

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

PHA Plans

5-Year Plan for Fiscal Years 2005 - 2009
Annual Plan for Fiscal Year 2005

Lawrenceburg Housing Authority
1020 Smith Avenue
Post Office Drawer C
Lawrenceburg, Tennessee 38464

TN048v02

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE
WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: [Lawrenceburg Housing Authority](#)

PHA Number: [TN048](#)

PHA Fiscal Year Beginning: (mm/yyyy) [01/2005](#)

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- PHA local offices
- Main administrative office of the local government
- Main administrative office of the County government
- Main administrative office of the State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2005 - 2009
[24 CFR Part 903.5]

A. 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. (select one of the choices below)

- The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- The PHA's mission is: (state mission here)

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

- PHA Goal: Expand the supply of assisted housing
Objectives:
 - Apply for additional rental vouchers:
 - Reduce public housing vacancies:
 - Leverage private or other public funds to create additional housing opportunities:
 - Acquire or build units or developments
 - Other (list below)
- PHA Goal: Improve the quality of assisted housing
Objectives:
 - Improve public housing management: (PHAS score)
 - Improve voucher management: (SEMAP score)
 - Increase customer satisfaction:
 - Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
 - Renovate or modernize public housing units:
 - Demolish or dispose of obsolete public housing:
 - Provide replacement public housing:
 - Provide replacement vouchers:
 - Other: (list below)

- PHA Goal: Increase assisted housing choices
 - Objectives:
 - Provide voucher mobility counseling:
 - Conduct outreach efforts to potential voucher landlords
 - Increase voucher payment standards
 - Implement voucher homeownership program:
 - Implement public housing or other homeownership programs:
 - Implement public housing site-based waiting lists:
 - Convert public housing to vouchers:
 - Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- PHA Goal: Provide an improved living environment
 - Objectives:
 - Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
 - Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
 - Implement public housing security improvements:
 - Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
 - Other: (list below)

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- PHA Goal: Promote self-sufficiency and asset development of assisted households
 - Objectives:
 - Increase the number and percentage of employed persons in assisted families:
 - Provide or attract supportive services to improve assistance recipients' employability:
 - Provide or attract supportive services to increase independence for the elderly or families with disabilities.
 - Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- PHA Goal: Ensure equal opportunity and affirmatively further fair housing
 - Objectives:
 - Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
 - Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:

- Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
- Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2005

[24 CFR Part 903.7]

i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan

Streamlined Plan:

- High Performing PHA**
- Small Agency (<250 Public Housing Units)**
- Administering Section 8 Only**

Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

Not required

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Attachments Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- Admissions Policy for Deconcentration (**Attachment A**)
- FY 2005 Capital Fund Program Annual Statement (**Attachment G**)
- Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- PHA Management Organizational Chart
- FY 2005 Capital Fund Program 5 Year Action Plan (**Attachment H**)
- Public Housing Drug Elimination Program (PHDEP) Plan
- Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)

- Other (List below, providing each attachment name)
Attachment B – Definition of Substantial Deviation
Attachment C – Pet Policy
Attachment D – PHA Board Members
Attachment E – Resident Advisory Board
Attachment F – Progress in Meeting Goals
Attachment I – Performance and Evaluation Reports (2003 & 2004)
Attachment J – Community Service Policy

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Any policy governing occupancy of Police Officers in Public Housing <input checked="" type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
NA	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
NA	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
NA	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
NA	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
NA	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
NA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
NA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
NA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
NA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
NA	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
NA	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
For previous PHDEP Grants	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
NA	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
NA	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate 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." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ibility	Size	Loca-tion
Income <= 30% of AMI	454	4	3	3	1	NA	NA
Income >30% but <=50% of AMI	342	4	3	3	1	NA	NA
Income >50% but <80% of AMI	388	4	3	3	1	NA	NA
Elderly	280	4	4	3	1	NA	NA
Families with Disabilities	NA					NA	NA
Race/Ethnicity/W	1140	NA	NA	NA	NA	NA	NA
Race/Ethnicity/B	40	NA	NA	NA	NA	NA	NA
Race/Ethnicity/H	4	NA	NA	NA	NA	NA	NA
Race/Ethnicity							

Source: CHAS data, Lawrenceburg City Jurisdiction Area, 2000 Census

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- Consolidated Plan of the Jurisdiction/s
Indicate year: **2000, Tennessee Housing & Development Agency**
- U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS")
dataset: **2000 Census**

- American Housing Survey data
Indicate year:
- Other housing market study
Indicate year:
- Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 tenant-based assistance		
<input checked="" type="checkbox"/>	Public Housing		
<input type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	169		99
Extremely low income <=30% AMI	136	81	
Very low income (>30% but <=50% AMI)	23	14	
Low income (>50% but <80% AMI)	10	6	
Families with children	138	82	
Elderly families	7	5	
Families with Disabilities	24	15	
Race/ethnicity/W	155	92	
Race/ethnicity/B	14	9	
Race/ethnicity/H			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
1BR	73	44	41
2 BR	65	39	33
3 BR	30	18	21
4 BR	1	1	4
5 BR			
5+ BR			
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
If yes:			
How long has it been closed (# of months)? NA			
Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes NA			
Does the PHA permit specific categories of families onto the waiting list, even if generally closed?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			

C. Strategy for Addressing 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**, and the Agency's reasons for choosing this strategy.

(1) Strategies

NEED: SHORTAGE OF AFFORDABLE HOUSING FOR ALL ELIGIBLE POPULATIONS

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- Apply for additional section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed - finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Other: (list below)

NEED: SPECIFIC FAMILY TYPES: FAMILIES AT OR BELOW 30% OF MEDIAN

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- Employ admissions preferences aimed at families with economic hardships
- Adopt rent policies to support and encourage work
- Other: (list below)

NEED: SPECIFIC FAMILY TYPES: FAMILIES AT OR BELOW 50% OF MEDIAN

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- Employ admissions preferences aimed at families who are working
- Adopt rent policies to support and encourage work
- Other: (list below)

NEED: SPECIFIC FAMILY TYPES: THE ELDERLY

Strategy 1: Target available assistance to the elderly:

Select all that apply

- Seek designation of public housing for the elderly
- Apply for special-purpose vouchers targeted to the elderly, should they become available
- Other: (list below)

NEED: SPECIFIC FAMILY TYPES: FAMILIES WITH DISABILITIES

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- Seek designation of public housing for families with disabilities
- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities
- Other: (list below)

NEED: SPECIFIC FAMILY TYPES: RACES OR ETHNICITIES WITH DISPROPORTIONATE HOUSING NEEDS

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

- Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations
- Other: (list below)

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- Funding constraints
- Staffing constraints
- Limited availability of sites for assisted housing
- Extent to which particular housing needs are met by other organizations in the community
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- Influence of the housing market on PHA programs
- Community priorities regarding housing assistance
- Results of consultation with local or state government
- Results of consultation with residents and the Resident Advisory Board
- Results of consultation with advocacy groups
- Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2005 grants)		
a) Public Housing Operating Fund	\$594,420	
b) Public Housing Capital Fund	\$448,000	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
Capital Fund 2004	\$448,057	Capital Improvements
3. Public Housing Dwelling Rental Income	\$358,000	Mgmt. & Maint. Operations
4. Other income (list below)		
Interest, etc.	\$59,000	Operations
5. Non-federal sources (list below)		
Excess Utilities	\$10,600	Utilities
Investments	\$30,000	Unexpected Needs
Total resources	\$1,948,077	PHA Operations

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- When families are within a certain number of being offered a unit: (state number)
- When families are within a certain time of being offered a unit: (state time)
- Other: (describe) **Begin processing application immediately upon taking application.**

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- Criminal or Drug-related activity
- Rental history
- Housekeeping
- Other (describe)
Violent behavior, rape/sex offender, record of serious disturbance, alcohol related criminal activities, false information and refusal to complete forms.

- c. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- Community-wide list
- Sub-jurisdictional lists
- Site-based waiting lists
- Other (describe)

b. Where may interested persons apply for admission to public housing?

- PHA main administrative office
- PHA development site management office
- Other (list below)

c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment Not Applicable**

1. How many site-based waiting lists will the PHA operate in the coming year?
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously
If yes, how many lists?
4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
 - PHA main administrative office
 - All PHA development management offices
 - Management offices at developments with site-based waiting lists
 - At the development to which they would like to apply
 - Other (list below)

(3) Assignment

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)
 - One
 - Two
 - Three or More
- b. Yes No: Is this policy consistent across all waiting list types?
- c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

- a. Income targeting:
 - Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
- b. Transfer policies:
In what circumstances will transfers take precedence over new admissions? (list below)
 - Emergencies
 - Overhoused

- Underhoused
- Medical justification
- Administrative reasons determined by the PHA (e.g., to permit modernization work)
- Resident choice: (state circumstances below)
- Other: (list below)

c. Preferences

1. Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If “no” is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- Working families and those unable to work because of age or disability
- Veterans and veterans’ families
- Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

Date and Time

Former Federal preferences:

- 1 Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
-
- 1 Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

Other preferences (select all that apply)

- Working families and those unable to work because of age or disability
- Veterans and veterans' families
- 2 Residents who live and/or work in the jurisdiction
- Those enrolled currently in educational, training, or upward mobility programs
- Households that contribute to meeting income goals (broad range of incomes)
- Households that contribute to meeting income requirements (targeting)
- Those previously enrolled in educational, training, or upward mobility programs
- Victims of reprisals or hate crimes
- Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- The PHA applies preferences within income tiers
- Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- The PHA-resident lease
- The PHA's Admissions and (Continued) Occupancy policy
- PHA briefing seminars or written materials
- Other source (list)

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- At an annual reexamination and lease renewal
- Any time family composition changes
- At family request for revision
- Other (list)

Component 3, (6) Deconcentration and Income Mixing

- a. Yes No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

- b. Yes No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments?
If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]
TN048-001	48		Increase high-income
TN048-002	12		Increase high-income
TN048-009 (scattered site)	17		Increase low-income

B. Section 8 **Not Applicable**

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.
Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- Criminal or drug-related activity only to the extent required by law or regulation
 - Criminal and drug-related activity, more extensively than required by law or regulation
 - More general screening than criminal and drug-related activity (list factors below)
 - Other (list below)
- b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- Criminal or drug-related activity
 - Other (describe below)

(2) Waiting List Organization **Not Applicable**

a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)

- None
- Federal public housing
- Federal moderate rehabilitation
- Federal project-based certificate program
- Other federal or local program (list below)

b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)

- PHA main administrative office
- Other (list below)

(3) Search Time **Not Applicable**

a. Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

(4) Admissions Preferences **Not Applicable**

a. Income targeting

Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

b. Preferences

1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

- Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- Victims of domestic violence
- Substandard housing
- Homelessness

High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

Working families and those unable to work because of age or disability

Veterans and veterans' families

Residents who live and/or work in your jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

Households that contribute to meeting income goals (broad range of incomes)

Households that contribute to meeting income requirements (targeting)

Those previously enrolled in educational, training, or upward mobility programs

Victims of reprisals or hate crimes

Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

Victims of domestic violence

Substandard housing

Homelessness

High rent burden

Other preferences (select all that apply)

Working families and those unable to work because of age or disability

Veterans and veterans' families

Residents who live and/or work in your jurisdiction

Those enrolled currently in educational, training, or upward mobility programs

Households that contribute to meeting income goals (broad range of incomes)

Households that contribute to meeting income requirements (targeting)

Those previously enrolled in educational, training, or upward mobility programs

Victims of reprisals or hate crimes

Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

Date and time of application

Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one)

- This preference has previously been reviewed and approved by HUD
 The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- The PHA applies preferences within income tiers
 Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- The Section 8 Administrative Plan
 Briefing sessions and written materials
 Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- Through published notices
 Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA’s income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
- The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50 (**\$50.00**)

2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below: **Not Applicable**

c. Rents set at less than 30% than adjusted income

1. Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

- For the earned income of a previously unemployed household member
- For increases in earned income
- Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

- Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

- For household heads
- For other family members
- For transportation expenses
- For the non-reimbursed medical expenses of non-disabled or non-elderly families
- Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- Yes for all developments
- Yes but only for some developments
- No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- For all developments
- For all general occupancy developments (not elderly or disabled or elderly only)
- For specified general occupancy developments
- For certain parts of developments; e.g., the high-rise portion
- For certain size units; e.g., larger bedroom sizes
- Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- Market comparability study
- Fair market rents (FMR)
- 95th percentile rents
- 75 percent of operating costs
- 100 percent of operating costs for general occupancy (family) developments
- Operating costs plus debt service
- The "rental value" of the unit
- Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- Never
- At family option
- Any time the family experiences an income increase
- Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) _____
- Other (list below)

g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- The section 8 rent reasonableness study of comparable housing
- Survey of rents listed in local newspaper

- Survey of similar unassisted units in the neighborhood
 Other (list/describe below)

B. Section 8 Tenant-Based Assistance **Not Applicable**

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

(1) Payment Standards

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- At or above 90% but below 100% of FMR
 100% of FMR
 Above 100% but at or below 110% of FMR
 Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

- FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
 The PHA has chosen to serve additional families by lowering the payment standard
 Reflects market or submarket
 Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

- FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
 Reflects market or submarket
 To increase housing options for families
 Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- Annually
 Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- Success rates of assisted families
 Rent burdens of assisted families
 Other (list below)

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

- \$0
- \$1-\$25
- \$26-\$50

b. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Describe the PHA's management structure and organization.

(select one)

- An organization chart showing the PHA's management structure and organization is attached.
- A brief description of the management structure and organization of the PHA follows:
Staff Positions Include:
Executive Director
Director of Operations
Occupancy Coordinator
Occupancy Specialist
Family Self Sufficiency Coordinator
Resident Services Coordinator
Director of Maintenance
Maintenance Mechanic
Modernization Coordinator

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use “NA” to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	303	100
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

C. Management and Maintenance Policies

List the PHA’s public housing management and maintenance policy documents, manuals and handbooks that contain the Agency’s rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

- Dwelling Lease (Revised)
- Admissions & Continued Occupancy Policy (ACOP) Revised
- Grievance Policy
- Tenant Transfer Policy
- Tenant Charges for Abuse
- Tenant Utility Allowances
- Pet Policy for Elderly, Disabled, and Families
- Community Space Policy
- Unit/Building/Site Housing Quality Standards Materials
- Maintenance Plan (includes provision for Eradication of Pest Infestation)
- Disposition Policy
- Procurement Policy
- Personnel Policy and Job Descriptions
- Travel Policy
- Daily Receipt and Change Fund Policy
- Operating Budget and Subsidy Schedule
- Comprehensive Grant Plan and Budget

Public Housing Agency Plans (5-Year and Annual)
Public Housing Management Assessment Certification and Score
HUD Regulations, Notices, and Circular Letters
Annual Contributions Contract (ACC) & Amendments with HUD
Tennessee Sunshine/Open Records Law
Non-Profit Corporation Act and Charter
Lawrenceburg Housing Authority By-Laws
Cooperation Agreement Between Authority/City of Lawrenceburg

(2) Section 8 Management: (list below)
Not Applicable

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- PHA main administrative office
 PHA development management offices
 Other (list below)

B. Section 8 Tenant-Based Assistance - Not Applicable

1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- PHA main administrative office
 Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) (**Attachment G**)

-or-

The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name)(**Attachment H**)

-or-

The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

- Yes No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)
- b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)
1. Development name:
 2. Development (project) number:
 3. Status of grant: (select the statement that best describes the current status)
 - Revitalization Plan under development
 - Revitalization Plan submitted, pending approval
 - Revitalization Plan approved
 - Activities pursuant to an approved Revitalization Plan underway
- Yes No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?
If yes, list development name/s below:
- Yes No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?
If yes, list developments or activities below:
- Yes No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?
If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

2. Activity Description

Yes No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

Demolition/Disposition Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:	

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

Designation of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected: 7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes No: Have any of the PHA’s developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If “No”, skip to component 11; if “yes”, complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 11. If “No”, complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	
<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)	
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	
<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	
<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)	

(B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? **Submitted in FY 2001 Agency Plan**
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? **NA**
- c. How many Assessments were conducted for the PHA's covered developments? **NA**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development Name	Number of Units
NA	

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments. **NA**

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. Yes No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

- Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected:

6. Coverage of action: (select one)

- Part of the development
 Total development

B. Section 8 Tenant Based Assistance

Not Applicable

1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

- Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- 25 or fewer participants
 26 - 50 participants
 51 to 100 participants
 more than 100 participants

b. PHA-established eligibility criteria

- Yes No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

- Yes No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)? If yes, what was the date that agreement was signed? DD/MM/YY

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)
- Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- Jointly administer programs
- Partner to administer a HUD Welfare-to-Work voucher program
- Joint administration of other demonstration program
- Other (describe)

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- Public housing rent determination policies
- Public housing admissions policies
- Section 8 admissions policies
- Preference in admission to section 8 for certain public housing families
- Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- Preference/eligibility for public housing homeownership option participation
- Preference/eligibility for section 8 homeownership option participation
- Other policies (list below)

b. Economic and Social self-sufficiency programs

- Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
GED Training	10	waiting list	PHA-Wide	Public Housing

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2002 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	15	15 – 7/1/04
Section 8		

- b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- Informing residents of new policy on admission and reexamination
- Actively notifying residents of new policy at times in addition to admission and reexamination.
- Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- Establishing a protocol for exchange of information with all appropriate TANF agencies
- Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- Residents fearful for their safety and/or the safety of their children
- Observed lower-level crime, vandalism and/or graffiti
- People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- Safety and security survey of residents
- Analysis of crime statistics over time for crimes committed “in and around” public housing authority
- Analysis of cost trends over time for repair of vandalism and removal of graffiti
- Resident reports
- PHA employee reports
- Police reports
- Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- Other (describe below)

3. Which developments are most affected? (list below)

All developments

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- Contracting with outside and/or resident organizations for the provision of crime-and/or drug-prevention activities
- Crime Prevention Through Environmental Design
- Activities targeted to at-risk youth, adults, or seniors

- Volunteer Resident Patrol/Block Watchers Program
- Other (describe below)
PHA police patrol funded through CFP.

2. Which developments are most affected? (list below)
All developments.

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- Police provide crime data to housing authority staff for analysis and action
- Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- Police regularly testify in and otherwise support eviction cases
- Police regularly meet with the PHA management and residents
- Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- Other activities (list below)

2. Which developments are most affected? (list below)
All developments.

D. Additional information as required by PHDEP/PHDEP Plan **Not Applicable**

PHAs eligible for FY 2002 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- Yes No: Has the PHA included the PHDEP Plan for FY 2002 in this PHA Plan?
- Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: _____)

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))? (If no, skip to component 17.)
2. Yes No: Was the most recent fiscal audit submitted to HUD?
3. Yes No: Were there any findings as the result of that audit?
4. Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
 - Not applicable
 - Private management
 - Development-based accounting
 - Comprehensive stock assessment
 - Other: (list below)
3. Yes No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

Attached at Attachment (File name)

Provided below:

1. **Comment:** Would like speed bumps on Maple Avenue.
Response: LHA is in discussion with the City on this issue.
2. **Comment:** Would like more landscaping in all developments.
Response: Landscaping is included for some developments and will be added for other developments in future years.
3. **Comment:** Would like to see floor tile replaced with a lighter color.
Response: Will be addressed when floors need replacing.
4. **Comment:** Would like to see exterior concrete block covered with smooth material.
Response: LHA will consider options.
5. **Comment:** Need more parking.
Response: Some parking is in planning stage—more parking will be considered for future years.
6. **Comment:** Would like to have larger facility for resident activities.
Response: LHA will review options for inclusion in future years.

3. In what manner did the PHA address those comments? (select all that apply)

Considered comments, but determined that no changes to the PHA Plan were necessary.

The PHA changed portions of the PHA Plan in response to comments
List changes below:

Other: (list below)

See above responses to comments.

B. Description of Election process for Residents on the PHA Board

1. Yes No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. Yes No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

- Candidates were nominated by resident and assisted family organizations
- Candidates could be nominated by any adult recipient of PHA assistance
- Self-nomination: Candidates registered with the PHA and requested a place on ballot
- Other: (describe)

b. Eligible candidates: (select one)

- Any recipient of PHA assistance
- Any head of household receiving PHA assistance
- Any adult recipient of PHA assistance
- Any adult member of a resident or assisted family organization
- Other (list)

c. Eligible voters: (select all that apply)

- All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- Representatives of all PHA resident and assisted family organizations
- Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

[State of Tennessee, Tennessee Housing Development Agency](#)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Attachments

Use this section to provide any additional attachments referenced in the Plans.

ATTACHMENT A - DECONCENTRATION POLICY

The objective of the Deconcentration Policy for the public housing units is to ensure that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development. The specific objective of the PHA is to house not less than 40% of its public housing inventory with families that have incomes at or below 30% of the area median income by public housing development. Also, the PHA will take actions to ensure that no individual development has a concentration of higher income families in one or more of the developments. To ensure that the PHA does not concentrate families with higher income levels, it is the goal of the PHA not to house more than 60% of its units in any one development with families whose income exceeds 30% of the area median income. The PHA will track the status of family income, by development, on a monthly basis by utilizing income data maintained by the PHA. To accomplish the deconcentration goals, the PHA will take the following actions:

1. At the beginning of each PHA fiscal year, the PHA will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous PHA fiscal year.
2. The PHA will house not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of the area median income, and will not house families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, in accordance with the incentives reflected in Section II, 6, Resident Selection of the PHA's Admission and Continued Occupancy Policy (ACOP).

ATTACHMENT B – AMENDMENT AND DEVIATION DEFINITIONS

- A. **Substantial Deviation from the 5-Year Plan**
The Lawrenceburg Housing Authority will consider a "Substantial Deviation" to be a change in the Mission, Goals, and Objectives of the PHA Plans that is duly determined by the Board of Commissioners and the Resident Advisory Board to be a deviation from the latest approved PHA Plans. If the Board of Commissioners and the Resident Advisory Board consider the change(s) in the Mission, Goals, and Objectives to be substantial in their determination, the Plans will be submitted to HUD for review and approval.
- B. **Significant Amendment or Modification to the Annual Plan**
In addition, if there is a change in funding of greater than 20 percent of the Operating Budget and/or the Capital Fund amount, this will be considered an amendment/modification to the Plans, except for emergencies that are beyond the control of the PHA. If the item/activity is included in the 5-Year Capital Improvement Program, it will not be considered a significant change although the cost may exceed the 20 percent threshold; therefore, not requiring HUD review and approval.

ATTACHMENT C – PET POLICY

In accordance with HUD regulations, reasonable requirements for Lawrenceburg Public Housing Authority residents to own pets are established in this Pet Policy. However, the LHA may not apply or enforce this policy against service animals that assist persons with disabilities. (This exclusion applies to service animals that reside in public housing and service animals that visit the developments).

Each family may own or have one household pet in the dwelling unit occupied by the family listed below and reflected in this Lease Addendum.

Lessee: _____ Unit/Account No. _____

Co-Lessee: _____

Non-Refundable Pet Fee: _____

Name and Description of Pet: _____

I, _____, and all household members agree to the following rules and statements made in this Lease Addendum as set by the Lawrenceburg Housing Authority (LHA). When the LHA refers to “pet”, that means that only domesticated dogs, cats, birds and fish are included. Snakes are prohibited. This Lease Addendum reflects the responsibilities of the LHA and the resident.

Only one pet is allowed per family.

I agree to pay \$150.00 as a non-refundable fee to cover the reasonable operating costs to the project relating to the presence of my pet. This fee may be used by the LHA for damages caused to units (filters, extermination, wall/floor damage, etc.)

WHAT I MUST DO:

1. I must provide the LHA with all verifications of my pet’s inoculations, neutering and spaying before I can have my pet. I must bring verification of inoculations each year at the annual reexamination date.
2. I must make sure my pet receives the medical care necessary for my pet to maintain good health.
3. I must have my dog or cat on a leash any time it is out of my own apartment.
4. I must exercise my pet only in the yard of the unit assigned to me.
5. I am solely responsible for cleaning up pet droppings outside the unit and on facility grounds. Droppings must be disposed of by being placed in a sack and then placed in a refuse container outside the building.
6. I must accept complete responsibility for any damages to property caused by my pet. This includes other resident’s property as well as all LHA property.
7. I will hold harmless the LHA for any injuries or damages caused by my pet.

8. I must accept complete responsibility for the behavior and conduct of my pet at all times.
9. In the event of my pet's death, I must dispose of the remains according to local health regulations, but NOT on LHA property.
10. I must notify the LHA, when requesting maintenance for my unit, that I have a pet and I will be present when the LHA responds to the request for maintenance or the pet will be restrained in order for maintenance to work in a safe environment.
11. I will not own or possess a "vicious" dog. A "vicious dog" means any dog which, without provocation, attacks or bites, or has attacked or bitten a human being or domestic animal; or any dog owned or harbored primarily or in part for the purpose of dog fighting (these include, but are not limited to: Boxers, German Shepherds, Pit Bulls, Rottweilers, Dobermans and Chows).
12. I will not tie my pet to any utility (including, gas meters, electrical devices, water faucets, etc.)

WHAT THE LHA WILL NOT DO:

1. The LHA will not be responsible for my pet at any time regardless of the circumstances.
2. The LHA will not be responsible for any damages or injuries caused by my pet.
3. The LHA will not permit my pet to become a nuisance to management or other residents.

WHAT THE LHA WILL DO:

1. The LHA will furnish stickers to be placed on the window closest to the front door, identifying the presence of a dog or cat.
2. When it is necessary for the LHA to spray for fleas, ticks or other insects caused by my pet other than at the regular appointed times, the LHA will charge me for the cost of spraying. The non-refundable fee paid by the resident will be used for this expense, if applicable.
3. The LHA will dispose of my pet in any way necessary, if at any time I leave my pet unattended or abandoned for an unreasonable period of time.
4. The LHA will take appropriate actions if my pet is causing the living or working conditions in my building to be unsafe, unsanitary or indecent.
5. The LHA will give me a Notice to Vacate and will end my Lease if there are repeated or continuous problems with my pet.

The Resident Advisory Board will act as the Pet Review Board for request exceptions to identified pets.

DO I UNDERSTAND THIS PET POLICY

By signing this Pet Policy, I am saying that the LHA has gone over this policy with me. I am also saying that I understand all of it. I understand that this is an agreement between the LHA and me and that it is a legally binding contract between me and the LHA.

Date: _____

Lessee

Lawrenceburg Housing Authority

Typed Name

Executive Director

PET APPLICATION

Resident's Name: _____

Unit/Apt No. _____

Type of Pet: _____

Age of Pet: _____

Name of Pet: _____

Weight of Pet: _____

How long have you owned this pet? _____

Has your pet lived in rental housing before? If so, where: _____

Date of last vaccinations: _____ License Tag No. _____

Has your pet been spayed or neutered? Yes No

If your pet is a cat, has it been declawed? Yes No

Provide three names and numbers for persons responsible for your pet in case of emergency:

Name and Telephone Number of Veterinarian: _____

Exterminator-Contact Person: _____

Name of Insurance Company that has my liability insurance: _____

I have furnished the LHA with a veterinarian's statement certifying that my pet has been
 spayed neutered and has received all vaccines required by law, and is in good health with no
communicable diseases. Yes No

If my pet is a service animal that assists with my disability, I have furnished a doctor's statement indicating that I
am disabled and require assistance of the animal. Yes No

Date: _____

Signature: _____

Lessee

serv:\housing\2025\951\petwpolicy.frm

ATTACHMENT D: PHA BOARD MEMBERS

Larry Morrow , Chairman
Kathy Pollock, Vice Chairman
Walter Adams, Resident Commissioner
Uday Shah
Glenda Ezell

ATTACHMENT E: RESIDENT ADVISORY BOARD

Tonya Liles, Development 48-9
Darla Smith, Development 48-1
Theresa Knowles, Development 48-7
Christine Polk, Development 48-3
Jeremy Gordon, Development 48-5

ATTACHMENT F: PROGRESS IN MEETING GOALS

Goal: Renovate or modernize public housing units.

The LHA is continually upgrading its public housing units. With the inception of the Capital Fund Program, we are now able to better plan and implement physical improvements.

Goal: Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments.

The LHA has revised its ACOP to promote deconcentration and income mixing.

Goal: Implement public housing security improvements.

The LHA continues to implement activities initiated previously with PHDEP funds. The LHA contracts with the City of Lawrenceburg to provide a police officer for patrol, education and security.

Goal: Increase the number and percentage of employed persons in assisted families.

The LHA gives admission preferences for employed applicants. LHA staff work closely with residents to encourage job and employment opportunities.

Goal: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability.

The LHA continues to operate its public housing program in a fair manner that ensures equal access and opportunities to all residents and eligible applicants.

Goal: Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability.

Our inspections, maintenance and CFP modernization programs are spread equally among all of our developments.

Goal: Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.

The LHA provides accessible and handicapped units where needed for all of our special needs residents.

ATTACHMENT J: COMMUNITY SERVICE POLICY

Introduction

Community Service is defined as the performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community Service is not employment and may not include political activities. Additionally, residents may not perform activities that relate to work, which is ordinarily performed by Lawrenceburg Housing Authority employees in order to satisfy this requirement.

The Quality Housing and Work Responsibility Act of 1998 requires that nonexempt residents of public housing perform community service. HUD states that the provision is not intended to be perceived as punitive, but rather considered as rewarding activity that will assist residents in improving their own and their neighbors' economic and social well-being and give residents a greater stake in their communities.

Effective January 01, 2001, in order to be eligible for continued occupancy in public housing, each adult family member must either contribute eight hours per month of community service, or participate in an economic self-sufficiency program. A combination of community service and a self-sufficiency program will suffice to meet this eight-hour requirement. The only exception will be those who meet the exemption requirements, which are defined in the body of this policy.

Section One Qualifying Activities

The following list contains community service and self-sufficiency locations and activities that meet the requirements of this policy. This list is not meant to be all-inclusive and other programs may be added, as they are identified. If not included on this list, residents must contact the LHA office to ensure their activity complies with this policy. Qualifying activities are as follows:

- (1) Resident Organizations
- (2) Neighborhood Patrols
- (3) Participation in Adult Education Programs

- (4) Summer Food Program (LHA or City of Lawrenceburg)
- (5) Youth Activities (sponsored through the LHA community centers)
- (6) Youth Activities (sponsored through the City of Lawrenceburg)
- (7) Participation in any approved job training program (JTPA or other State Program)
- (8) Salvation Army
- (9) Harbor House
- (10) The Shelter
- (11) Family Resource Center
- (12) Westside Outreach
- (13) Senior Citizen Center (meals on wheels)
- (14) Adult Learning Center
- (15) Participation in Community Action Councils or Committees (Drug Task Force)
- (16) Participation in AA or other substance abuse programs
- (17) Loretto Samaritan House
- (18) Hunger Coalition
- (19) LHA Safe and Smart
- (20) A single parent of under school age children, or a parent of under school age children, where the other adult member qualifies for an exemption from the community service requirement.
- (21) Work either full or part time anywhere.

Residents will be required to bring in verification of eight hours completed for each month in which they do not qualify for an exemption. The administrator of the program in which the service is being performed must sign this verification of hours worked. The Housing Authority will maintain a time sheet on each Resident that is required to do community service, and will track the hours completed. Residents may complete more than eight hours in one month toward the total of 96 hours per year, therefore completing the requirement earlier than the twelve months allowed. LHA will review family compliance on a continuous basis, and will verify such compliance annually, at least thirty days before the end of the twelve-month lease term.

Any non-exempt Resident, who does not complete the required hours in a calendar year, will not be eligible for continued assistance from the Housing Authority, and their lease may be terminated. Residents who have completed their required hours shall have their lease automatically renewed, unless terminated for other good cause. Requirements for exemption are contained in Section Two of this policy.

Section Two Exemptions

In order to qualify for an exemption from the Community Service requirement, each adult family member must complete an exemption request, along with proper verification, and return this request to the LHA office. LHA will approve or deny the request for exemption within 30 days from receipt of a request that includes the required documentation. A family member may request exempt status at any time. All new residents are exempt for the partial month when they first move in, after which an exemption must be requested if one is desired.

Exempt individuals are those who meet one or more of the following criteria, and can provide verification:

- (1) Is 62 years of age or older;
Verification: Birth Certificate

(2) Is a blind or disabled individual, as defined under the Social Security Act, and who certifies that because of this disability he or she is unable to comply with the community service requirements;

Verification: Social Security or SSI award letter

(3) Can provide documentation from a licensed physician that they have a disabling condition, which would prevent them from completing the community service requirement, specifying the expected length of the disabling condition;

Verification: Letter from physician

(4) Is a family member who is the primary caregiver for someone who is blind or disabled as set forth above;

Verification: Award letter of affected member

(5) Is a family member who is employed, either full or part-time;

Verification: Check Stubs or Income Verification Form

(6) Is a full-time student; (in high school or college with 12 credit hours or more)

Verification: Enrollment Form

(7) Is a family member who is exempt from work activity under Part A of Title IV of the Social Security Act or under any other State welfare program;

Verification: Letter or Notice from DHS

(8) Is a family member receiving assistance, benefits or services under a State program funded under Part A of Title IV of the Social Security Act or under any other State welfare program, and who is in compliance with that program;

Verification: Families First PRP or benefit letter

Section Three Non-Compliance

LHA shall not renew or extend any lease, or provide any new lease, for a dwelling unit for any household that includes an adult member who was subject to the community service requirement and failed to comply with the requirement. If LHA determines that there is a family member who is required to fulfill the service requirement, but who has violated this family obligation, the resident will be considered to be in non-compliance, and notified of this determination in writing. This notification will contain the following:

A. A brief description of the non-compliance;

B. Notification that LHA will not renew the lease at the end of the twelve month lease term unless;

1. The resident, and any other non-compliant family member enter into a written agreement with LHA in order to cure such non-compliance. Non-compliance must be cured in accordance with such agreement by participating in an economic self-sufficiency program for or contributing to community service as many additional hours as the resident needs to comply in the aggregate with such requirement and make themselves current with program requirements; or

2. The family provides written assurance satisfactory to the LHA that the resident or other non-compliant family member no longer resides in the unit.

C. Notification that the resident may request a grievance hearing on the LHA determination in accordance with LHA grievance procedures. Additionally, that the resident may exercise any available judicial remedy to seek timely redress for LHA's non-renewal of the lease because of such determination.

Section Four Documentation

On the following pages are the forms used to document participation in Community Service and/or economic self-sufficiency activities. These forms include 1.) A Resident notification letter; 2.) An exemption request form; 3.) A Master time sheet; and 4.) An individual time sheet.

COMMUNITY SERVICE WORK REQUIREMENT NOTIFICATION LETTER

The Quality Housing and Work Responsibility Act of 1998 requires that nonexempt residents of public housing perform community service. In order to be eligible for continued occupancy, each adult family member must contribute eight hours of community service per month or participate in an economic self-sufficiency program, or a combination of the two for eight hours per month, unless they are exempt from the requirement.

Eligible activities for completion of your Community Service Requirement will include eight hours per month contributed to any of the following activities or organizations:

- (1) Resident Organizations
- (2) Neighborhood Patrols
- (3) Participation in Adult Education Programs
- (4) Summer Food Program (LHA or City of Lawrenceburg)
- (5) Youth Activities (sponsored through the LHA community centers)
- (6) Youth Activities (sponsored through the City of Lawrenceburg)
- (7) Participation in any approved job training program (JTPA or other State Program)
- (8) Salvation Army
- (9) Harbor House
- (10) The Shelter
- (11) Family Resource Center
- (12) Westside Outreach
- (13) Senior Citizen Center (meals on wheels)
- (14) Adult Learning Center
- (15) Participation in Community Action Councils or Committees (Drug Task Force)
- (16) Participation in AA or other substance abuse programs
- (17) Lorreto Samaritan House
- (18) Hunger Coalition
- (19) LHA Safe and Smart
- (20) A single parent of under school age children, or a parent of under school age children, where the other adult member qualifies for an exemption from the community service requirement.
- (21) Work either full or part time anywhere.

If you are participating in a program that is not listed, contact the Housing Authority office with the name of the program in which you are participating. This list is not meant to be all-inclusive and other programs may be added, as we become aware of them.

You will be required to bring in verification of hours completed each month. The administrator of the program in which you are participating must sign your verification of hours worked. The Housing Authority will maintain a time sheet on each Resident that is required to do community service, and will track the hours completed. You may complete more than eight hours in one month toward your total of 96 hours per year, therefore completing your requirement earlier than the twelve months allowed. You must only have eight hours for each month in

which you do not qualify for an exemption. Exemption request forms are available at the Housing Authority business office.

Anyone who does not complete the required hours in a calendar year, will not be eligible for continued assistance from the Housing Authority, and their lease may be terminated. Residents who have completed their required hours shall have their lease automatically renewed, unless terminated for other good cause.

Sincerely,

Eddy Casteel
Executive Director

COMMUNITY SERVICE EXEMPTION REQUEST

All adult (over 18) members of resident families are required to perform eight hours of community service each month, unless they qualify for exempt status with the Housing Authority. To qualify for an exemption, each adult family member must complete and return an exemption request, along with proper documentation, to verify that they are exempt from the community service requirement.

Exempt individuals are those who meet one or more of the following criteria. An adult who:

- (1) Is 62 years of age or older; Verification: Birth Certificate
- (2) Is a blind or disabled individual, as defined under the Social Security Act, and who certifies that because of this disability he or she is unable to comply with the community service requirements; Verification: Social Security or SSI award letter
- (3) Can provide documentation from a licensed physician that they have a disabling condition, which would prevent them from completing the community service requirement, specifying the expected length of the disabling condition; Verification: Letter from physician
- (4) Is a family member who is the primary caregiver for someone who is blind or disabled as set forth above; Verification: Award letter of affected member
- (5) Is a family member who is employed, either full or part-time; Verification: Check Stubs or Income Verification Form
- (6) Is a full-time student; (in high school or college with 12 credit hours or more) Verification: Enrollment Form
- (7) Is a family member who is exempt from work activity under Part A of Title IV of the Social Security Act or under any other State welfare program; Verification: Letter or Notice from DHS
- (8) Is a family member receiving assistance, benefits or services under a State program funded under Part A of Title IV of the Social Security Act or under any other State welfare program, and who is in compliance with that program; Verification: Families First PRP or benefit letter

In order to qualify for the exemption, you must turn in verification of your exemption with your request form. All new residents are exempt for the partial month when they first move in, after which an exemption must be requested if one is desired. If an exemption is not requested, it will be assumed that you do not desire one and you will be required to perform the required community service hours. Please fill in required information below.

I do hereby request an exemption from performing my eight hours of community service each month, because I qualify for one of the exemptions listed above.

NAME _____ ADDRESS _____ DATE _____

COMMUNITY SERVICE – INDIVIDUAL TIME SHEET

Name: _____ Move-in Date: _____

Address: _____ Start Month: _____

Month	Hours Required	Hours Comp	Organization	Location	Verified
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
TOTAL					

Annual Requirements Completed Yes No

Certified By _____

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part 1: Summary

Attachment G

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program: TN43P04850105 Capital Fund Program Replacement Housing Factor Grant No:		Federal FY of Grant: FY 2005	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$86,600.00			
3	1408 Management Improvements	\$72,000.00			
4	1410 Administration	\$32,000.00			
5	1411 Audit	\$0.00			
6	1415 liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$33,100.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$67,000.00			
10	1460 Dwelling Structures	\$136,453.00			
11	1465.1 Dwelling Equipment—Nonexpendable	\$10,588.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$7,500.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
18	1498 Mod Used for Development	\$0.00			
19	1502 Contingency	\$2,759.00			
20	Amount of Annual Grant: (sum of lines 2-19)	\$448,000.00			
21	Amount of line 20 Related to LBP Activities	\$0.00			
22	Amount of line 20 Related to Section 504 Compliance	\$0.00			
23	Amount of line 20 Related to Security	\$0.00			
24	Amount of line 20 Related to Energy Conservation Measures	\$0.00			

Annual Statement/Performance and Evaluation Report

Attachment G

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: CFP TN37P04850105 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FY 2005			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Transfer funds to PHA Operating Budget	1406	1	\$86,600.00				
PHA-Wide	Community oriented policing	1408	1	\$30,000.00				
PHA-Wide	Computer software	1408	1	\$2,000.00				
PHA-Wide	Salary-Resident Services Coordinator	1408	1	\$25,000.00				
PHA-Wide	Resident training	1408	1	\$500.00				
PHA-Wide	Staff training	1408	1	\$2,000.00				
PHA-Wide	Vista worker	1408	1	\$12,500.00				
PHA-Wide	PHA staff salaries (mod. coordinator)	1410	1	\$32,000.00				
PHA-Wide	A/E design services	1430	1	\$17,200.00				
PHA-Wide	A/E inspection services	1430	1	\$11,400.00				
PHA-Wide	CGP annual update.	1430	1	\$4,500.00				
PHA-Wide	Purchase new personal computers	1475	3	\$7,500.00				
PHA-Wide	Contingencies	1502	1	\$2,759.00				
TN048-002	Construct additional parking spaces to achieve 1.5 space per dwelling unit.	1450	18	\$27,000.00				
TN048-003A	Plant trees and shrubs.	1450	40	\$40,000.00				
TN048-003A	Cover all fascia with aluminum.	1460	2968	\$20,034.00				
TN048-003A	Cover porch ceilings with aluminum.	1460	2886	\$19,481.00				
TN048-003A	Remove existing and install new perforated vinyl soffit.	1460	3009	\$20,311.00				
TN048-003A	Install new dishwasher.	1465	35	\$10,588.00				
TN048-003AE	Cover all fascia with aluminum.	1460	2474	\$16,700.00				
TN048-003AE	Cover porch ceilings with aluminum.	1460	4346	\$29,336.00				
TN048-003AE	Remove existing and cover miscellaneous wood trim and fascia with aluminum.	1460	2000	\$13,500.00				
TN048-003B	Cover all fascia with aluminum.	1460	816	\$5,508.00				
TN048-003B	Cover porch ceilings with aluminum.	1460	888	\$5,994.00				
TN048-003B	Remove existing and install new perforated vinyl soffit.	1460	828	\$5,589.00				

Annual Statement/Performance and Evaluation Report

Attachment G

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: TN43P04850105 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FY 2005	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN048-002 M.L. Lumpkins Homes	09/30/07			09/30/09			
TN048-003A M.L. Lumpkins Homes	09/30/07			09/30/09			
TN048-003AE M.L. Lumpkins Homes	09/30/07			09/30/09			
TN048-003B M.L. Lumpkins Homes	09/30/07			09/30/09			
Police patrol	09/30/07			09/30/09			
Computer software	09/30/07			09/30/09			
Res. coordinator	09/30/07			09/30/09			
Resident training	09/30/07			09/30/09			
Staff training	09/30/07			09/30/09			
Vista worker	09/30/07			09/30/09			

Attachment H
Capital Fund Program Five-Year Action Plan
Part I: Summary

PHA Name: Lawrenceburg Housing Authority				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2006 PHA FY: 2006	Work Statement for Year 3 FFY Grant: 2007 PHA FY: 2007	Work Statement for Year 4 FFY Grant: 2008 PHA FY: 2008	Work Statement for Year 5 FFY Grant: 2009 PHA FY: 2009
	Annual Statement				
PHA-Wide		\$164,500.00	\$160,000.00	\$184,000.00	\$223,000.00
TN048-001		\$283,500.00	\$0.00	\$0.00	\$0.00
TN048-002		\$0.00	\$72,000.00	\$0.00	\$0.00
TN048-003A		\$0.00	\$0.00	\$264,000.00	\$0.00
TN048-003AE		\$0.00	\$216,000.00	\$0.00	\$0.00
TN048-003B		\$0.00	\$0.00	\$0.00	\$60,000.00
TN048-005		\$0.00	\$0.00	\$0.00	\$165,000.00
TN048-007		\$0.00	\$0.00	\$0.00	\$0.00
TN048-007E		\$0.00	\$0.00	\$0.00	\$0.00
TN048-008		\$0.00	\$0.00	\$0.00	\$0.00
TN048-009		\$0.00	\$0.00	\$0.00	\$0.00
TOTAL		\$448,000.00	\$448,000.00	\$448,000.00	\$448,000.00

Attachment H

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: 2006 PHA FY: 2006			Activities for Year: <u>3</u> FFY Grant: 2007 PHA FY: 2007		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
	PHA-Wide		1,000.00	PHA-Wide		\$8,500.00
See						
Annual	TN048-001	Electrical	\$72,000.00	TN048-002	Electrical	\$18,000.00
Statement		Mechanical	\$211,500.00		Mechanical	\$54,000.00
				TN048-003AE	Electrical	\$54,000.00
					Mechanical	\$162,000.00
Total CFP Estimated Cost			\$284,500.00			\$296,500.00

Attachment H

Capital Fund Program Five-Year Action Plan

Part II: Supporting Pages—Work Activities

Activities for Year: <u> 4 </u> FFY Grant: 2008 PHA FY: 2008			Activities for Year: <u> 5 </u> FFY Grant: 2009 PHA FY: 2009		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
PHA-Wide		\$41,000.00	PHA-Wide		\$1,000.00
TN048-003A	Electrical	\$66,000.00	TN048-003B	Electrical	\$15,000.00
	Mechanical	\$198,000.00		Mechanical	\$45,000.00
			TN048-005	Electrical	\$75,000.00
				Mechanical	\$90,000.00
Total CFP Estimated Cost		\$305,000.00			\$226,000.00

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part 1: Summary

Attachment I

PHA Name: Lawrenceburg Housing Authority	Grant Type and Number Capital Fund Program: TN43P04850104 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2004
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: **06/30/04** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$89,611.00			
3	1408 Management Improvements	\$59,500.00			
4	1410 Administration	\$32,000.00			
5	1411 Audit	\$0.00			
6	1415 liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$33,100.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$233,846.00			
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
18	1498 Mod Used for Development	\$0.00			
19	1502 Contingency	\$0.00			
20	Amount of Annual Grant: (sum of lines 2-19)	\$448,057.00			
21	Amount of line 20 Related to LBP Activities	\$0.00			
22	Amount of line 20 Related to Section 504 Compliance	\$0.00			
23	Amount of line 20 Related to Security	\$0.00			
24	Amount of line 20 Related to Energy Conservation Measures	\$0.00			

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

Attachment I

Part II: Supporting Pages

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: CFP TN37P04850104 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FY 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Transfer to PHA Operating Budget	1406	1	\$89,611.00				
PHA Wide	Community Oriented Policing	1408	1	\$30,000.00				
PHA Wide	Computer software	1408	1	\$2,000.00				
PHA Wide	Salary Resident Services Coordinator	1408	1	\$25,000.00				
PHA Wide	Resident training	1408	1	\$500.00				
PHA Wide	Staff training	1408	1	\$2,000.00				
PHA Wide	PHA staff salaries (mod coordinator)	1410	1	\$32,000.00				
PHA Wide	A/E design services	1430	1	\$17,200.00				
PHA Wide	A/E inspection services	1430	1	\$11,400.00				
PHA Wide	CFP annual update.	1430	1	\$4,500.00				
TN37P048001	Remove existing and install new asphalt shingle roof shingles and felt.	1460	816	\$92,307.00				
TN37P048001	Replace damaged sheathing.	1460	8160	\$6,781.00				
TN37P048001	Cover porch ceilings with aluminum.	1460	3779	\$25,508.00				
TN37P048001	Remove existing and cover miscellaneous wood trim and fascia with aluminum.	1460	5557	\$37,510.00				
TN37P048001	Remove existing and install new perforated vinyl soffit.	1460	7390	\$49,883.00				
TN37P048002	Cover all fascia with aluminum.	1460	1058	\$7,142.00				
TN37P048002	Cover porch ceilings with aluminum.	1460	773	\$5,218.00				
TN37P048002	Remove existing and install new perforated vinyl soffit.	1460	1407	\$9,497.00				

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

Attachment I

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: TN43P04850104 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FY 2004	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN37P048001 ML Lumpkins Homes	09/30/06			09/30/08			
TN37P048002 ML Lumpkins Homes	09/30/06			09/30/08			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part 1: Summary

Attachment I

PHA Name: Lawrenceburg Housing Authority	Grant Type and Number Capital Fund Program: TN43P04850103 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2003
--	--	--

Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 6/30/04 Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds		\$0.00		
2	1406 Operations	\$77,378.00	\$51,011.00		
3	1408 Management Improvements	\$52,500.00	\$52,500.00	\$52,500.00	\$34,793.03
4	1410 Administration	\$32,000.00	\$32,000.00	\$32,000.00	\$31,842.54
5	1411 Audit		\$0.00		
6	1415 liquidated Damages		\$0.00		
7	1430 Fees and Costs	\$25,600.00	\$25,600.00	\$25,600.00	\$23,882.40
8	1440 Site Acquisition		\$0.00		
9	1450 Site Improvement	\$55,931.00	.00		
10	1460 Dwelling Structures	\$143,479.00	\$225,777.00	\$225,777.00	\$185,051.44
11	1465.1 Dwelling Equipment—Nonexpendable		\$0.00		
12	1470 Non-dwelling Structures		\$0.00		
13	1475 Non-dwelling Equipment		\$0.00		
14	1485 Demolition		\$0.00		
15	1490 Replacement Reserve		\$0.00		
16	1492 Moving to Work Demonstration		\$0.00		
17	1495.1 Relocation Costs		\$0.00		
18	1498 Mod Used for Development		\$0.00		
19	1502 Contingency		\$0.00		
20	Amount of Annual Grant: (sum of lines 2-19)	\$386,888.00	\$386,888.00	\$386,888.00	\$279,569.41
21	Amount of line 20 Related to LBP Activities		\$0.00		
22	Amount of line 20 Related to Section 504 Compliance		\$0.00		
23	Amount of line 20 Related to Security	\$27,500.00	\$27,500.00		
24	Amount of line 20 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: CFP TN37P04850103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FY 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Transfer to PHA Operating Budget	1406	1	\$77,378.00	\$52,344.00			
PHA Wide	Community Oriented Policing	1408	1	\$27,500.00	\$27,500.00	\$27,500.00	\$13,750.02	
PHA Wide	Computer software	1408	1		\$0.00			
PHA Wide	Salary Resident-Coordinator	1408	1	\$25,000.00	\$25,000.00	\$25,000.00	\$21,043.01	
PHA Wide	Resident training	1408	1		\$0.00			
PHA Wide	Staff training	1408	1		\$0.00			
PHA Wide	VISTA worker	1408	1		\$0.00			
PHA Wide	PHA staff salaries (mod coordinator)	1410	1	\$32,000.00	\$32,000.00	\$32,000.00	\$31,842.53	
PHA Wide	A/E Design services	1430	1	\$15,000.00	\$15,000.00	\$15,000.00	\$15,000.00	
PHA Wide	A/E inspection services	1430	1	\$9,100.00	\$9,100.00	\$9,100.00	\$4,372.40	
PHA Wide	CFP Annual update	1430	1	\$1,500.00	\$1,500.00	\$1,500.00	\$1,500.00	
PHA Wide	Contingencies	1502	1		\$0.00			
TN048-003AE	Plant trees and shrubs	1450	36	\$20,644.00	\$0.00			
TN048-007	Plant trees and shrubs	1450	28	\$12,644.00	\$0.00			
TN048-007E	Plant trees and shrubs	1450	38	\$22,643.00	\$0.00			
TN048-007E	Replace kitchen base & wall cabinets & countertops	1460	28	\$23,358.00	\$52,986.00	\$52,986.00	\$47,320.75	
TN048-007E	Install new backsplash at range	1460	28	\$0.00	\$2,100.00	\$2,100.00	\$1,890.00	
TN048-007E	Install new ducted range hood and roof cap.	1460	501	\$0.00	\$3,338.00	\$3,338.00	\$1,949.40	
TN048-007E	Install new plywood access panel at washing machine box and painted plywood access panel	1460	28	\$770.00	\$1,876.00	\$1,876.00	\$1,638.90	
TN048-007E	Patch and paint kitchen walls and ceiling. Paint wall at washer box	1460	28	\$0.00	\$3,500.00	\$3,500.00	\$3,037.00	
TN048-007E	Install new dishwasher	1460	28	\$0.00	\$8,904.00	\$8,904.00	\$7986.60	
TN048-007E	Install new light fixture at kitchen sink	1460	28	\$1,925.00	\$1,904.00	\$1,904.00		

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: CFP TN37P04850103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FY 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TN048-007E	Install new kitchen sink, faucet, supply lines and stops and drain line to existing trap adapter	1460	28	\$7,084.00	\$14,336.00	\$14,336.00	\$12,699.00	
TN048-007E	Replace windows with new single hung insulated windows and insect screen	1460	28	\$21,560.00	\$23,700.00	\$23,700.00	\$21,330.00	
TN048-007E	Enlarge opening in brick to accommodate larger window in bedroom only of one-bedroom units	1460	20	\$6,160.00	\$7,000.00	\$7,000.00	\$6,300.00	
TN048-007E	Install new cultured marble window sills	1460	20	\$924.00	\$1,500.00	\$1,500.00	\$1,350.00	
TN048-007E	Convert electrical outlet at refrigerator to single receptacle	1460	28	\$385.00	\$0.00			
TN048-007E	Install additional electrical outlet at kitchen countertop	1460	28	\$924.00	\$0.00			
TN048-008	Replace existing built up roof at laundry canopy with new modified bitumen roof	1460	1	\$0.00	\$1,850.00	\$1,850.00	\$832.50	
TN048-008	Remove all metal roofing, gutters and downspouts, and framing at second floor windows; provide new metal roofing, gutters and downspouts/Remove fascia, 1 st run of shingles and cut back roof decking to accommodate the new metal siding	1460	1	\$0.00	\$47,619.00	\$47,619.00	\$40,758.75	
TN048-008	Remove vinyl siding and metal screen at condensing unit closets; provide new metal louvers and exposed aggregate panels	1460	1	\$0.00	\$16,771.00	\$16,771.00	\$6,597.66	
TN048-008	Enlarge opening in brick to accommodate larger window in bedroom of only 1br units	1460	16	\$6,160.00	\$5,600.00	\$5,600.00		

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

Attachment I

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: CFP TN37P04850103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FY 2003		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TN048-008	Replace windows with new horizontal-sliding windows	1460	1	\$21,560.00	\$32,526.00	\$32,526.00	\$25,795.33	
TN048-008	Remove vinyl siding at roof dormers and provide new exposed aggregate panels	1460	2	\$924.00	\$1,600.00	\$1,600.00		
TN048-008	Install new lavatory	1460	32	\$2,200.00	\$0.00			
TN048-008	Install new lavatory faucet	1460	32	\$2,200.00	\$0.00			
TN048-008	Install new lavatory supplies and stops	1460	32	\$616.00	\$0.00			
TN048-008	Install new backsplash at range	1460	24	\$1,122.00	\$0.00			
TN048-008	Install new ducted range hood	1460	24	\$3,102.00	\$0.00			
TN048-008	Replace base cabinets	1460	268	\$8,844.00	\$0.00			
TN048-008	Replace countertops	1460	268	\$2,948.00	\$0.00			
TN048-008	Replace wall cabinets	1460	397	\$10,918.00	\$0.00			
TN048-008	Convert electrical outlet at refrigerator to single receptacle	1460	24	\$330.00	\$0.00			
TN048-008	Install additional electrical outlet at kitchen countertop	1460	24	\$792.00	\$0.00			
TN048-008	Install GFI protected outlet within 6' of sink	1460	24	\$990.00	\$0.00			
TN048-008	Install new light fixture at kitchen sink	1460	24	\$1,650.00	\$0.00			
TN048-008	Install new kitchen sink drain lines to tee in wall	1460	24	\$990.00	\$0.00			
TN048-008	Install new double-bowl kitchen sink	1460	24	\$2,640.00	\$0.00			
TN048-008	Install new dishwasher	1465	24	\$7,260.00	\$0.00			
TN048-009	Install new dishwasher	1465	17	\$5,143.00	\$0.00			

Annual Statement/Performance and Evaluation Report

Attachment I

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: TN43P04850103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: FY 2003	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN048-001 – ML Lumpkins Homes	09/16/05			09/16/07			
TN048-002 – ML Lumpkins Homes	09/16/05			09/16/07			
TN048-003A – ML Lumpkins Homes	09/16/05			06/16/07			
TN048-003AE – ML Lumpkins Homes	09/16/05			09/16/07			
TN048-003B – ML Lumpkins Homes	09/16/05			06/16/07			
TN048-005 – Mahr & Liberty Ave.	09/16/05			09/16/07			
TN048-007 – Clearview Apartments	09/16/05			06/16/07			
TN048-007E – Spring Street	09/16/05			09/16/07			
TN048-008 – Maplewood Apartments	09/16/05			09/16/07			
TN048-009 – Scattered Apartments	09/16/05			09/16/07			
Community Policing	09/16/05			09/16/07			
Computer software	09/16/05			09/16/07			
Resident Svc. Coordinator	09/16/05			09/16/07			
Resident Training	09/16/05			09/16/07			
Staff training	09/16/05			09/16/07			

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part 1: Summary

Attachment I

PHA Name: Lawrenceburg Housing Authority	Grant Type and Number Capital Fund Program: TN43P04850203 Capital Fund Program Replacement Housing Factor Grant No:	Federal FY of Grant: FY 2003
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: **6/30/04** Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	\$0.00			
2	1406 Operations	\$0.00			
3	1408 Management Improvements	\$0.00			
4	1410 Administration	\$0.00			
5	1411 Audit	\$0.00			
6	1415 liquidated Damages	\$0.00			
7	1430 Fees and Costs	\$0.00			
8	1440 Site Acquisition	\$0.00			
9	1450 Site Improvement	\$0.00			
10	1460 Dwelling Structures	\$72,512.00	\$77,106.00	\$77,106.00	\$20,209.63
11	1465.1 Dwelling Equipment—Nonexpendable	\$0.00			
12	1470 Nondwelling Structures	\$0.00			
13	1475 Nondwelling Equipment	\$0.00			
14	1485 Demolition	\$0.00			
15	1490 Replacement Reserve	\$0.00			
16	1492 Moving to Work Demonstration	\$0.00			
17	1495.1 Relocation Costs	\$0.00			
18	1498 Mod Used for Development	\$0.00			
19	1502 Contingency	\$4,594.00			
20	Amount of Annual Grant: (sum of lines 2-19)	\$77,106.00	\$77,106.00	\$77,106.00	\$20,209.63
21	Amount of line 20 Related to LBP Activities	\$0.00			
22	Amount of line 20 Related to Section 504 Compliance	\$0.00			
23	Amount of line 20 Related to Security	\$0.00			
24	Amount of line 20 Related to Energy Conservation Measures				

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

Attachment I

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: CFP TN37P04850203 Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant: FY 2003			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
TN048-008	Install new kitchen base cabinets and countertops.	1460	24	\$19,408.00	\$19,408.00	\$19,408.00	\$12,105.72	
TN048-008	Install new dishwashers	1460	24	\$7,632.00	\$7,632.00	\$7,632.00	\$2,851.20	
TN048-008	Install new kitchen sink stops, supply lines and drain lines.	1460	24	\$1,008.00	\$1,008.00	\$1,008.00	\$453.60	
TN048-008	Install new electrical outlets in kitchen	1460	24	\$1,440.00	\$1,440.00	\$1,440.00		
TN048-008	Install new overhead light fixture in kitchen	1460	24	\$1,632.00	\$1,632.00	\$1,632.00	\$937.66	
TN048-008	Patch and paint kitchen walls and ceiling	1460	24	\$3,000.00	\$3,000.00	\$3,000.00		
TN048-008	Install new carpet, vinyl tile and shoe mold in one-and two bedrooms.	1460	12	\$38,392.00	\$38,392.00	\$38,392.00		
TN048-007E	Change specified kitchen faucet to faucet w/sprayer	1460	28		\$840.00	\$840.00	\$729.00	
TN048-007E	Replumb piping in 8 eff. Units to move from behind dishwasher	1460	1		\$587.00	\$587.00	\$528.30	
TN048-008	Remove and replace rotted deck and framing at mansard roof in four locations. Replace rotten wood in various other locations and relocate 10 electrical outlets	1460	1		\$1,200.00	\$1,200.00	\$982.35	
TN048-008	Remove fascial, 1 st run of shingles and cut back roof decking to accommodate the new metal siding	1460	1		\$1967.00	\$1967.00	\$1,621.80	

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

Attachment I

PHA Name: Lawrenceburg Housing Authority		Grant Type and Number Capital Fund Program #: TN43P04850203 Capital Fund Program Replacement Housing Factor #:					Federal FY of Grant: FY 2003
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN048-008 Maplewood Apartments	2/13/06			2/13/08			
TN048-007E	2/13/06			2/13/08			