

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: <u>Crossville Housing Authority</u> PHA Code: <u>TN042</u> 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): <u>01/2012</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>327</u> Number of HCV units: <u>334</u>																										
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.)																										
	<table border="1"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																			
		PH	HCV																								
PHA 1:																											
PHA 2:																											
PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																										
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:																										
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.																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: Changes have been made in the following: <ul style="list-style-type: none"> Financial Resources - figures have been updated for FY2011 estimates Fiscal Year Audit - the 2010 audit is now available (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. Crossville Housing Authority - 67 Irwin Ave, Crossville, TN 38555																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> B. Demolition and/or Disposition We have received approval for the demolition of 13 public housing units (9 buildings) at: <ul style="list-style-type: none"> 27 Rose St, Crossville, TN - 1 bedroom unit 35 Rose St, Crossville, TN - 1 bedroom unit 30 Rose St, Crossville, TN - 3 bedroom unit 40 Rose St, Crossville, TN - 3 bedroom unit 93 Irwin Ave, Crossville, TN - 2 bedroom unit 101 Irwin Ave, Crossville, TN - 2 bedroom unit 74 Rose St, Crossville, TN - 4 bedroom unit 140 Rose St, Crossville, TN - 5 bedroom unit 190 Rose St, Crossville, TN - 4 bedroom unit 																										

	<ul style="list-style-type: none"> • 252 Stanley St, Crossville, TN - 4 bedroom unit • 228 West First St, Crossville, TN - 4 bedroom unit • 35 Irwin Ave, Crossville, TN - 3 bedroom unit • 47 Irwin Ave, Crossville, TN - 3 bedroom unit <p><u>D. Homeownership</u></p> <p>The Crossville Housing Authority administers 2 public housing homeownership plans:</p> <ol style="list-style-type: none"> 1. 5(h): 14 units in TN042000801 are available for sale in accordance with the Homeownership Plan that was approved 01/08/1999. None have been sold to date. 2. Section 32: 40 units in TN042000801 are available for sale in accordance with the Homeownership Plan that was approved 01/08/1999. To date 15 have been sold. <p>In addition, the CHA Section 8 Department offers unlimited vouchers for participants who meet the homeownership criteria.</p> <p><u>Project-Based Vouchers</u></p> <p>The Crossville Housing Authority plans to permit project-based vouchers for the Jamestown, TN community. Jamestown is one of the poorest communities in the state and offers few options for low-income housing tenants. This course of action is consistent with our 5-Year Plan to increase housing choices for our clients.</p> <p>In an effort to expand housing options and provide affordable housing, CHA will offer to assign up to 15 project-based vouchers to the area. We anticipate that these vouchers will be split between 3 properties that meet the required criteria. It is hoped that these vouchers will strengthen some of the landlords, and stabilize and improve the housing stock of the community. The result will be that qualified families will be able to get better housing quicker.</p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>See attached.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See attached.</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><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.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>As determined by the Tennessee Consolidated Plan and information obtained from the TN Department of Health and the Comprehensive Housing Affordability Strategy data, the following charts outline the housing needs of the three counties that CHA serves with public housing. In the “Overall” Needs column, we have estimated the number of renter families that have housing needs. For the remaining characteristics, we have rated the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being “no impact” and 5 being “severe impact.” The use of N/A indicates that no information is available upon which we can make this assessment.</p>

Housing Needs of Families in the Jurisdiction by Family Type for Cumberland County							
Family Type	Overall	Afford-ability	Supply	Quality	Accessability	Size	Location
Income <= 30% of AMI	965	5	5	5	5	N/A	N/A
Income >30% but <=50% of AMI	942	4	4	4	4	N/A	N/A
Income >50% but <80% of AMI	967	3	3	3	3	N/A	N/A
Elderly	732	4	5	5	4	N/A	N/A
Race/Ethnicity Black Non-Hispanic	4	5	4	4	4	N/A	N/A
Race/Ethnicity Hispanic	153	5	4	4	4	N/A	N/A

Housing Needs of Families in the Jurisdiction by Family Type for Bledsoe County							
Family Type	Overall	Afford-ability	Supply	Quality	Accessability	Size	Location
Income <= 30% of AMI	246	5	5	5	5	N/A	N/A
Income >30% but <=50% of AMI	141	4	4	4	4	N/A	N/A
Income >50% but <80% of AMI	221	3	3	3	3	N/A	N/A
Elderly	131	4	5	5	4	N/A	N/A
Race/Ethnicity Black Non-Hispanic	21	5	4	4	4	N/A	N/A
Race/Ethnicity Hispanic	53	5	4	4	4	N/A	N/A

9.0		Housing Needs of Families in the Jurisdiction by Family Type for Rhea County							
		Family Type	Overall	Afford-ability	Supply	Quality	Accessability	Size	Location
		Income <= 30% of AMI	717	5	5	5	5	N/A	N/A
		Income >30% but <=50% of AMI	536	4	4	4	4	N/A	N/A
		Income >50% but <80% of AMI	626	3	3	3	3	N/A	N/A
		Elderly	395	4	5	5	4	N/A	N/A
		Race/Ethnicity Black Non-Hispanic	114	5	4	4	4	N/A	N/A
		Race/Ethnicity Hispanic	54	5	4	4	4	N/A	N/A

The CHA waiting list for public housing currently has 82 families that are comprised as follows:

- 76% are extremely low income (<= 30% of AMI)
- 20% are very low income (>30% but <=50% of AMI)
- 4% are low income (>50% but <=80% of AMI)

Of the 82 families, 21 have disabilities. Bedroom needs consist of: 66% need a one-bedroom unit, 9% need a two-bedroom unit, and 7% need a three-bedroom or larger unit.

The CHA waiting list for Section 8 currently has 121 families that are comprised as follows:

- 68% are extremely low income (<= 30% of AMI)
- 31% are very low income (>30% but <=50% of AMI)
- 1% are low income (>50% but <=80% of AMI)

Of the 121 families, 8 are elderly.

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>
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10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The Crossville Housing Authority continues to promote its mission to provide affordable housing to the area’s low-income population.</p> <p>In addition to Public Housing and Section 8, the CHA has several affordable housing opportunities to meet the needs of the area’s affordable housing market. These include programs that use both public and private funding vehicles.</p> <p>In the last 2 years, we have added 11 units to our public housing stock. Since our Section 32 Homeownership Plan has resulted in the sale of 15 public housing units, these units will help to replenish our public housing stock. In addition to our Public Housing homeownership option, our Section 8 department along with our Family Self-Sufficiency Coordinator, work with Section 8 clients to push them toward homeownership. Currently 26 families on our Section 8 program are actually homeowners.</p> <p>The CHA’s Shelter Plus program that allows us to serve those hard-to-house homeless persons with disabilities that would not otherwise qualify for Public Housing or Section 8, has grown to a total of 47 vouchers in 4 programs. We will continue to seek additional program vouchers in order to increase our housing options.</p> <p>Also, in 2009 CHA received a 2 year grant under the Homeless Prevention and Rapid Re-Housing Program (HPRP). This American Recovery and Reinvestment Act (ARRA) program serves families in immediate danger of being homeless, or who are currently homeless. Case management helps eliminate barriers for families seeking housing. Funds may be used for utility assistance, security deposits and rental assistance. This is a short-term program which can provide assistance for 6 - 12 months. To date CHA has served 92 families in Cumberland, Roane and Fentress counties.</p> <p>The Crossville Housing Authority strives to serve low income families to achieve safe and sanitary housing that is affordable, while promoting their well being by providing stable housing without discrimination. CHA rules prohibit any activity that threatens the health, safety, or peaceful enjoyment of the premises.</p> <p>The Crossville Housing Authority supports the goals of the Violence Against Women Act of 2005, and will comply with its requirements. We will continue to administer housing programs so that tenants are supported and protected, including victims of domestic violence, dating violence, sexual assault, or stalking. Under the requirements of the law, we will not take adverse action against victims of such criminal activity, including denial or termination of housing assistance.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>The Crossville Housing Authority defines a “significant amendment and substantial deviation/modification” as:</p> <ul style="list-style-type: none"> • A change in policy that would significantly impact the tenant selection process or the tenant’s leasing rights. • A change in the capital funds budget for any given year that exceeds 25%.
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11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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Crossville Housing Authority Resident Advisory Board Comments

The Crossville Housing Authority held resident advisory meetings on March 8 2011, April 13, 2011, May 17, 2011, and June 8, 2011. CHA capital funds projects, policies and procedures, and programs and services were reviewed. No comments were received by residents. A public hearing was held on August 9, 2011. No comments were received.

Crossville Housing Authority Resident Council Board Members - 2011

Officers

Irene Melton, President	160 Pinewood Drive	Crossville, TN 38555
Tim Hartman, Vice-President	158 Pinewood Drive	Crossville, TN 38555
Brenda Worsham, Secretary	140 Pinewood Drive	Crossville, TN 38555
Wanda Martin, Treasurer	152 Pinewood Drive	Crossville, TN 38555
Wanda Vaughn, Historian	130 Pinewood Drive	Crossville, TN 38555

Representatives

Terry Blaylock	172 Pinewood Drive	Crossville, TN 38555
Marie Burden	169 Underwood St	Crossville, TN 38555
Cassie Davis	178 Pinewood Drive	Crossville, TN 38555
Paul Davis	178 Pinewood Drive	Crossville, TN 38555
Dave Hartman	27 Aster St	Crossville, TN 38555
Ollie Holmes	245 West First Street	Crossville, TN 38555
Darlene Kessler	136 Pinewood Drive	Crossville, TN 38555
Roy Shipwash	146 Pinewood Drive	Crossville, TN 38555
Bertie Smith	132 Goodwin Circle	Crossville, TN 38555

Crossville Housing Authority

Compliance with the Requirements of VAWA

The Crossville Housing Authority supports the goals of the Violence Against Women Act of 2005, and fully complies with its requirements.

- The CHA works in partnership with the local battered women shelter, placing a housing priority on those sheltered families.
- The CHA acknowledges that being a victim of domestic violence, dating violence, or stalking, as these terms are defined in the law, is not a basis for denial of assistance or admission to our public housing programs if the applicant otherwise qualifies for assistance or admission. Incidents or threats of abuse will not be construed as serious or repeated violations of the lease or other “good cause” for termination of the assistance, tenancy, or occupancy rights of a victim of abuse. Criminal activity directly relating to abuse, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant’s family is the victim or threatened victim of that abuse.
- CHA policy regarding notification of VAWA’s policies and procedures to tenants and applicants is included in the CHA Admissions and Occupancy Policy and the CHA Section 8 Administrative Plan. VAWA information is included in all housing applications and recertification packages, as well as being posted in the CHA lobby.
- These elements were reviewed at the June 8, 2011 resident meeting. No comments were received.
- The CHA has established a partnership with the Avalon Center, the local support organization for victims of family violence. In 2009-2010 CHA offered a series of community education training workshops presented by Avalon Center free to the general public. More workshops will be scheduled if there is interest.

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

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

Part I: Summary

PHA Name: **Crossville Housing Authority**

Grant Type and Number: **Capital Fund Program Grant No: TN37P04250109**

Replacement Housing Factor Grant No: _____

Date of CFFP: _____

FFY of Grant: **2009**

FFY of Grant Approval: **2009**

Line	Type of Grant	Original	Total Estimated Cost		Obligated	Total Actual Cost ¹	
			Original	Revised ²		Obligated	Expended
1	Total non-CFFP Funds	0	0	0	0	0	0
2	1406 Operations (may not exceed 20% of line 21) ³	0.00	0.00	0.00	0.00	0.00	0.00
3	1408 Management Improvements	49,331.84	49,589.74	49,331.84	47,899.74	47,899.74	47,899.74
4	1410 Administration (may not exceed 10% of line 21)	48,000.00	48,000.00	48,000.00	48,000.00	48,000.00	48,000.00
5	1411 Audit	0	0	0	0	0	0
6	1413 Liquidated Damages	0	0	0	0	0	0
7	1430 Fees and Costs	0	0	0	0	0	0
8	1440 Site Acquisition	0	0	0	0	0	0
9	1450 Site Improvement	18,418.75	18,418.75	18,418.75	18,418.75	18,418.75	18,418.75
10	1460 Dwelling Structures	180,000.00	180,000.00	180,000.00	179,131.56	179,131.56	179,131.56
11	1465.1 Dwelling Equipment—Nonexpendable	26,996.00	26,996.00	26,996.00	26,996.00	26,996.00	26,996.00
12	1470 Non-dwelling Structures	206,572.07	206,314.17	206,314.17	150,231.62	150,231.62	150,231.62
13	1475 Non-dwelling Equipment	17,683.34	17,683.34	17,683.34	17,683.34	17,683.34	17,683.34
14	1485 Demolition	0	0	0	0	0	0
15	1492 Moving to Work Demonstration	0	0	0	0	0	0
16	1495.1 Relocation Costs	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00	2,000.00
17	1499 Development Activities ⁴	0	0	0	1,783.24	1,783.24	1,783.24

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.

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Part I: Summary

PHA Name: **Crossville Housing Authority**
 Grant Type and Number: **Capital Fund Program Grant No: TN37P04250109**
 Replacement Housing Factor Grant No: _____
 Date of CFFP: _____

FEY of Grant: **2009**
 FEY of Grant Approval: **2009**

Type of Grant: Original Annual Statement Reserve for Disasters/Emergencies

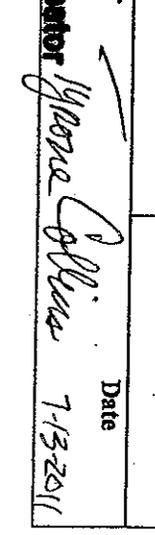
Performance and Evaluation Report for Period Ending: **06/30/2011**

Revised Annual Statement (revision no: 4)
 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	0			
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0			
19	1502 Contingency (may not exceed 8% of line 20)	0			
20	Amount of Annual Grant: (sum of lines 2 - 19)	549,002	549,002.00	549,002.00	490,144.25
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Activities	0			
23	Amount of line 20 Related to Security - Soft Costs	0			
24	Amount of line 20 Related to Security - Hard Costs	0			
25	Amount of line 20 Related to Energy Conservation Measures	0			

Signature of Executive Director:  Date: **6-30-11**

Signature of Public Housing Director:  Date: _____

Signature of Program Center Coordinator:  Date: **7-13-2011**

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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
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Part II: Supporting Pages
 PHA Name: Crossville Housing Authority

Grant Type and Number
 Capital Fund Program Grant No: TN37P04250109
 CFFP (Yes/No): No
 Replacement Housing Factor Grant No:

Federal FFY of Grant: 2009

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	
TN42-1	Renovate Units	1460	9 units	180,000.00		180,000.00	179,131.56	In progress
Rosewood Terrace	Sidewalks/Exterior	1450	5 units	18,418.75		18,418.75	18,418.75	completed
	Update Tot Lot	1450	1	0				deleted
	Relocation	1495	2 units	2,000		2,000.00	1,783.24	In progress
	Renovation of MMC Bldg	1470	MMC Bldg Rehab	93,117.21	92,859.31	92,859.31	36,776.76	In progress
TN42-4	Roof Repair	1460	4 buildings	0				deleted
Goodwin Circle								
TN42-6	Roof Repair	1460	4 buildings	0				deleted
Oak Grove Homes								
TN42-7	Roof Repair	1460	4 buildings	0				deleted
Whispering Pines	Replace Appliances	1465	25 units	26,996.00		26,996.00	26,996.00	completed
	Renovation of MMC Bldg	1470	MMC Bldg	113,454.86		113,454.86	113,454.86	In progress
PHA Wide	Non-Dwelling Equipment	1475	3	17,683.34		17,683.34	17,683.34	completed

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² To be completed for the Performance and Evaluation Report.

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

Part I: Summary

PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37S04250109 Replacement Housing Factor Grant No: Date of CFPP:	FY of Grant 2009 FY of Grant Approval: 2009
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011	Reserve for Disaster/Emergencies <input type="checkbox"/> Reserve for Disaster/Emergencies <input checked="" type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost ¹	
			Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds		0			
2	1406 Operations (may not exceed 20% of line 21) ³		0			
3	1408 Management Improvements		11,938.80		11,938.80	11,938.80
4	1410 Administration (may not exceed 10% of line 21)		61,000.00		61,000.00	39,277.83
5	1411 Audit		0			
6	1415 Liquidated Damages		0			
7	1430 Fees and Costs		0			
8	1440 Site Acquisition		0			
9	1450 Site Improvement		44,509.05	47,276.65	47,276.65	42,571.54
10	1460 Dwelling Structures		492,932.15	490,164.55	490,164.55	358,677.09
11	1465.1 Dwelling Equipment—Nonexpendable		0			
12	1470 Non-dwelling Structures		0			
13	1475 Non-dwelling Equipment		0			
14	1485 Demolition		0			
15	1492 Moving to Work Demonstration		0			
16	1493.1 Relocation Costs		0			
17	1499 Development Activities ⁴		0			

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
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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	0	0		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0		
19	1502 Contingency (may not exceed 8% of line 20)	0	0		
20	Amount of Annual Grant: (sum of lines 2 - 19)	610,380		610,380.00	452,465.26
21	Amount of line 20 Related to LBP Activities	0	0		
22	Amount of line 20 Related to Section 504 Activities	0	0		
23	Amount of line 20 Related to Security - Soft Costs	0	0		
24	Amount of line 20 Related to Security - Hard Costs	0	0		
25	Amount of line 20 Related to Energy Conservation Measures	0	0		
Signature of Executive Director		Date: 8-30-11		Signature of Public Housing Director: Charles T. Barnett	
				Date: 7-13-2011	

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.

Charles T. Barnett
Program Center Coordinator

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

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

Part II: Supporting Pages
 PHA Name: Crossville Housing Authority

Grant Type and Number
 Capital Fund Program Grant No: TN37S04250109
 CFFP (Yes/No): no
 Replacement Housing Factor Grant No:

Federal FFY of Grant: 2009

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	
42-2	Site Improvements	1450	26 units	24,000.00	28,000.00	28,000.00	23,294.89	In progress
Spring City Homes	Install components necessary to convert water to individual meters							
42-3	Site Improvements	1450	12 units	12,900.00	11,667.60	11,667.60	11,667.60	completed
Pikeville Homes	Install components necessary to convert water to individual meters							
42-4	Roofing	1460	10 Bldgs	59,649.07	58,709.30	58,709.30	31,166.11	In progress
Goodwin Court								
42-5	Cabinets	1460	2 units	5,000.00	4,665.19	4,665.19	4,665.19	completed
Pleasant Hill Homes	Roofing	1460	20 units	48,800.00		48,800.00	34,413.69	In progress
42-6	Cabinets	1460	13 units	68,000.00	67,491.25	67,491.25	67,491.25	completed
Oak Grove Homes	Roofing	1460	30 units	73,200.00		73,200.00	22,470.07	In progress
42-7	Cabinets	1460	25 units	110,000.00	109,015.73	109,015.73	109,015.73	completed
Whispering Pines	Roofing	1460	30 units	75,600.00		75,600.00	36,771.97	In progress

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		Grant Type and Number		Federal FFY of Grant 2009				
PHA Name: Crossville Housing Authority		Capital Fund Program Grant No: TN37S04250109						
		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	
42-19	Plumbing	1460	3 units	3,036.67		3,036.67	3,036.67	completed
	Electrical	1460	3 units	2,550.20		2,550.20	2,550.20	completed
	Cabinets	1460	3 units	2,630.51		2,630.51	2,630.51	completed
	Walls	1460	3 units	16,466.15		16,466.15	16,466.15	completed
	Flooring	1460	3 units	11,008.12		11,008.12	11,008.12	completed
	Mechanical	1460	3 units	79.28		79.28	79.28	completed
	Paint	1460	3 units	3,791.78		3,791.78	3,791.78	completed
	Roofs	1460	3 units	7,835.28		7,835.28	7,835.28	completed
	Doors/Windows	1460	3 units	5,285.09		5,285.09	5,285.09	completed
	Sidewalks	1450	3 units	1,192.08		1,192.08	1,192.08	completed
	Exterior Enhancements	1450	3 units	6,416.97		6,416.97	6,416.97	completed
	Appliances	1465	3 units	0.00		0.00	0.00	deleted
PHA Wide	Management Fees	1410		61,000.00		61,000.00	39,277.83	In progress
Administration								
PHA Wide	Upgrade computer system	1408		11,938.80		11,938.80	11,938.80	completed
Management Activities								

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 I: Summary

PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P04250110 Replacement Housing Factor Grant No: Date of CFFP:	FY of Grant: 2010 FY of Grant Approval:
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Line	Type of Grant	Performance and Evaluation Report for Period Ending: 06/30/11	Total Estimated Cost		Obligated	Total Actual Cost ¹	
			Original	Revised ²		Expended	
1	Total non-CFP Funds		0				
2	1406 Operations (may not exceed 20% of line 21) ³		67,000	0			
3	1408 Management Improvements		30,000	48,000			
4	1410 Administration (may not exceed 10% of line 21)		48,000			48,000.00	48,000.00
5	1411 Audit		0				
6	1415 Liquidated Damages		0				
7	1430 Fees and Costs		0				
8	1440 Site Acquisition		0	47,500			
9	1450 Site Improvement		16,500				
10	1460 Dwelling Structures		170,962				
11	1465.1 Dwelling Equipment--Nonexpendable		25,000				
12	1470 Non-dwelling Structures		164,833	182,833			
13	1475 Non-dwelling Equipment		20,650				
14	1485 Demolition		0				
15	1492 Moving to Work Demonstration		0				
16	1495.1 Relocation Costs		3,000				
17	1499 Development Activities ⁴		0				

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

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

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

Part I: Summary

PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P04250110 Replacement Housing Factor Grant No: Date of CRFP:	FY of Grant 2010 FFY of Grant Approval:
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Type of Grant
 Original Annual Statement
 Reserve for Disasters/Emergencies
 Performance and Evaluation Report for Period Ending: **06/30/2011**
 Revised Annual Statement (version no: 2)
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Revised ¹	Obligated	Total Actual Cost ¹	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0				
19	1502 Contingency (may not exceed 8% of line 20)	0				
20	Amount of Annual Grant: (sum of lines 2 - 19)	545,945			48,000.00	48,000.00
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		Date		Signature of Public Housing Director		Date
		6-30-11		for Tyrone Adams		7-13-2011

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 CRF Grants for operations.
⁴ RHF funds shall be included here.

Charles T. Barnett
Program Center Coordinator

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

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

Part I: Summary

PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P04250111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval:
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Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost ¹	
				Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³			21,045	0		
3	1408 Management Improvements			42,000			
4	1410 Administration (may not exceed 10% of line 21)			54,900	47,300		
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement			10,000	0		
10	1460 Dwelling Structures			206,000	186,000		
11	1465.1 Dwelling Equipment—Nonependable			20,000			
12	1470 Non-dwelling Structures			145,000	156,036		
13	1475 Non-dwelling Equipment			18,000			
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs			4,000			
17	1499 Development Activities ⁴			25,000	0		

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

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

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

Part I: Summary

PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P04250111 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval:
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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)	545,945	473,336		
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date 7-27-11	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

PHA Name: Crossville Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN37P04250111 CFPP (Yes/No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2011			
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
42-1 Rosewood Terrace	Non-Dwelling Structure MMC Building Renovation	1470	1 bldg	145,000	156,036		
42-14 Neherton/Storie	Update interior of units Roofing Sidewalks/site improvement Relocation during renovation	1460 1460 1450 1495	9 units 5 units 5 units 2 units	40,000 20,500 5,000 2,000	0		
42-16 Braun/Woody	Update interior of units Roofing Sidewalks/site improvement Relocation during renovation	1460 1460 1450 1495	8 units 5 units 5 units 2 units	40,000 20,500 5,000 2,000	0		
PHA Wide	Non-dwelling equipment Dwelling equipment	1475 1465	2 vehicles 20 units	18,000 20,000			
42-4 Goodwin Circle	Roofing	1460	5 units	20,500			

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
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Part II: Supporting Pages

PHA Name: Crossville Housing Authority
 Grant Type and Number
 Capital Fund Program Grant No: TN37P04250111
 CFFP (Yes/No):
 Replacement Housing Factor Grant No:

Federal FFY of Grant: 2011

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	
42-6	Roofing	1460	5 units	20,500				
Oak Grove Homes								
42-7	Update plumbing	1460	20 units	20,000	0			
Whispering Pines	Replace windows	1460	20 units	24,000				
PHA Wide	Management fees	1410		54,900	47,300			
Administration								
PHA Wide	Staff Training	1408		2,000				
	Office Automation	1408		10,000				
	Resident Employment	1408		6,000				
	Drug Elimination Program	1408		24,000				
	Operations	1406		21,045	0			
	Funds for Development	1499		25,000	0			

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

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

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

Part I: Summary

PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P04250112 Replacement Housing Factor Grant No: Date of CFPP:	FFY of Grant: 2012 FFY of Grant Approval:
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Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:) Final Performance and Evaluation Report <input type="checkbox"/>	Total Estimated Cost		Total Actual Cost ¹	
				Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³			53,636			
3	1408 Management Improvements			42,000			
4	1410 Administration (may not exceed 10% of line 21)			47,300			
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement			25,000			
10	1460 Dwelling Structures			209,400			
11	1465.1 Dwelling Equipment—Nonexpendable			20,000			
12	1470 Non-dwelling Structures			20,000			
13	1475 Non-dwelling Equipment			15,000			
14	1485 Demolition			10,000			
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs			6,000			
17	1499 Development Activities ⁴			25,000			

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: 2012	
PHA Name: Crossville Housing Authority	Grant Type and Number Capital Fund Program Grant No: TN37P04250112 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	

<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Summary by Development Account <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Signature of Executive Director	Date	Signature of Public Housing Director	Date		
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)	473,336				
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					
		Total Estimated Cost	Revised ²	Obligated	Total Actual Cost¹	Expended

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

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

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

Part II: Supporting Pages
 PHA Name: Crossville Housing Authority
 Grant Type and Number
 Capital Fund Program Grant No: TN37P04250112
 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	
TN42-1 Rosewood Terrace	Demolition	1485		10,000				
TN42-4 Goodwin Circle	Update interior of units Sidewalks/site improvements Update tot lot	1460 1450 1450	15 units 1	50,000 10,000 2,000				
	Relocation during renovation M/MC Building repair Roofing	1495 1470 1460	1 bldg 4 bldgs	2,000 20,000 16,400				
TN42-5 Pleasant Hill Homes	Update interior of units Sidewalks/site improvements Relocation during renovation	1460 1450 1495	5 units	78,000 6,000 2,000				
TN42-6 Oak Grove Homes	Update interior of units Sidewalks/site improvements Relocation during renovations Update tot lot	1460 1450 1495 1450	5 units	65,000 6,000 2,000 1,000				

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

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
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 Expires 4/30/2011

Part II: Supporting Pages

PHA Name: Crossville Housing Authority
 Grant Type and Number
 Capital Fund Program Grant No: TN37PP04250112
 CFPP (Yes/No): No
 Replacement Housing Factor Grant No:
 Federal FFY of Grant: 2012

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Vehicle/Non-dwelling equipment	1475	1-2	15,000				
	Appliances	1465	20	20,000				
PHA Wide	Management fees	1410		47,300				
Administration								
PHA Wide	Staff Training	1408		2,000				
	Office Automation	1408		10,000				
	Resident Employment	1408		6,000				
	Drug Elimination Program	1408		24,000				
	Operations	1406		53,636				
	Funds for Development	1499		25,000				

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

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary

PHA Name/Number Crossville Housing Authority TN042		Locality (City/County & State) Crossville/Cumberland County, TN			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No: 1	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	Physical Improvements Subtotal	See Annual Statement	259,750	341,036	344,036	362,500
C.	Management Improvements		42,000	42,000	42,000	48,536
D.	PHA-Wide Non-dwelling Structures and Equipment		18,000	18,000	15,000	15,000
E.	Administration		47,300	47,300	47,300	47,300
F.	Other					
G.	Operations		67,000			
H.	Demolition					
I.	Development		39,286	25,000	25,000	
J.	Capital Fund Financing - Debt Service					
K.	Total CFP Funds		473,336	473,336	473,336	473,336
L.	Total Non-CFP Funds		0	0	0	0
M.	Grand Total		473,336	473,336	473,336	473,336

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary (Continuation)

PHA Name/Number: Crossville Housing Authority TN042		Locality (City/county & State) Crossville/Cumberland County, TN			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No: 1	
A. Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016	
	See Annual Statement					
TN42-1			301,036			
TN42-2		61,400		133,334		
TN42-3		35,000		71,000		
TN42-4		73,400			99,000	
TN42-5				74,000	45,000	
TN42-6					45,000	
TN42-7		69,950		45,702		
TN42-14					52,500	
TN42-16					101,000	
TN42-18			5,000			
TN42-19			15,000			
PHA Wide		233,586	152,300	149,300	130,836	
Total		473,336	473,336	473,336	473,336	

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

Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2016</u>			Work Statement for Year: <u>2016 (continued)</u>		
	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	TN42-4 Goodwin Court			PHA Wide Vehicle/Equipment		15,000
	Install HVAC systems	22 units	99,000	Replace Appliances	20 units	20,000
	TN42-5 Pleasant Hill Homes					
	Install HVAC systems	10 units	45,000			
	TN42-6 Oak Grove Homes					
	Install HVAC systems	10 units	45,000			
	TN42-14					
	Netherton/Storie Homes					
	Replace HVAC systems	5 units	22,500			
	Roofing	9 units	30,000			
	TN42-16					
	Braun/Woody Homes					
	Replace HVAC systems	8 units	36,000			
	Roofing	16 units	65,000			
	Subtotal of Estimated Cost			Subtotal of Estimated Cost		
			continued			\$377,500

**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 X Annual PHA Plan for the PHA fiscal year beginning 01/01/12, 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.

Crossville Housing Authority

TN042

PHA Name

PHA Number/HA Code

 5-Year PHA Plan for Fiscal Years 20 - 20

Annual PHA Plan for Fiscal Years 2012 - 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)

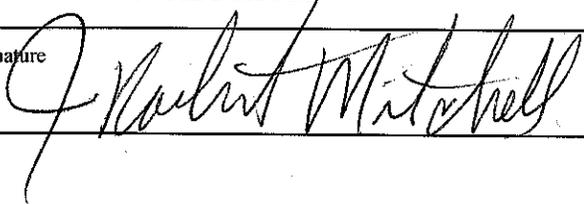
Name of Authorized Official

J. Robert Mitchell

Title

Board Chairman

Signature



Date

10-7-11

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Crossville Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing Annual Agency Plan

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.)

TN42-1 (Cumberland County), 67 Irwin Ave, Crossville, TN 38555; TN42-2 (Rhea County), McClendon Ave, Spring City, TN 37381; TN42-3 (Bledsoe County), Washington Ave, Pikeville, TN 37367; TN42-4 (Cumberland County), Goodwin Court, Crossville, TN 38555; TN42-5 (Cumberland County), Clearview Dr, Crossville, TN 38571; TN42-6 (Cumberland County), Oak Grove St, Crossville, TN 38555; TN42-7 (Cumberland County), Pinewood Dr, Crossville, TN 38555; TN42-14 (Cumberland County) Netherton Ct, Crossville, TN 38555; TN42-16 (Cumberland County), Braun Hill, Crossville, TN 38555; TN42-18 (Cumberland County), 140 Kates Korner, Crossville, TN 38555; TN42-19 (Cumberland County) Cleveland St, Crossville, TN 38555.

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

Don Alexander

Title

Executive Director

Signature

Date

10-4-11

X

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input checked="" 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: Crossville Housing Authority PO Box 425 Crossville, TN 38557 Congressional District, if known: 4c	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: N/A Congressional District, if known:	
6. Federal Department/Agency: Dept. of Housing and Urban Development	7. Federal Program Name/Description: Public Housing Capital Funds CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): N/A	
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: <u>Don Alexander</u> Title: <u>Executive Director</u> Telephone No.: <u>(931) 484-2990</u> Date: <u>10-4-11</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Civil Rights Certification

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

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

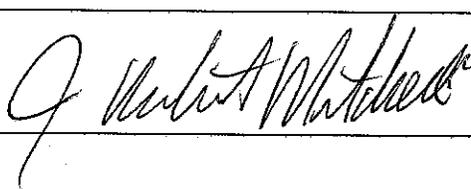
The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Crossville Housing Authority

TN042

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	Title
J. Robert Mitchell	Board Chairman
Signature	Date
	10-7-11

**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
OMB# 2577-0226
Expires 06/30/2011

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

I, Kendra Jensen the Research Analyst certify that the Five Year and Annual

PHA Plan of the Crossville Housing Authority is consistent with the

Consolidated Plan of State of Tennessee prepared pursuant to 24 CFR Part 91.

Kendra Jensen 9/6/2011

Signed / Dated by Appropriate State or Local Official

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Crossville Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing Annual Agency Plan

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)

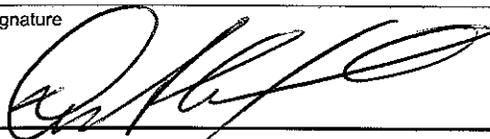
Name of Authorized Official

Don Alexander

Title

Executive Director

Signature



Date (mm/dd/yyyy)

10-4-11