 Water Heaters-Mod	12 (ut)	15,000	1460 Water Heaters-Mod	12 (ut)	15,000
	1470Com.Bldgs Upgrade(renovation)	As needed	1,800	1470 Com Bldgs. Upgrade(renovation)	As needed	1,800
	Sub-Total		144,720	Sub-Total		144,720
	Subtotal of Estimated Cost		\$ 265,740	Subtotal of Estimated Cost		\$ 265,740

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014			Work Statement for Year 5 FFY 2015		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
	AMP 061-Northside			AMP 061-Northside		
	TN000-004/Fairview			TN000-004/Fairview		
	1460 Reasonable Accommodation	LS	2,250	1460 Reasonable Accommodation	LS	2,250
	1460 Floor Replacement	LS	2,250	1460 Floor Replacement	LS	2,250
				1460 Ext. Screen Doors	LS	13,000
				1465 Stove Replacement	LS	20,000
				1450 Sewer/Water Lines	LS	12,000
				1450 Playground Equip.	LS	4,193
	Sub-Total		4,500	Sub-Total		53,693
	TN002-005/Parkway			TN002-005/Parkway		
	1460 Reasonable Accommodation	LS	1,750	1460 Reasonable Accommodation	LS	1,750
	1460 Floor Replacement	LS	1,750	1460 Floor Replacement	LS	1,750
	1460 HVAC Install/Heater Replacement	LS	40,000	1450 Sewer/Water Lines	LS	12,000
	1460 Elect. Upgrade	LS	40,000			
	Sub-Total		83,500	Sub-Total		15,500
	Subtotal of Estimated Cost		\$ 88,000	Subtotal of Estimated Cost		\$ 69,193

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012		Work Statement for Year 3 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	AMP 061-Northside		AMP 061-Northside	
	TN002-002/Carver		TN002-002/Carver	
	1406 HA Wide Operations	23,797	1406 HA Wide Operations	23,797
	1408 HA Wide Management Improvements	23,797	1408 HA Wide Management Improvements	23,797
	1410 HA Wide Administrative	11,899	1410 HA Wide Administrative	11,899
	1430 Amp061 North Wide-Fees & Costs (Carver)	2,000	1430 Amp061 North Wide-Fees & Costs (Carver)	2,000
	Sub-Total	61,493	Sub-Total	61,493
	TN002-003/Dunbar		TN002-003/Dunbar	
	1406 HA Wide Operations	9,519	1406 HA Wide Operations	9,519
	1408 HA Wide Management Improvements	9,519	1408 HA Wide Management Improvements	9,519
	1410 HA Wide Administrative	4,759	1410 HA Wide Administrative	4,759
	1430 Amp061 North Wide-Fees & Costs (Dunbar)	800	1430 Amp061 North Wide-Fees & Costs (Dunbar)	800
	Sub-Total	24,597	Sub-Total	24,597
	TN-002-004/Fairview		TN-002-004/Fairview	
	1406 HA Wide Operations	21,418	1406 HA Wide Operations	21,418
	1408 HA Wide Management Improvements	21,418	1408 HA Wide Management Improvements	21,418
	1410 HA Wide Administrative	10,709	1410 HA Wide Administrative	10,709
	1430 Amp061 North Wide-Fees & Costs (Fairview)	1,800	1430 Amp061 North Wide-Fees & Costs (Fairview)	1,800
	Sub-Total	55,345	Sub-Total	55,345
	Subtotal of Estimated Cost	\$ 141,435	Subtotal of Estimated Cost	\$ 141,435

Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012		Work Statement for Year 3 FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	AMP062-Southside		AMP062-Southside	
	TN002-002/Keystone		TN002-002/Keystone	
	1406 HA Wide Operations	71,392	1406 HA Wide Operations	71,392
	1408 HA Wide Management Improvements	71,392	1408 HA Wide Management Improvements	71,392
	1410 HA Wide Administrative	35,696	1410 HA Wide Administrative	35,696
	1430 Amp062 South Wide-Fees & Costs(Keystone)	6,000	1430 Amp062 South Wide-Fees & Costs(Keystone)	6,000
	Sub-Total	184,480	Sub-Total	184,480
	TN002-006/Memorial Park		TN002-006/Memorial Park	
	1406 HA Wide Operations	40,455	1406 HA Wide Operations	40,455
	1408 HA Wide Management Improvements	40,455	1408 HA Wide Management Improvements	40,455
	1410 HA Wide Administrative	20,228	1410 HA Wide Administrative	20,228
	1430 Amp062 South Wide-Fees & Costs(Mem Prk)	3,400	1430 Amp062 South Wide-Fees & Costs(Mem Prk)	3,400
	Sub-Total	104,538	Sub-Total	104,538
	TN002-007/Pinecrest		TN002-007/Pinecrest	
	1406 HA Wide Operations	30,937	1406 HA Wide Operations	30,937
	1408 HA Wide Management Improvements	30,937	1408 HA Wide Management Improvements	30,937
	1410 HA Wide Administrative	15,468	1410 HA Wide Administrative	15,468
	1430 Amp062 South Wide-Fees & Costs(Pinecrest)	2,600	1430 Amp062 South Wide-Fees & Costs(Pinecrest)	2,600
	Sub-Total	79,942	Sub-Total	79,942
	Subtotal of Estimated Cost	\$ 368,960	Subtotal of Estimated Cost	\$ 368,960

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014		Work Statement for Year 5 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Approval Statement	AMP 061-Northside TN002-001/Carver		AMP 061-Northside TN002-001/Carver	
	1406 HA Wide Operations	23,797	1406 HA Wide Operations	23,797
	1408 HA Wide Management Improvements	23,797	1408 HA Wide Management Improvements	23,797
	1410 HA Wide Administrative	11,899	1410 HA Wide Administrative	11,899
	1430 Amp061 North Wide-Fees & Costs(Carver)	2,000	1430 Amp061 North Wide-Fees & Costs(Carver)	2,000
	Sub-Total	61,493	Sub-Total	61,493
	TN002-003/Dunbar		TN002-003/Dunbar	
	1406 HA Wide Operations	9,519	1406 HA Wide Operations	9,519
	1408 HA Wide Management Improvements	9,519	1408 HA Wide Management Improvements	9,519
	1410 HA Wide Administrative	4,759	1410 HA Wide Administrative	4,759
	1430 Amp061 North Wide-Fees & Costs(Dunbar)	800	1430 Amp061 North Wide-Fees & Costs(Dunbar)	800
	Sub-Total	24,597	Sub-Total	24,597
	TN002-004/Fairview		TN002-004/Fairview	
	1406 HA Wide Operations	21,418	1406 HA Wide Operations	21,418
	1408 HA Wide Management Improvements	21,418	1408 HA Wide Management Improvements	21,418
	1410 HA Wide Administrative	10,709	1410 HA Wide Administrative	10,709
	1430 Amp061 North Wide-Fees & Costs(Fairview)	1,800	1430 Amp061 North Wide-Fees & Costs(Fairview)	1,800
	Sub-Total	55,345	Sub-Total	55,345
	Subtotal of Estimated Cost	\$ 141,435	Subtotal of Estimated Cost	\$ 141,435

Part III: Supporting Pages – Management Needs Work Statement(s)		Work Statement for Year 4 FFY 2014		Work Statement for Year 5 FFY 2015	
Work Statement for Year 1 FFY 2011	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories
	AMP 061-Northside		AMP 061-Northside		
	TN002-005/Parkway		TN002-005/Parkway		
	1406 HA Wide Operations	14,278	1406 HA Wide Operations	14,278	14,278
	1408 HA Wide Management Improvements	14,278	1408 HA Wide Management Improvements	14,278	14,278
	1410 HA Wide Administrative	7,139	1410 HA Wide Administrative	7,139	7,139
	1430 Amp061 North Wide-Fees & Costs(Parkway)	1,200	1430 Amp061 North Wide-Fees & Costs(Parkway)	1,200	1,200
	Sub-Total	36,895	Sub-Total	36,895	36,895
	TN002-010/Lake Terrace		TN002-010/Lake Terrace		
	1406 HA Wide Operations	26,177	1406 HA Wide Operations	26,177	26,177
	1408 HA Wide Management Improvements	26,177	1408 HA Wide Management Improvements	26,177	26,177
	1410 HA Wide Administrative	13,088	1410 HA Wide Administrative	13,088	13,088
	1430 Amp061 North Wide-Fees&Costs(Lake Terr.)	2,200	1430 Amp061 North Wide-Fees&Costs(Lake Terr.)	2,200	2,200
	Sub-Total	67,642	Sub-Total	67,642	67,642
	Subtotal of Estimated Cost	\$ 104,537	Subtotal of Estimated Cost	\$ 104,537	\$ 104,537

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

Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014		Work Statement for Year 5 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
	AMP062-Southside		AMP062-Southside	
	TN002-002/Keystone		TN002-002/Keystone	
	1406 HA Wide Operations	71,392	1406 HA Wide Operations	71,392
	1408 HA Wide Management Improvements	71,392	1408 HA Wide Management Improvements	71,392
	1410 HA Wide Administrative	35,696	1410 HA Wide Administrative	35,696
	1430 Amp062 South Wide-Fees & Costs(Keystone)	6,000	1430 Amp062 South Wide-Fees & Costs(Keystone)	6,000
	Sub-Total	184,480	Sub-Total	184,480
	TN002-006/Memorial Park		TN002-006/Memorial Park	
	1406 HA Wide Operations	40,455	1406 HA Wide Operations	40,455
	1408 HA Wide Management Improvements	40,455	1408 HA Wide Management Improvements	40,455
	1410 HA Wide Administrative	20,228	1410 HA Wide Administrative	20,228
	1430 Amp062 South Wide-Fees&Costs(Mem.Park)	3,400	1430 Amp062 South Wide-Fees&Costs(Mem.Park)	3,400
	Sub-Total	104,538	Sub-Total	104,538
	TN002-007/Pinecrest		TN002-007/Pinecrest	
	1406 HA Wide Operations	30,937	1406 HA Wide Operations	30,937
	1408 HA Wide Management Improvements	30,937	1408 HA Wide Management Improvements	30,937
	1410 HA Wide Administrative	15,468	1410 HA Wide Administrative	15,468
	1430 Amp062 South Wide-Fees & Costs(Pinecrest)	2,600	1430 Amp062 South Wide-Fees & Costs(Pinecrest)	2,600
	Sub-Total	79,942	Sub-Total	79,942
	Subtotal of Estimated Cost	\$ 368,960	Subtotal of Estimated Cost	\$ 368,960

Johnson City Housing Authority

HUD-50075

11.0 Required Submission for HUD Field Office

- (a) Form HUD-50077 & 50077-SL
- (b) Form HUD-50070
- (c) Form HUD-50071
- (d) Form SF-LLL
- (e) Form SF-LLL-A (Not Applicable)
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements
- (h) Form HUD-50075.1 (See 8.1)
- (i) Form HUD-50075.2 (See 8.2)

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 2011, 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.

Johnson City Housing Authority

TN002

PHA Name

PHA Number/HA Code

_____ 5-Year PHA Plan for Fiscal Years 20____ - 20____

x _____ Annual PHA Plan for Fiscal Years 20¹¹ - 20¹²_____

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

Tommy Burleson

Chairman of the Board

Signature



Date

05/19/2011

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, Steve Baldwin the Director, Community Development certify that the Five Year and
Annual PHA Plan of the Johnson City Housing Authority is consistent with the Consolidated Plan of
Johnson City, TN. prepared pursuant to 24 CFR Part 91.

Steve R. Baldwin 5-10-11

Signed / Dated by Appropriate State or Local Official

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Johnson City Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund

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

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

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

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

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

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

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

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

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

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

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

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

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency 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.)

Sites listed in Agency Plan

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 Edward J. Zimbicki		Title Executive Director
Signature 		Date 05/19/2011

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Johnson City Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund

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)

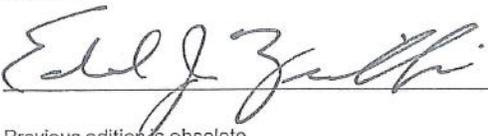
Name of Authorized Official

Edward J. Zimbicki

Title

Executive Director

Signature



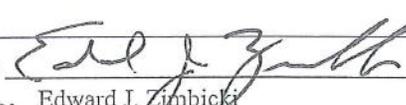
Date (mm/dd/yyyy)

05/19/2011

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> 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: Johnson City Housing Authority P.O. Box 59 Johnson City, TN. 37605 Congressional District, if known:	
6. Federal Department/Agency: HUD	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i>	
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:  Print Name: Edward J. Zimbicki Title: Executive Director Telephone No.: 423-232-4784 Date: 05/19/2011	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: _____ Page _____ of _____

11.0 Required Submission for HUD Field Office Review, (f) – RAB Comments

Comments and responses from March 09, 2011 RAB meeting.

1. COMMENT- Some of the exterior security lights are out in Carver and one is flickering.
1. RESPONSE- Southside Property Director said it may be a bad photo cell and he would have maintenance look into making repairs.

No Comments received at Public Board Meeting on May 19, 2011 concerning Agency Plan.

The following residents are the Resident Advisory Board for the Johnson City Housing Authority:

Pinecrest

Jeff Bishop

532 Crest Court, Johnson City, TN

Lake Terrace

Martha Burgin

2447 Mint Hill, Johnson City, TN

Fairview

Gwen Welch

602 Steele Street, Johnson City, TN

Parkway-Dunbar

Barbara Bishop

423 Garden Drive, Johnson City, TN

Memorial Park

Wilma Campbell

803 Bert Street, Johnson City, TN

Keystone

Donald Muldoon

232 S. Broadway, Johnson City, TN

Carver

Marilyn Yorrick

554 Washington, Johnson City, TN

JOHNSON CITY HOUSING AUTHORITY

901 Pardee Street
Post Office Box 59
Johnson City, TN 37605-0059
Office (423) 232-4784 • Fax (423) 232-4789
TDD: 1-800-545-1833, Ext. 762

MEMORANDUM

TO: HUD

FROM: Mark S. Markland

DATE: May 19, 2011

SUBJECT: 11.0 Required Submission for HUD Field Office Review,
(g), Challenged Elements

There have been no Challenged Elements to report concerning the Agency Plan.

JOHNSON CITY HOUSING AUTHORITY

Agenda Item # 6.a.
Meeting Date: 05/19/11

RESOLUTION NO. FFY11-29

Resolution No. FFY 11-29 approving the Johnson City Housing Authority's:

- *PHA Annual Plan and Five-Year Action Plan*
- *FFY 2011 Capital Fund Program Original Annual Statement (CFP TN37P00250111)*
- *FFY 2010 Performance and Evaluation Report (CFP TN37P00250110)*
- *FFY 2009 Performance and Evaluation Report (CFP TN37P00250109)*

and authorizing the Chairperson to provide certification of compliance to the U.S. Department of Housing and Urban Development.

BY THE JOHNSON CITY HOUSING AUTHORITY

WHEREAS, Section 511 of the Quality Housing and Work Responsibility Act ("Act") requires Housing Authorities to submit a Comprehensive Agency Plan ("PHA Plan"), including an Annual Plan and a Five-Year Action Plan, to the United States Department of Housing and Urban Development (HUD); and

WHEREAS, HUD promulgated PIH Notice 2008-41 providing notice of PHA guidelines for submission of the 5-Year Plan and Annual Plan; and

WHEREAS, in accordance with the Code of Federal Regulations ("Code") at Title 24 Part 903 and Tennessee's Open Public Meetings Act, the Authority has implemented proper notice and public hearing requirements; and

WHEREAS, pursuant to the Code, public notice was advertised in the Johnson City Press on January 23, 2011 and February 23, 2011 inviting the public to attend a forum to discuss the proposed JCHA Annual Plan and Five-Year Action Plan; and

WHEREAS, pursuant to 24 CFR 903.11 and HUD's PHA Plan Template, all required components of the Plan, including but not limited to those listed below, were presented to the Resident Advisory Board on March 9, 2011 at a public forum held at the Carver Development Community Center and provided to the general public at convenient locations for review:

- Statement of Housing Needs
- Statement of PHA's Deconcentration and other policies that govern eligibility, selection, and admissions
- Statement of Financial Resources

- Statement of the PHA's rent determination policies
- Statement of Capital Improvements needed
- Statement of any demolition and/or disposition, including a plan for demolition/disposition, if applicable
- Statement of homeownership programs administered by the PHA
- Statement of the PHA's policies and rules regarding ownership of pets in public housing
- Civil Rights Certification
- Recent results of PHA's fiscal year audit
- Statement of the Authority's progress in meeting its mission and goals as stated in the Authority's 5-Year Plan;

and

WHEREAS, the Authority is required to submit Annual Statement/Performance and Evaluation Report(s) for currently active Capital Fund Program(s), for each approved annual statement, which are attached hereto and become a part hereof respectively:

- Annual Statement/Performance and Evaluation Reports
 - Capital Fund Program No.: CFP TN37P00250110 (FFY 2010)
 - Capital Fund Program No.: CFP TN37P00250109 (FFY 2009);

and

WHEREAS, pursuant to the Code, public comments, written and verbal, were received, acknowledged, reviewed, and considered during the 45-day waiting period, which ended 4:30 p.m., April 25, 2011.

NOW, THEREFORE, BE IT RESOLVED that the Johnson City Housing Authority Board of Commissioners ("Commissioners") hereby certify that the Authority has complied with the statutory, regulatory, and procedural requirements for submission of the PHA Plan.

BE IT FURTHER RESOLVED that the Commissioners hereby accept and approve the 2011 "PHA Plan."

BE IT FURTHER RESOLVED that the Board Chairperson is hereby authorized to execute the U.S. Department of Housing and Urban Development standard Form HUD-50077, "*PHA Certifications of Compliance with the PHA Plan and Related Regulations*," and form HUD-50077-CR, "*Civil Rights Certification*," and the Executive Director is hereby authorized to execute appropriate required HUD documents, which are incorporated herein by reference.

BE IT FURTHER RESOLVED that the Board hereby approves submission of the Johnson City Housing Authority's 2011 PHA Plan, all required Performance and Evaluation reports, and other HUD-required documents, which are incorporated herein and attached hereto.

This Resolution shall take effect immediately.

Date of Adoption: May 19, 2011

RESOLUTION FFY11-29	Moved	Seconded	Ayes	Nays	Absent	Abstain
Commissioner Benedetto		✓			✓	
Commissioner Love-Watterson		✓	✓			
Commissioner Strickland	✓		✓			
Vice Chairperson Elrod			✓			
Chairperson Burleson					✓	

The foregoing is a true copy of a Resolution adopted at a Regular Meeting of the Johnson City Housing Authority of Johnson City, Tennessee, duly called and held on the 19th day of May, 2011.



EDWARD J. ZIMBICKI
Executive Director and Secretary

Attachments:

- Form HUD-50075.1, *Capital Fund Program Original Annual Statement*, CFP TN37P00250111 (FFY 2011)
- Form HUD-50075.1, *Performance and Evaluation Report for Capital Fund Program(s)*, CFP TN37P00250110 (FFY 2010)
- Form HUD-50075.1, *Performance and Evaluation Report for Capital Fund Program(s)*, CFP TN37P00250109 (FFY 2009)
- Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- Form HUD-50077-CR, *Civil Rights Certification*
- Form HUD-50070, *Certification for a Drug-Free Workplace*
- Form HUD-50071, *Certification of Payments to Influence Federal Transactions*
- Form SF-LLL, *Disclosure of Lobbying Activities*
- Resident Advisory Board (RAB) Comments
- Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan*