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[24 CFR Part 903.7 9 (r)]

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Attachments

Required Attachments:

- Community Service Notification Certification
- FRHA Pet Policy
- FRHA Policy for Violence against Women
- Family Self Sufficiency Program
- Application for Federal Assistance
- Annual Statement/ Performance and Evaluation Report.

21 February 2007

Dear Citizens of the City of Franklin:

Thank you for the opportunity to present to the Five Year Plan for the Franklin Redevelopment and Housing Authority for 2007-2012. This plan includes an annual plan for 2007-2008. All statutory requirements of the Quality Housing and Work Responsibility Act of 1998 have been included along with any required addendums to policy and procedures as required by the Department of Housing and Urban Development (HUD). The Annual Plan and the Five Year Plan are a binding agreement between HUD and FRHA until successful completion of the activities set forth in this submission based on its approval.

As required by HUD we have met with the Resident Council and have included their input. Community input on the needs for programs and training have been crucial in assisting this agency with developing its strategic plan. We appreciate your efforts to assist us in forming a plan that will continue to improve our communities and the lives of each family member.

The Franklin Redevelopment and Housing Authority has 209 public Housing units, during this year we have moved from a troubled housing authority to a Standard performer in regards to Public Housing. We remain troubled for fiscal year 2006 in regards to our Section 8 program but should move to Standard Performer in September. As with each endeavor we undertake we can only be successful with your assistance, please continue to provide your assistance by completing the Resident Satisfaction Surveys, and by attending and participating on the Resident Council. Over the next five years, the FRHA will provide quality affordable housing in the City of Franklin and will continue pursuing additional affordable housing.

We invite you, the public to send us your comments and questions concerning the Plan. Comments may be sent to my attention at the above address. You are also invited to attend the Public Hearing for the Annual Plan on 28 March 2007 at 7:00 p.m. at City Hall in the Council Chambers. We look forward to hearing from you and discussing the growth and continued improvement of our housing authority.

Sincerely

S.L. Frazier
Executive Director

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB
0348-0046

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> B a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> A a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, <i>if known</i> Franklin Redevelopment and Housing Authority 601 Campbell Avenue Franklin, VA 23851 Congressional District, <i>if known</i> ^{4c}	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, <i>if known</i>	
6. Federal Department/Agency:	7. Federal Program Name/Description: CFDA Number, <i>if applicable</i> _____	
8. Federal Action Number, <i>if known</i>	9. Award Amount, <i>if known</i> \$ _____	
10. a. Name and Address of Lobbying Registrant (<i>if individual, last name, first name, M</i>):	b. Individuals Performing Services (<i>including address if different from No. 10a</i>) (<i>last name, first name, M</i>):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Program/Activity Receiving Federal Grant Funding

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Signature	Date (mm/dd/yyyy)

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X standard Annual, X standard 5-Year/Annual or streamlined 5-Year/Annual PHA Plan for the PHA fiscal year beginning 2007, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
7. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.

13. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
14. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
15. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
16. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
17. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
18. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
19. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
20. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
21. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

S. L. Frazier
PHA Name

VA018
PHA Number/HA Code


- X Standard PHA Plan for Fiscal Year: 2007
 ___ Standard Five-Year PHA Plan for Fiscal Years 2005- 2010, including Annual Plan for FY 2007
 ___ Streamlined Five-Year PHA Plan for Fiscal Years 20__ - 20__, including Annual Plan for FY 20__

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official Benny Burgess	Title Vice-Chairman
Signature X	Date

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

I, Rowland Taylor the City Manager of Franklin, Virginia certify that the Five Year and Annual PHA Plan of the Franklin Redevelopment and Housing Authority is consistent with the Consolidated Plan of The City of Franklin, Virginia prepared pursuant to 24 CFR Part 91.



3-26-07

Signed / Dated by Appropriate State or Local Official

Rowland L. Taylor
CITY MANAGER

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Program/Activity Receiving Federal Grant Funding

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

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

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

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

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

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

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

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

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

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

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

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

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. Sites for Work Performance. The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

Check here if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Title

Signature

Date

X

07U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

PHA Plans

5 Year Plan for Fiscal Years 2005 - 2010

Annual Plan for Fiscal Year 2007 - 2008

**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: Franklin Redevelopment and Housing Authority
PHA Number: VA018

PHA Fiscal Year Beginning: July 2007

PHA Programs Administered:

Public Housing and Section 8 **Section 8 Only** **Public Housing Only**

Number of public housing units: 209

Number of S8 units: 315

PHA Consortia: (check box if submitting a joint PHA Plan and complete table)

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
 - Suburban Gardens
 - Old Town Terrace
 - Pretlow

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)
 - Martin Luther King Jr. Community Center
 - Franklin Public Library

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)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 20007-08 grants)		
a) Public Housing Operating Fund	629,615	PHA Operations
b) Public Housing Capital Fund	454,335	PHA Operations & Rehabilitation
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	1,289,259	Housing Assistance & Administration
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)		Rehabilitation & Modernization
VA36P01850105	163,462	Rehabilitation & Modernization
VA36P01850106	259,504	Rehabilitation & Modernization
3. Public Housing Dwelling Rental Income	390,722	PHA Operations
Non -dwelling	6,325	PHA Operations
Excess Utilities	39,256	PHA Operations
3. Other income (list below)		
Interest, Dividends, others	43,901	PHA Operations
4. Non-federal sources (list below)		
Total resources	\$3,276,379	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

(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:
- When families are within a certain time of being offered a unit:
- Other: (describe) Ninety (90) days of begin offered a unit the family will be invited to an interview and the verification process begins

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)

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**

1. How many site-based waiting lists will the PHA operate in the coming year?

Two (2)

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? **Two (2)**

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
- Over housed
- Under housed
- 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.

1 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
- 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)

(6) Deconcentration and Income Mixing

a. Yes No: Did the PHA’s analysis of its family (general occupancy) need for developments to determine concentrations of poverty indicate the measures to promote deconcentration of poverty or income mixing?

b. Yes No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to **b** was yes, what changes were adopted? **(select all that apply)**

Adoption of site-based waiting lists
If selected, list targeted developments below:

Employing waiting list “skipping” to achieve deconcentration of poverty or income mixing goals at targeted developments
If selected, list targeted developments below:

Employing new admission preferences at targeted developments
If selected, list targeted developments below:

Other (list policies and developments targeted below)

d. Yes No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? **(select all that apply)**

- Additional affirmative marketing
- Actions to improve the marketability of certain developments
- Adoption or adjustment of ceiling rents for certain developments
- Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
- Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? **(select all that apply)**

- Not applicable: results of analysis did not indicate a need for such efforts
- List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? **(select all that apply)**

- Not applicable: results of analysis did not indicate a need for such efforts
 List (any applicable) developments below:

B. Section 8

(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

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 – FRHA’s Section 8 is currently closed
 Other (list below)

(3) Search Time

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

If yes, state circumstances below: The voucher holder must provide proof that he/she has been searching which may be cause for a 30 day extension.

(4) Admissions Preferences

- 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

(1) Income Based Rent Policies

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))

---Or---

- 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

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

3. If yes to question 2, list these policies below:

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

Other (describe below)
Childcare

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

(1) Payment Standards

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

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)]

A. PHA Management Structure

- An organization chart showing the PHA's management structure and organization is attached.

**Board of Commissioner
Executive Director
Administrative Assistant**

**Director of Housing Services
Public Housing Manager
HCVP Specialist
HQS Inspector
Maintenance Mechanic (3)
Maintenance Worker/Grounds Person (1)
Resident Services Coordinator**

**Director of Finance
Financial Analyst
Property Manager (2)**

Director of Development

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	205	25%
Section 8 Vouchers	262	10%

C. Management and Maintenance Policies

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

- ACOP
- Rent Collection
- Fraud
- One Strike and You're out
- Eviction
- Expendable Equipment
- Human Resources
- Employment Grievance
- Maintenance Plan
- Procurement
- General Accounting
- Tenant Transfer
- UPCS Inspection Manual
- Pet Policy
- Community Service
- Domestic Violence

(2) Section 8 Management: (list below)

- Sec 8 Administration Plan
- HQS Inspection Manual
- Lease

6. Grievance Procedures

PHA [24 CFR Part 903.7 9 (f)]

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

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)]

A. Capital Fund Activities

(1) Capital Fund Program Annual Statement

Select one:

- The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (Component 7 of the Table Library)

-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

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)

-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)

**PHA Plan
Table Library**

**Component 7
Capital Fund Program Annual Statement
Parts I, II, and II**

**Annual Statement
Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number VA36P018501-07 FFY of Grant Approval:

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	45,433
3	1408 Management Improvements	45,433
4	1410 Administration	45,433
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	20,000
10	1460 Dwelling Structures	223,036
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Non-dwelling Structures	75,000
13	1475 Non-dwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	\$454,335
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	75,000
24	Amount of line 20 Related to Energy Conservation Measures	

**Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
HA wide	Operations		\$45,433
HA wide	Security		75,000
HA wide	IT support/upgrade/training		45,433
Suburban Garden	Sewer & drain lines - additional	VA 18-2	183,036
Pretlow & Oldtown	Site improvement– sidewalk, parking, & others	VA 18-3	20,000
HA wide	Administration		45,433
HA Wide	Dwelling structure repair		40,000

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
HA wide/ admin	6-30-08	6-30-10
Suburban Gardens	6-30-08	6-30-10
Pretlow & Oldtown	6-30-08	6-30-10

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
VA 18-1	Suburban Gardens	60	2%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace sanitary sewer lines/kitchen drain lines and connect to main sewer lines			\$228,179	2008
Vinyl Flooring			\$240,897	2008
Replace Wiring			\$118,578	2008
Asbestos Abatement			\$189,651	2008
HVAC Installation			157,107	2008
Sidewalk & parking lot repair			10,500	2008
Playground			5,000	2008
Transformers & electrical connection			95,000	2008
Landscaping			10,000	2008
Refs and Ranges			19,500	2009
Roof Replacement			20,000	2009
Storm Doors			65,000	2010
Replace existing interior closet doors			40,000	2011
Security			18,750	2008
Security			18,750	2009
Security			18,750	2010
Security			18,750	2011
Relocation cost			40,000	2008
REAC Physical Inspection – various items			10,000	2008
Total estimated cost over next 5 years			\$1,324,412	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
VA 18-2	Berkley Court	75	2%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace sanitary sewer lines/kitchen drain lines and connect to main sewer lines		\$125,465	2009
Vinyl Flooring		350,000	2011
HVAC Installation		231,000	2011
Sidewalk & parking lot repair		10,500	2008
Playground		5,000	2008
Site Drainage		10,000	2008
Landscaping		10,000	2008
Refs and Ranges		19,500	2008
Security		18,750	2008
Security		18,750	2009
Security		18,750	2010
Security		18,750	2011
REAC Physical Inspection – various items		10,000	2008
Water Heaters		84,000	2011
Total estimated cost over next 5 years		\$930,465	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
VA 18-2	Administration Office	1	0
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Carpeting		\$20,000	2008
Vehicle – Van Replacement		25,000	2008
Vehicle – Stratus Car replacement		15,000	2008
Gutter & Soffit replacement		4,000	2009
Software upgrade		25,000	2008
Softgrade upgrade		25,000	2009
Software upgrade		25,000	2010
Software upgrade		25,000	2011
Computers and equipment		50,000	2011
Total estimated cost over next 5 years		\$ 214,000	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
VA 18-3	Pretlow Gardens	40	2%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Vinyl Flooring		\$177,500	2011
Asbestos Abatement		35,000	2008
HVAC installation		220,000	2011
Playground		5,000	2008
Refs & Ranges		7,500	2009
Gutter and soffit repair		3,000	2009
Security		18,750	2008
Security		18,750	2009
Security		18,750	2010
Security		18,750	2011
Water heaters		16,500	2008
Replace existing interior closet doors		20,000	2011
Remove and replace furnace room doors		20,000	2008
Transformers & electrical connection		45,000	2008
REAC Physical Inspection – various items		10,000	2008
Total estimated cost over next 5 years		\$634,500	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
VA 18-3	Old Town Terrace	35	2%
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Vinyl Flooring		\$177,500	2010
Asbestos abatement		30,000	2008
HVAC Installation		222,500	2010
Playground		5,000	2008
Refs and ranges		7,500	2009
Gutter and soffit replacement		3,000	2009
Security		18,750	2008
Security		18,750	2009
Security		18,750	2010
Security		18,750	2011
Replace existing interior closet doors		20,000	2011
Remove and replace furnace room doors		10,000	2008
Transformers & electrical connection		45,000	2008
REAC Physical Inspection – various items		10,000	2008
Total estimated cost over next 5 years		\$605,500	

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:

Bank Street at Suburban Gardens.

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:

FRHA will continue acquisitioning land for in-fill housing

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

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: In-fill housing throughout the community

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:	Suburban Gardens
1b. Development (project) number:	VA 18-1
2. Activity type:	Demolition <input type="checkbox"/> Disposition <input checked="" type="checkbox"/>
3. Application status (select one)	Approved <input checked="" type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission:	<u>12/16/05</u>
5. Number of units affected:	15
6. Coverage of action (select one)	<input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity:	a. Actual or projected start date of activity: Sept 07 b. Projected end date of activity: May 2009

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)

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

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: Suburban Gardens	
1b. Development (project) number: VA 018001	
2. Federal Program authority:	
<input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input checked="" type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one)	
<input checked="" type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input checked="" type="checkbox"/> Planned application	
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (01/04/2006)	
5. Number of units affected: Fifteen (15) Public Housing Units	
6. Coverage of action: (select one)	
<input checked="" type="checkbox"/> Part of the development <input type="checkbox"/> Total development	

B. Section 8 Tenant Based Assistance

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 parts 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 (1)]

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? 08/17/2002

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) Plan to jointly administer a Jobs/Training Program

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” skips 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)
<i>Family Self Sufficiency (FSS)</i>	53	<i>Specific Criteria</i>	<i>PHA Main</i>	<i>PH and Sec 8</i>
Homeownership	40	Other	PHA Main	PH and Sec 8

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2005 Estimate)	Actual Number of Participants (As of: 27/02/2007)
Public Housing	14	14
Section 8	39	39

- 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)]

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 use 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)

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)

2. Which developments are most affected? (list below)
Suburban Gardens and Berkley Court

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)
Suburban Gardens and Berkley Court

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2005 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 2005 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:

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)

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

1. Consolidated Plan jurisdiction: The City of Franklin
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.

**PHA Plan
Table Library**

**Component 7
Capital Fund Program Annual Statement**

Parts I, II, and II

**Annual Statement
Capital Fund Program (CFP) Part I: Summary**

Capital Fund Grant Number VA36P018501-05 FFY of Grant Approval: (08/2006)

Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	34,999
3	1408 Management Improvements	34,999
4	1410 Administration	34,999
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	183,035
11	1465.1 Dwelling Equipment-Nonexpendable	17,990
12	1470 Non-dwelling Structures	43,900
13	1475 Non-dwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	\$ 349,922
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	\$ 70,000

**Annual Statement
Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
HA wide	Security	VA 18-2	\$70,000
HA wide	IT support/upgrade/training	VA 18-2	20,490
Berkley Court	Sewer & drain lines	VA 18-2	0
Berkley Court	Refrigerators & Ranges	VA 18-2	0
HA wide	Administration		34,999
Admin. Building	Floor Carpeting	VA 18-2	0

Annual Statement

Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
HA wide/ admin Berkley	6-30-08 6-30-08	6-30-09 6-30-09
	<p><i>* Revisions request in process w/c have decided to realign the amount for this project to suburban Garden. Since the 2005 grant is not enough to do Suburban Garden. Berkley Court Sewer Line project was moved to 2009 per 5 year capital plan.</i></p>	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note:

PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
VA 18-1	Suburban Gardens	60	28	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Replace sanitary sewer lines/kitchen drain lines and connect to main sewer lines			\$228,179	2008
Vinyl Flooring			\$240,897	2008
Replace Wiring			\$118,578	2008
Asbestos Abatement			\$189,651	2008
HVAC Installation			157,107	2008
Sidewalk & parking lot repair			10,500	2008
Playground			5,000	2008
Security			128,750	2008
Transformers & electrical connection			95,000	2008
Landscaping			10,000	2009
Refs and Ranges			19,500	2009
Roof Replacement			20,000	2010
Storm Doors			65,000	2011
Replace existing interior closet doors			40,000	2011
Security			18,750	2008
Security			18,750	2009
Security			18,750	2010
Security			18,750	2011
Total estimated cost over next 5 years			\$1,274,412	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary.

Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
VA 18-2	Administration Office	1	0	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Carpeting			\$20,000	2008
Vehicle – Van Replacement			25,000	2008
Vehicle – Stratus Car replacement			15,000	2008
Gutter & Soffit replacement			4,000	2009
Software upgrade			25,000	2008
Softgrade upgrade			25,000	2009
Software upgrade			25,000	2010
Software upgrade			25,000	2011
Computers and equipment			50,000	2011
Total estimated cost over next 5 years			\$ 214,000	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note:

PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
VA 18-3	Pretlow Gardens	60	0
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Vinyl Flooring		\$177,500	2008
Asbestos Abatement		35,000	2008
HVAC installation		220,000	2011
Playground		5,000	2008
Refs & Ranges		7,500	2009
Gutter and soffit repair		3,000	2009
Security		18,750	2008
Security		18,750	2009
Security		18,750	2010
Security		18,750	2011
Water heaters		16,500	2008
Replace existing interior closet doors		20,000	2011
Remove and replace furnace room doors		20,000	2008
Transformers & electrical connection		45,000	2008
Total estimated cost over next 5 years		\$624,500	

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note:

PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables			
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development
VA 18-3	Old Town Terrace	60	0
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Vinyl Flooring		\$177,500	2010
Asbestos abatement		30,000	2008
HVAC Installation		222,500	2010
Playground		5,000	2008
Refs and ranges		7,500	2009
Gutter and soffit replacement		3,000	2009
Security		18,750	2008
Security		18,750	2009
Security		18,750	2010
Security		18,750	2011
Replace existing interior closet doors		20,000	2011
Remove and replace furnace room doors		10,000	2008
Transformers & electrical connection		45,000	2008
Total estimated cost over next 5 years		\$595,500	

COMMUNITY SERVICE AND SELF-SUFFICIENCY POLICY

A. Background

The Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt (see definitions) public housing adult residents (18 or older) contribute eight (8) hours per

month of community service (volunteer work) or participate in eight (8) hours of training, counseling, classes or other activities that help an individual toward self sufficiency and economic independence. This is a requirement of the Public Housing Lease.

B. Definitions

Community Service – volunteer work which includes, but is not limited to:

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

NOTE: Political activity is excluded.

Self Sufficiency Activity – activities that include, but are not limited to:

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

Exempt Adult – an adult member of the family who

- Is 62 years of age or older;
- Has a disability that prevents him/her from being gainfully employed;
- Is a caretaker of a disabled person;
- Is working at least thirty (30) hours per week; or
- Is participating in welfare to work program

C. Requirements of the Program

1. The eight (8) hours per month may be either volunteer work or self-sufficiency program activity, or a combination of the two.
2. At least eight (8) hours of activity must be performed each month. An individual may not skip a month and then double up the following month, unless special circumstances warrant special consideration. The Authority will make the determination of whether to allow or disallow a deviation from the schedule.
3. Activities must be performed within the community and not outside the jurisdictional area of the Authority.
4. Family obligations
 - A. At lease execution or re-examination after February 1, 2002 all adult Members (18 or older) of a public housing resident family must
 - (a) provide documentation that they are exempt from Community Service Requirement, if they qualify for an exemption, and
 - (b) sign a certification that they have received and read this policy and understand that if they are not exempt, failure to comply with the Community Service requirement will result in no renewal of their lease
 - B. At each annual re-examination, non-exempt family members must present a completed documentation form (to be provided by the Authority) of activities performed over the previous twelve (12) months. This form will include places for signatures of supervisors, instructors or counselors to the number of hours contributed.
 - C. If a family member is found to be non-compliant to re-examination, he/she and the Head of Household will sign an agreement with the Authority to make up the deficient hours over the next twelve (12) month period.
5. Change in exempt status:
 - If during the twelve (12) month period, a non-exempt person becomes exempt, it is his/her responsibility to report this to the Authority and provide documentation of such.
 - If, during the twelve (12) month period, an exempt person becomes non-exempt, it is his/her responsibility to report this to the Authority.

The Authority will provide the resident with the Recording/Certification documentation form and a list of agencies in the community that provide volunteer and/or training opportunities.

D. Authority obligations

1. To the greatest extent possible and practicable, the Authority will:
 - Provide names and contacts at agencies that can provide opportunities for residents, including disabled, to fulfill their Community Service obligations. (According to the Quality Housing and Work Responsibility Act, a disabled person who is otherwise able to gainfully employed is not necessarily exempt from the Community Service requirement); and
 - Provide in-house opportunities for volunteer work or self-sufficiency programs.
2. The Authority will provide the family with exemption verification forms and Recording/Certification documentation forms and a copy of this policy at initial application and at lease execution.
3. The Authority will make the final determination as to whether or not a family member is exempt from the Community Service requirement. Residents may use the Authority's Grievance Procedure if they disagree with the Authority determination.
4. Non-compliance of family member:
 - At least thirty (30) days prior to annual re-examination and/or lease expiration, the Authority will begin reviewing the exempt or non-exempt status and compliance of family members;
 - If the Authority contacts the resident a maximum of two (2) times with no such luck, the resident will be considered non-compliant
 - If the Authority finds a family member to be non-compliant, the Authority will enter into an agreement with the non-compliant member and the Head of Household to make up the deficient hours over the next twelve (12) month period;

Franklin Redevelopment and Housing Authority

Pet Policy

Date Approved _September 27,2006

1. Purpose

In compliance with Section 227 of Title II of the Housing and Urban-Rural Recovery Act of 1983, and with 24 CFR Parts 5, 243, 842, and 942, Final Rule,

the Franklin Redevelopment and Housing Authority will permit residents of housing projects built exclusively for occupancy by the elderly and persons with disabilities, to own and keep common household pets in their apartment. This policy sets forth the conditions and guidelines under which pets will be permitted. This policy is to be adhered to at all times.

The purpose of the policy is to ensure that pet ownership will not be injurious to persons or property, or violate the rights of all residents to clean, quiet, and safe surroundings

Common Household Pets are defined as follows:

Birds: Including canary, parakeet, finch and other species that are normally kept caged; birds of prey are not permitted.

Fish: Tanks or aquariums are not to exceed 20 gallons in capacity. Poisonous or dangerous fish are not permitted. Only one (1) tank or aquarium is permitted per apartment.

Dogs: Not to exceed thirty (30) pounds at time of maturity. All dogs must be neutered or spayed. No Pit Bulls, Doberman pincher, German shepherd or Chows are allowed.

Cats: All Cats must be neutered or spayed and de-clawed.

Exotic pets such as snakes, monkeys, rodents, etc. are not allowed.

2. **Registration**

Every pet must be registered with the FRHA's management prior to moving the pet into the unit and updated annually thereafter. Registration requires the following:

- a. A certificate signed by a licensed veterinarian, or a state or local authority empowered to inoculate animals (or designate agent of such authority), stating that the animal has received all inoculations required by the state and local law, if applicable (dogs, cats).
- b. Proof of current license, if applicable (dogs, cats)
- c. Identification tag bearing the owner's name, address, and phone number (dogs, cats)
- d. Proof of neutering/spaying and/or de-clawing, if applicable (dogs, cats)
- e. Photograph (no smaller than 3 x 5) of pet or aquarium.
- f. The name, address, and phone number of a responsible party that will care for the pet if the owner becomes temporarily incapacitated.

g. Fish – size of tank or aquarium must be registered.

3. Licenses and Tags

Every dog and cat must wear the appropriate local animal license, a valid rabies tag and a tag bearing the owner's name, address and phone number. All licenses and tags must be current.

4. Density of Pets

Only one (1) dog or cat will be allowed per apartment. Only two (2) birds will be allowed per apartment. The FRHA only will give final approval on type and density of pets.

5. Visitors and Guests

No visitor or guest will be allowed to bring pets on the premises at anytime. Residents will not be allowed to Pet Sit.

Feeding or caring for stray animals is prohibited and will be considered keeping a pet without permission.

6. Pet Restraints

- a. All dogs must be on a leash when not in the owner's apartment. The leash must be no longer than three (3) feet.
- b. Cats must be in a caged container or on a leash when taken out of the owner's apartment.
- c. Birds must be in a cage when inside of the resident's apartment or entering or leaving the building.

7. Liability

Residents owning pets shall be liable for the entire amount of all damages to the Housing Authority premises caused by their pet and all cleaning, de-fleeing and deodorizing required because of such pet. Pet owners shall be strictly liable for the entire amount of any injury to the person or property of other residents, staff or visitors of the Housing Authority caused by their pet, and shall indemnify the Housing Authority for all costs of litigation and attorney's fees resulting from such damage. Pet liability insurance can be obtained through most insurance agents and companies.

8. Sanitary Standards and Waste Disposal

- a. Litter boxes must be provided for cats with use or odor-reducing chemicals.

- b. Fur-bearing pets must wear effective flea collars at all times. Should extermination become necessary, cost of such extermination will be charges to pet owner.
- c. Pet owners are responsible for immediate removal of the feces of their pet and shall be charges in instances where damages occur to Authority property due to pet or removal of pet feces by staff.
 - (i) All pet waste must be placed in a plastic bag and tied securely to reduce odor and placed in designated garbage container and/or trash compactor.
 - (ii) Residents with litter boxes must clean them regularly. Noncompliance may result in removal of the pet. The Housing Authority reserves the rights to impose a mandatory twice weekly litter box cleaning depending on need. Litter box garbage shall be placed in a plastic bag and deposited outside the building in the garbage container and/or trash compactor.
- d. All apartments with pets must be kept free of pet odors and maintained in a clean and sanitary manner. Pet owner's apartments may be subject to inspections once a month.

9. General Rules

The resident agrees to comply with the following rules imposed by the FRHA:

- a. No pet shall be tied up anywhere on Authority property and left unattended for any amount of time.
- b. Pet owners will be required to make arrangements for their pets in the event of vacation or hospitalization.
- c. Doghouses are not allowed on Authority property.

10. Pet Rule Violation and Pet Removal

- a. If it is determined on the basis of objective facts, supported by written statement, that a pet owner has violated a rule governing the pet policy, the FRHA shall serve a notice of pet rule violation on the pet owner. Serious or repeated violations may result in pet removal or termination of the pet owner's tenancy, or both.
- b. If a pet poses a nuisance such as excessive noise⁴, barking, or whining which disrupts the peace of other residents; owner will remove the pet from premises upon request of management within forty-eight (48) hours. Nuisance complaints regarding pets are subject to immediate inspections.

- c. If a pet owner becomes unable either through hospitalization or illness to care for the pet and the person so designated to care for the pet in the pet owner's absence refuses or is unable physically to care for the pet, the FRHA can officially remove the pet. The Authority accepts no responsibility for pets so removed.

11. Rule Enforcement

Violation of these pet rules will prompt a written notice of violation. The pet owner will have seven (7) days to correct the violation or request an informal hearing at when time the Authority's Grievance Procedure will be followed.

12. Grievance

Management and resident agree to utilize the Grievance Procedure described in the Lease Agreement to resolve any dispute between resident and management regarding a pet.

13. Damage Deposit

A "Pet Damage Deposit" will be required for dogs and cats only; however, all pet owners must comply with registration rules for all other pets. The "Pet Damage Deposit" must be paid in advance and is to be used to pay reasonable expenses directly attributable to the presence of the pet in the project including (but not limited to) the cost of repairs and replacement to, and fumigation of, the resident's dwelling unit. The amount of the "Pet Damage Deposit" will be \$200.00.

14. Exceptions

This policy does not apply to animals that are used to assist persons with disabilities. This exclusion applies to animals that reside in the development, as well as animals used to assist persons with disabilities that visit the development. Pets used for the purpose of aiding residents with disabilities must have appropriate certification.

15. No tenant shall house a pet without proper approval from FRHA.



Franklin Redevelopment and Housing Authority

601 Campbell Avenue
Franklin, Virginia 23851
757/562-0384 (Office)
757/562-0267 (Fax)
757/562-0015 (TDD)



COMMUNITY SERVICE NOTIFICATION CERTIFICATION

I am a Public Housing resident of the Housing Authority. I have been notified by the Housing Authority that the Quality Housing and Work Responsibility Act of 1998 requires that all non-exempt public housing adult residents (18 or older) contribute eight (8) hours of community service or participate in eight (8) hour of self-sufficiency activities, or a total of eight (8) hours combined each and every month that I am a Public Housing resident.

I have also been provided with a copy of the Housing Authority's Community Service Policy and I have read it.

Based on my reading of the policy, I am not exempt from the policy and I agree that I will comply with it. As required by the policy, thirty (30) days prior to the annual re-examination of my family, I will provide the Housing Authority with written documentation, using the Housing Authority's form, that verifies that I have met the requirements of the policy. I am also aware that if I do not comply with this requirement, my family's lease will not be renewed.

Resident Name: _____

Date: _____

Signature: _____



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Franklin Redevelopment and Housing Authority

Pet Policy

1. **Purpose**

In compliance with Section 227 of Title II of the Housing and Urban-Rural Recovery Act of 1983, and with 24 CFR Parts 5, 243, 842, and 942, Final Rule, the Franklin Redevelopment and Housing Authority will permit residents of housing projects built exclusively for occupancy by the elderly and persons with disabilities, to own and keep common household pets in their apartment. This policy sets fourth the conditions and guidelines under which pets will be permitted. This policy is to be adhered to at all times.

The purpose of the policy is to ensure that pet ownership will not be injurious to persons or property, or violate the rights of all residents to clean, quiet, and safe surroundings

Common Household Pets are defined as follows:

Birds: Including canary, parakeet, finch and other species that are normally kept caged; birds of prey are not permitted.

Fish: Tanks or aquariums are not to exceed 20 gallons in capacity. Poisonous or dangerous fish are not permitted. Only one (1) tank or aquarium is permitted per apartment.

Dogs: Not to exceed thirty (30) pounds at time of maturity. All dogs must be neutered or spayed. No Pit Bulls, Doberman pincher, German shepherd or Chows are allowed.

Cats: All Cats must be neutered or spayed and de-clawed.

Exotic pets such as snakes, monkeys, rodents, etc. are not allowed.

2. **Registration**

Every pet must be registered with the FRHA's management prior to moving the pet into the unit and updated annually thereafter. Registration requires the following:

- a. A certificate signed by a licensed veterinarian, or a state or local authority empowered to inoculate animals (or designate agent of such authority), stating that the animal has received all inoculations required by the state and local law, if applicable (dogs, cats).
- b. Proof of current license, if applicable (dogs, cats)
- c. Identification tag bearing the owner's name, address, and phone number (dogs, cats)
- d. Proof of neutering/spaying and/or de-clawing, if applicable (dogs, cats)

- e. Photograph (no smaller than 3 x 5) of pet or aquarium.
- f. The name, address, and phone number of a responsible party that will care for the pet if the owner becomes temporarily incapacitated.
- g. Fish – size of tank or aquarium must be registered.

3. Licenses and Tags

Every dog and cat must wear the appropriate local animal license, a valid rabies tag and a tag bearing the owner's name, address and phone number. All licenses and tags must be current.

4. Density of Pets

Only one (1) dog or cat will be allowed per apartment. Only two (2) birds will be allowed per apartment. The FRHA only will give final approval on type and density of pets.

5. Visitors and Guests

No visitor or guest will be allowed to bring pets on the premises at anytime. Residents will not be allowed to Pet Sit.

Feeding or caring for stray animals is prohibited and will be considered keeping a pet without permission.

6. Pet Restraints

- a. All dogs must be on a leash when not in the owner's apartment. The leash must be no longer than three (3) feet.
- b. Cats must be in a caged container or on a leash when taken out of the owner's apartment.
- c. Birds must be in a cage when inside of the resident's apartment or entering or leaving the building.

7. Liability

Residents owning pets shall be liable for the entire amount of all damages to the Housing Authority premises caused by their pet and all cleaning, de-fleaing and deodorizing required because of such pet. Pet owners shall be strictly liable for the entire amount of any injury to the person or property of other residents, staff or visitors of the Housing Authority caused by their pet, and shall indemnify the Housing Authority for all costs of litigation and attorney's fees resulting from such damage. Pet liability insurance can be obtained through most insurance agents and companies.

8. Sanitary Standards and Waste Disposal

- a. Litter boxes must be provided for cats with use or odor-reducing chemicals.
- b. Fur-bearing pets must wear effective flea collars at all times. Should extermination become necessary, cost of such extermination will be charges to pet owner.
- c. Pet owners are responsible for immediate removal of the feces of their pet and shall be charges in instances where damages occur to Authority property due to pet or removal of pet feces by staff.
 - (i) All pet waste must be placed in a plastic bag and tied securely to reduce odor and placed in designated garbage container and/or trash compactor.
 - (ii) Residents with litter boxes must clean them regularly. Noncompliance may result in removal of the pet. The Housing Authority reserves the rights to impose a mandatory twice weekly litter box cleaning depending on need. Litter box garbage shall be placed in a plastic bag and deposited outside the building in the garbage container and/or trash compactor.
- d. All apartments with pets must be kept free of pet odors and maintained in a clean and sanitary manner. Pet owner's apartments may be subject to inspections once a month.

9. General Rules

The resident agrees to comply with the following rules imposed by the FRHA:

- a. No pet shall be tied up anywhere on Authority property and left unattended for any amount of time.
- b. Pet owners will be required to make arrangements for their pets in the event of vacation or hospitalization.
- c. Doghouses are not allowed on Authority property.

10. Pet Rule Violation and Pet Removal

- a. If it is determined on the basis of objective facts, supported by written statement, that a pet owner has violated a rule governing the pet policy, the FRHA shall serve a notice of pet rule violation on the pet owner. Serious or repeated violations may result in pet removal or termination of the pet owner's tenancy, or both.

- b. If a pet poses a nuisance such as excessive noise, barking, or whining which disrupts the peace of other residents; owner will remove the pet from premises upon request of management within forty-eight (48) hours. Nuisance complaints regarding pets are subject to immediate inspections.
- c. If a pet owner becomes unable either through hospitalization or illness to care for the pet and the person so designated to care for the pet in the pet owner's absence refuses or is unable physically to care for the pet, the FRHA can officially remove the pet. The Authority accepts no responsibility for pets that are removed.

11. Rule Enforcement

Violation of these pet rules will prompt a written notice of violation. The pet owner will have seven (7) days to correct the violation or request an informal hearing at when time the Authority's Grievance Procedure will be followed.

12. Grievance

Management and resident agree to utilize the Grievance Procedure described in the Lease Agreement to resolve any dispute between resident and management regarding a pet.

13. Damage Deposit

A "Pet Damage Deposit" will be required for dogs and cats only; however, all pet owners must comply with registration rules for all other pets. The "Pet Damage Deposit" must be paid in advance and is to be used to pay reasonable expenses directly attributable to the presence of the pet in the project including (but not limited to) the cost of repairs and replacement to, and fumigation of, the resident's dwelling unit. The amount of the "Pet Damage Deposit" will be \$200.00.

14. Exceptions

This policy does not apply to animals that are used to assist persons with disabilities. This exclusion applies to animals that reside in the development, as well as animals used to assist persons with disabilities that visit the development. Pets used for the purpose of aiding residents with disabilities must have appropriate certification.

15. No tenant shall house a pet without proper approval from FRHA.

Approved – September 27, 2007



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FRHA POLICY Violence against Women

January 5, 2006, President Bush signed “Violence against Women Act” (VAWA) into law as Public Law 109-162.

The law requires that ALL Housing Authorities (HA) comply with the rule that prohibits the eviction of, and removal of assistance from, certain persons living in public or Section 8 assisted housing if the asserted grounds for such action is an instance of domestic violence, dating violence, sexual assault, or stalking, as those terms are defined in Section 3 of the United States Housing Act of 1937 as amended by VAWA (42 U.S.C. 13925).

This law is extended to all owners that participate in the Section 8 housing choice voucher program and project based programs. The statutory provisions were effective the date the law was enacted, January 5, 2006.

FRHA will require certification when an individual seeks the benefits of this law. This certification must be submitted within fourteen (14) days of FRHA’s request of such certification. If the certification is not provided within this time period, nothing in the VAWA will prohibit FRHA from evicting or terminating voucher assistance for any tenant or lawful occupant that commits violations of a lease. This deadline may be extended by FRHA at their discretion. There are three acceptable types of such certification:

- (a) Certification on HUD approved that the individual is a victim of domestic violence, dating violence, sexual assault or stalking, and that the incident or incidents in question are bona fide incidents of such actual or threatened abuse and meet the requirements of the statute, which shall include the name of the perpetrator; or
- (b) Documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence, sexual assault, or stalking, or the effects of the abuse, in which he professional attests under perjury that the incidents are bona fide incidents of abuse and the victim of domestic violence, dating violence, sexual assault or stalking has signed or attested to the documentation; or
- (c) A court or police record of the incident.

All such information provided to FRHA, including the victim of domestic violence, dating violence, sexual assault, or stalking, shall be retained in confidence by FRHA, except to the extent that the disclosure is:

- (a) requested or consented to by the individual in writing;
- (b) required for use in eviction proceedings; or
- (c) otherwise required by applicable law.

FAMILY

SELF-SUFFICIENCY

PROGRAM

Franklin Redevelopment and Housing Authority
Post Office Box 267
Franklin, VA 23851
(757) 562-0384

WHAT IS THE FAMILY SELF-SUFFICIENCY PROGRAM (FSSP)?

The Family Self-Sufficiency Program is administered by the Franklin Redevelopment and Housing Authority. This program is a community-based approach to assist very low income families in breaking the cycle of poverty and becoming economically self-sufficient. To achieve this goal, the program uses existing resources from all levels of government, social services and the private sector.

Research has shown that the inability to coordinate existing services has kept very low-income families dependent and unable to break the cycle of poverty. No one system has enough resources to do the complete job; however, viewed as a whole there are resources available to tackle the program.

HOW DOES THE PROGRAM WORK?

The Family Self-Sufficiency Program seeks to assess each participating family and provide an integrated delivery of services which will enable the family to become economically self-sufficient. To assist the Housing Authority in the administration of this program, a Coordinating Committee of Representatives from public and private sector organizations has been formed. It is the responsibility of the Housing Authority Staff and the Coordination Committee to create an individual service plan for each participating family. In turn, the family agrees to abide by the service plan and complete the program within a five (5) year time frame.

WHO IS ELIGIBLE?

All participants of the Section 8 Certificate/Voucher Program and public housing residents are eligible. The Franklin Redevelopment and Housing Authority seeks to ensure families will be selected to participate in the Family Self-Sufficiency Program without regard to race, color, religion, sex, disability, familial status or national origin.

All eligible families will be given an equal opportunity to participate. Outreach materials and methods will comply with all applicable Fair Housing and Equal Opportunity requirements.

Participation in the Family Self-Sufficiency Program is voluntary and families will be selected according to the criteria set forth in the selection of the Action Plan entitled "Selection of Families."

WHY SHOULD I PARTICIPATE?

The Family Self-Sufficiency Program coordinates an array of services from which the particular needs of the participating family can be met. It provides a guide to the participation family to obtain the needed services and an advocate in attaining the services. Areas of concern for most families are:

HOUSING – obtaining decent, affordable housing enables participants to devote their energies to such things as training and education.

CHILD CARE – an essential component in becoming self-sufficient is to know that your children will be properly cared for while you are in training or at work

SKILLS TRAINING – learning what job skills are needed in the community in the present as well as the future.

COUNSELING – helping participants gain control of their lives.

EDUCATION – basic and advanced education works hand-in-hand with skills training.

JOB DEVELOPMENT – learning to write resumes, following leads, obtaining interviews and putting your best foot forward to obtain the job.

In addition to the service plan, the Authority will establish an escrow account for each participating family. This, in essence, is a saving account which increases as the income of the family increases. Upon the successful completion of the program, the family receives the full amount in this account. It may be used as a down payment for the purchase of a home, to purchase an automobile, so that reliable transportation is available or for any purpose which will enable the self-sufficiency of the family.

EMPLOYMENT

The person designated in the Contract of Participation as the head of household for the participating family shall be required under the Contract of Participation to seek and maintain suitable employment during the term of the contract. Suitable employment shall be determinate based on the participants' skill, education, and available job opportunities within the City of Franklin and the surrounding area. If the head of household of the participating family refuses to seek suitable employment, the Contract of Participation shall be terminated.

COUNSELING

The Franklin Redevelopment and Housing Authority may during the term of the contract, provide counseling or cause counseling to be made available to participating families with respect to affordable rental and homeownership opportunities in the private housing market and to select housing from a full range of neighborhoods and money management counseling.

FRANKLIN REDEVELOPMENT
AND
HOUSING AUTHORITY

FAMILY SELF-SUFFICIENCY ACTION PLAN

Updated May 20, 1994

GENERAL

The Franklin Redevelopment and Housing Authority will administer a Family Self-Sufficiency Program for very-low income families. This program will serve families without regard to family size, characteristics, race or ethnicity.

As approved by the U. S. Department of Housing and Urban Development, the program will be carried out in conjunction with the Public Housing Program and Rental Voucher Program. The designation of unit type and number is as follows:

BEDROOM SIZE	NUMBER OF UNITS
1	6
2	7
3	5

Operation of this program will begin within twelve (12) months of notification of application approval, this means that outreach, participation, selection and enrollment must have begun. The Franklin Redevelopment and Housing Authority was notified of approval on September 27, 1993.

The Franklin Redevelopment and Housing Authority plans to enroll eighteen (18) Section 8 Certificate/Voucher participants or Public Housing residents into the Family Self-Sufficiency Program by September 27, 1994. Outreach activities will begin in May 1994 to develop knowledge of area resources and to establish the connection with other agencies and organizations which will help from the Program Coordinating Committee. Outreach to eligible families will begin in June 1994.

Selection of participants will begin in July 1994 and will continue until all available slots have been filled. Selection will be an ongoing activity as FSS participants complete the program and replacements are sought. It is expected that the original eighteen (18) participants will complete their contracts after varying lengths of time depending upon the types of resources that are needed. The majority will most likely use the entire five (5) years duration of the contract to complete their training and service plans to achieve their goals.

IDENTIFICATION OF NEED - DELIVERY OF SERVICES

The overall goal and objective of the Franklin Redevelopment and Housing Authority's Family Self-Sufficiency Program is to enable very low-income families to become economically independent. To obtain this goal, the Authority will seek to mobilize and coordinate a comprehensive array of existing services to meet the particular needs of each individual family. Research has shown that the inability to coordinate existing services has kept very low-income families dependent and unable to break the cycle of poverty.

No one system has enough resources to provide all of the necessary skills.

The Authority will seek to create awareness in our City of the problems faced by very low-income families and to demonstrate our capacity to assist these families through the efficient and innovative use of existing public and private resources.

Participation in this program will be voluntary and families will be selected according to the criteria set forth in the Section of the Action Plan entitled “Selection of Families...” Selected participants will be interviewed by Housing Authority Staff to ascertain the following:

1. Current family situation
2. Education and Training history
3. Economic and Career goals
4. Potential barriers to prevent attaining desired goals

Housing Authority Staff will compile a profile of each selected participant to present to the Coordinating Committee. The Coordinating Committee consists of individuals from the public and private sector who are knowledgeable of available resources. The Committee and Staff will develop a Contract of Participation based on the needs and goals of the participant. The Contract of Participation will address issues such as child care, transportation, education and job skills development. The Contract will be signed by the participant and Authority Staff.

Authority staff will work with the participating family to develop an individual case plan. The plan will be designed to help assist participants with meeting their five (5) year goals.

This will include but not be limited to assistance in completing applications, transportation to appointments and acting as an advocate for the participant with agencies for services, etc. Participants will receive support as long as they remain in the program and work toward the goals as stated in the Contract of Participation. The incentive for participation is the ultimate goal of self-sufficiency and the Family Escrow Account. The Family Escrow Account is a saving account for the family which is credited with a portion of the rent paid that would otherwise result from increase in earned income during the term of the Contract of Participation.

Based on the characteristics of current participants in the Public Housing and Section 8 programs the make up of the Family Self-Sufficiency Program participants will be as follows:

30% White 70% Black (non-Hispanic)

Predominantly female head of households

Average family size of three (3) persons

65% of the head of household will be unemployed when they enroll in the program

38.5% of the head of household are Elderly, Handicapped and/or Disabled (E/H/D)

Based on the characteristics of current residents in the public housing program the make up of the Family Self-Sufficiency Program participants will be as follows:

100 % Black (non-Hispanic)

Predominantly female head of households

Average family size of four (4) persons

70% of the head of household will be unemployed when they enroll in program

31% of the head of household are Elderly, Handicapped and/or Disabled (E/H/D)

Each participating family will have unique needs; however, it is expected that due to the problems associated with poverty, a basic set of services will be in demand. The major service needs of the participants are employment training, transportation, childcare, education, job search assistance and self-improvement classes. Other anticipated needs are family counseling, health care, budgeting assistance and parenting classes.

NUMBER OF ELIGIBLE FAMILIES

The Franklin Redevelopment and Housing Authority seeks to ensure families will be selected to participate in the Family Self-Sufficiency Program without regard to race, color, religion, sex, disability, familial status or national origin. All participants of the Section 8 program and public housing residents are eligible.

All eligible families will be given an equal opportunity to participate. Outreach materials and methods will comply with all applicable Fair Housing and Equal Opportunity requirements.

Participation in the Family Self-Sufficiency Program is voluntary and families will be selected according to the criteria set forth in the section of the Action Plan entitled "Selection of Families..." It is expected that the group of participants will be fairly representative of the body of eligible participants. Based on available resources, the Authority anticipates that eighteen (18) of all eligible families will complete the selection process within the first year of the program operation

SELECTION OF FAMILIES TO PARTICIPATE IN THE FAMILY SELF-SUFFICIENCY PROGRAM

The Franklin Redevelopment and Housing Authority currently administer two-hundred nine (209) units of Public Housing and three-hundred and fifteen (315) Section 8 Vouchers. Families to be selected for participation in the Family Self-Sufficiency Program will be selected as follows.

1. All current public housing residents and voucher participants will be mailed a notice explaining the Family Self-Sufficiency Program and its benefits. Included in this notice will be a form to return to the Authority if the family is interested in participating in the program. A time limit of ten (10) days will be stated and all responses must be received within that time to be considered for participation. All responses will be placed on a list ranked on a first come first served basis. Section 8 participants and public housing residents who do not wish to participate in the Family Self-Sufficiency Program shall not lose their housing assistance because of this decision. All families expressing an interest in the program will be invited to attend an information session
2. If there is insufficient response and all slots cannot be filled, applicants on the waiting list for both the Section 8 and Public Housing Program will be targeted for outreach. Upon signing a lease or Section 8 contract with the Housing Authority all new program participants will be invited to attend an information session about the FSS Program
3. If slots are still available after contact with applicants on the waiting list, the Authority will advertise in a newspaper of general circulation in order to solicit families interested in participation in the Family Self-Sufficiency Program. Program participants who have previously declined to enroll in FSS will receive an application upon request of any time as long as slots are available

Regardless of category, participants will be selected without regard to race, color, sex, handicap, familial status or national origin.

SUPPORT SERVICES

EDUCATION

The Coordinating Committee recognized that education and training is a critical element to enable individuals to become economically independent. Sources of supplementary education and training will be:

- a. G. E. D. assistance and skills training programs provided by the Franklin City School System
- b. Vocational Training Programs are available at Paul D. Camp Community College
- c. Education and training services may be obtained by some participants through the Job Opportunities and Training Program (JOBS) administered by the Department of Social Services

Participants will be encouraged to pursue grants, scholarships, stipend or any other available resource to pay for their training and education.

TRANSPORTATION

Since there is no public transportation in the City of Franklin other means must be sought.

- a. Program staff will emphasize and help coordinate the use of car pools.
- b. For participants in the JOBS program, the Department of Social Services may be a source of funds for transportation.

CHILD CARE

Parents with no extended family or other reliable place to leave their children are often unable to take advantage of programs. The Coordinating Committee will direct participants to seek child care services as follows

1 - If the participant receives Temporary Assistance for Needed Families (TANF) or is also participating in the JOBS programs, the Department of Social Services may have funds for child care.

2 - The City of Franklin Parks and Recreation Department may be able to provide child care services through various programs such as after school and summer activities,

3- The S. T. O. P may provide child care services via the Headstart Program

COUNSELING AND PERSONAL DEVELOPMENT

Parenthood and poverty together can be a major cause of emotional distress. This distress can result in the low self-esteem, depression, mental illness and alcohol or drug abuse. For participants with these problems the following will be provided:

1. Youth and family counseling to offer parenting programs and referrals to other programs in the area for drug abuse, alcoholism, etc.
2. Education on budgeting, various types of banking services to help the participant establish financial goals
3. Family and individual counseling

HOUSING

The Franklin Redevelopment and Housing Authority will provide decent, affordable housing to all participants. This may be achieved by use of both the Public Housing Program and Section 8 Program administered by the Authority

EMPLOYMENT

Once the participant has received education and training their objective will be to seek employment to become economically independent. Therefore, services must be offered to help the participant develop proper interview skills, resume writing and business etiquette.

CONTRACT OF PARTICIPATE

GENERAL

The Contract of Participation is an agreement between the Franklin Redevelopment and Housing Authority and a participating family that set forth the provisions of the Family Self-Sufficiency Program and specifies the resources and appropriate supportive services to be made available to and the responsibly and obligations of a participating family. The contract shall be in a form prescribed by HUD.

OBLIGATIONS

The contract shall provide that each participating family will be required to fulfill those obligations to which the participating family has committed itself under the Contract of Participation no later than five (5) years after entering into the contract.

EXTENSION

The Franklin Redevelopment and Housing Authority shall, in writing, extend the term of the contract for no more that two (2) years for any participating family that, in writing requests an extension. Good cause must exist to grant an extension. Good cause shall mean circumstances beyond the control of the participating family such as serious illness or involuntary loss of employment. Extension of the contract will entitle the family to continue to have good credit applied to their account during this period.

EMPLOYMENT

The person designated in the Contract of Participation as the head of household for the participating family shall be required under the Contract of Participation to seek and maintain suitable employment during the term of the contract. Suitable employment shall be determined based on the participants' skills, education and available job opportunities with the City of Franklin and the surrounding area. If the head of household of the participating family refuses to seek suitable employment, the Contract of Participation shall be terminated.

COUNSELING

The Family Redevelopment and Housing Authority may during the term of the contract, provide counseling or cause counseling to be made available to participating families with respect to affordable rental and homeownership opportunities in the private housing market and how to select housing from a full range of neighborhoods and money management counseling.

FAMILY SELF-SUFFICIENCY ESCROW ACCOUNT

ESTABLISHMENT OF ACCOUNT

The Franklin Redevelopment and Housing Authority shall establish a Family Self-Sufficiency Escrow Account for each family participating in the Family Self-Sufficiency Program. During the term of the Contract of Participation, credit will be applied to the account in accordance with paragraph (B).

AMOUNT OF ESCROW ACCOUNT

In computing the escrow account credit under this section, the term Family Contribution means:

- 1.) For Public Housing and Section 8 Rental Certificate Program; Total Tenant Payment) as defined in accordance with part 813, 905 or 913).
- 2.) For the Section 8 Rental Voucher Program: 30% of adjusted monthly income
- 3.) For participants who are very low-income families, the escrow account credit shall be the lesser of
 - a. 30% of current monthly adjusted income less the Family Contribution obtained by disregarding any increase in earned income since the execution of the Contract of Participation , or
 - b. current Family Contribution less the Family Contribution at the time of the execution of the Contract of Participation.
 - c. for participants who are low-income families but not very low-income families, the escrow account credit shall be one-half of the amounts determined pursuant to paragraph 3b.
 - d. participants who are not low-income families shall not be entitle to any escrow account credit.

INVESTMENT OF FUNDS

Funds held by the Housing Authority in the escrow accounts of families participating in the program shall be invested in HUD-approved investments. Investments income shall be credited, periodically, but no less than annually to each participant's account.

DISPOSITION OF ESCROW ACCOUNTS WITHDRAWAL

The amount of a participating family's escrow account, in excess of any amount owed the Housing Authority, may be paid to the head of the family. The amount shall not be paid until:

- a. A determination is made that the participating family has met its obligation under the Contract of Participation.
- b. The head of family certifies that, to the best of his or her knowledge and belief, members of the participating family no longer receive any Federal, State, Local welfare assistance.

If the head of the participating family cease to reside with other participating family members in the assisted unit, the remaining members of the family, after consultation with the Housing Authority, shall have the right to designate another family member to receive the fund in accordance with the above.

If the Authority determines that the FSS family has fulfilled certain interim goals established in the Contract of Participation and needs a portion of the FSS account funds for purpose consistent with the Contract of Participation, such as completion of higher education, the Housing Authority may disperse a portion of the funds from the family's FSS account to assist the family to meet these expenses.

FORFEITURE

Amounts in the escrow account shall be forfeited:

- 1.) If a participating family has failed to meet its obligations under the Contract of Participation, including moving outside of the Housing Authority's jurisdiction.
- 2.) The participating family is no longer under a Contract of Participation, and is still receiving Federal, State, Local welfare assistance at the time of the expiration of the Contract, including any extension thereof.

Escrow account funds forfeited by a Public Housing or Section 8 participant will be treated as program receipts for such program and shall be used in accordance with HUD requirements governing the use of program receipts.

TRANSITIONAL ASSISTANCE

The Franklin Redevelopment and Housing Authority may continue to offer a former participating family that is employed and that has completed its contract, appropriate supportive services that may assist the family in remaining self-sufficient.

MODIFICATION

The Parties to the Contract of Participation may mutually agree to make changes to the contract, on terms acceptable to the parties, including change, related to the number and identity of participating family members and the supportive services to be provided to the participating family, provided the changes are consistent with the objectives of the Family Self-Sufficiency Program.

TERMINATION

A participating family may be terminated from the FSS prior to the expiration of the term of its Contract of Participation for any of the following reasons:

- mutual consent of the parties;
- failure of a participating family to honor the terms of the contract;
- withdrawal of the family from the FSS;
- such other act as it deemed inconsistent with the purpose of the FSS; and
- operation of law.

If any member of the participating family does not meet his or her responsibilities under the Contract of Participation; the Housing Authority has the option to

- (1) stop support services for the family
- (2) terminate the family's participation in the FSS; or
- (3) if the family is participating in the Section 8 assistance, when allowed by HUD regulations

GRIEVANCE PROCEDURE

Participating families may request an informal hearing of the Authority to consider whether a decision to terminate is in accordance with the law, HUD regulations and applicable Authority policies. The Authority will follow the Grievance Procedure as established in its' Administrative Plan in order to resolve any disputes involving participation in the Family Self-Sufficiency Program.

EVALUATION

An evaluation of the Family Self-Sufficiency Program will be completed by the FSS Coordinator. This evaluation will be submitted to HUD in the form of an annual report. This report will at a minimum address the following issues:

- a description of the activities carried out under the program;
- a description of the effectiveness of the program in assisting families to achieve economic independence and self sufficiency;
- a description of the effectiveness of the program in coordinating resources of the community;
- legislative and/or administrative recommendations by the Program Coordinating Committee that would help to improve the FSS and increase effectiveness;
- a breakdown of data concerning families who –
 - declined participation
 - elected to participate but did not sign a Contract of Participation
 - executed a Contract but voluntarily left the program
 - executed a Contract but completed the program
 - executed a Contract and their status in FSS.

CERTIFICATION

The development of the services and activities of the Franklin Redevelopment and Housing Authority's Family Self-Sufficiency Program is being coordinated with the local JOBS Program, Southeastern Virginia Job Training Program Assistance (JTPA) and all other relevant employment, childcare, transportation and education programs. Implementation of the FSS will continue to be coordinated with local, state and federal programs.

Application for Federal Assistance SF-424

Version 02

*1. Type of Submission:

- Preapplication
- Application
- Changed/Corrected Application

*2. Type of Application

- New
- Continuation
- Revision

* If Revision, select appropriate letter(s)

*Other (Specify)

3. Date Received:

08/31/2006

4. Applicant Identifier:

5a. Federal Entity Identifier:

*5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*a. Legal Name:

*b. Employer/Taxpayer Identification Number (EIN/TIN):

*c. Organizational DUNS:

d. Address:

*Street 1: 601 CAMPBELL AVE

Street 2: _____

*City: FRANKLIN

County: _____

*State: VA

Province: _____

*Country: _____

*Zip / Postal Code 23851

e. Organizational Unit:

Department Name:

Division Name:

PUBLIC HOUSING

f. Name and contact information of person to be contacted on matters involving this application:

Prefix: _____

*First Name: FERNANDO

Middle Name: _____

*Last Name: ANIBAN

Suffix: _____

Title:

Organizational Affiliation:

*Telephone Number: 757-562-0384

Fax Number: 757-562-0267

*Email: fanaiban@frhaonline.org

Application for Federal Assistance SF-424

Version 02

***9. Type of Applicant 1: Select Applicant Type:**

L. Public/Indian Housing Authority

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

*Other (Specify)

***10 Name of Federal Agency:**

HUD

11. Catalog of Federal Domestic Assistance Number:

14-850 _____

CFDA Title:

***12 Funding Opportunity Number:**

*Title:

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

FRANKLIN VIRGINIA

***15. Descriptive Title of Applicant's Project:**

LOW RENT PUBLIC HOUSING

Application for Federal Assistance SF-424		Version 02
16. Congressional Districts Of:		
*a. Applicant: 4 TH VIRGINIA		*b. Program/Project: 4 TH VIRGINIA
17. Proposed Project:		
*a. Start Date: 01/01/2007		*b. End Date: 12/31/2007
18. Estimated Funding (\$):		
*a. Federal	_____	781,992
*b. Applicant	_____	
*c. State	_____	
*d. Local	_____	
*e. Other	_____	
*f. Program Income	_____	
*g. TOTAL	_____	781,992
*19. Is Application Subject to Review By State Under Executive Order 12372 Process?		
<input type="checkbox"/> a. This application was made available to the State under the Executive Order 12372 Process for review on _____		
<input type="checkbox"/> b. Program is subject to E.O. 12372 but has not been selected by the State for review.		
<input checked="" type="checkbox"/> c. Program is not covered by E. O. 12372		
*20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes", provide explanation.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001)		
<input type="checkbox"/> ** I AGREE		
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions		
Authorized Representative:		
Prefix: _____	*First Name: <u>SHERYL</u> _____	
Middle Name: <u>L</u> _____		
*Last Name: <u>FRAZIER</u> _____		
Suffix: _____		
*Title: EXECUTIVE DIRECTOR		
*Telephone Number: 757-562-0384		Fax Number: _____
* Email: _____		
*Signature of Authorized Representative: _____		*Date Signed: 08/13/2006

Application for Federal Assistance SF-424

Version 02

***Applicant Federal Debt Delinquency Explanation**

The following should contain an explanation if the Applicant organization is delinquent of any Federal Debt.

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form (including the continuation sheet) required for use as a cover sheet for submission of preapplications and applications and related information under discretionary programs. Some of the items are required and some are optional at the discretion of the applicant or the Federal agency (agency). Required items are identified with an asterisk on the form and are specified in the instructions below. In addition to the instructions provided below, applicants must consult agency instructions to determine specific requirements.

Item	Entry:	Item	Entry:
1.	Type of Submission: (Required): Select one type of submission in accordance with agency instructions. <ul style="list-style-type: none"> • Preapplication • Application • Changed/Corrected Application – If requested by the agency, check if this submission is to change or correct a previously submitted application. Unless requested by the agency, applicants may not use this to submit changes after the closing date. 	10.	Name Of Federal Agency: (Required) Enter the name of the Federal agency from which assistance is being requested with this application.
		11.	Catalog Of Federal Domestic Assistance Number/Title: Enter the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested, as found in the program announcement, if applicable.
2.	Type of Application: (Required) Select one type of application in accordance with agency instructions. <ul style="list-style-type: none"> • New – An application that is being submitted to an agency for the first time. • Continuation - An extension for an additional funding/budget period for a project with a projected completion date. This can include renewals. • Revision - Any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter(s). More than one may be selected. If "Other" is selected, please specify in text box provided. <ul style="list-style-type: none"> A. Increase Award B. Decrease Award C. Increase Duration D. Decrease Duration E. Other (specify) 	12.	Funding Opportunity Number/Title: (Required) Enter the Funding Opportunity Number and title of the opportunity under which assistance is requested, as found in the program announcement.
		13.	Competition Identification Number/Title: Enter the Competition Identification Number and title of the competition under which assistance is requested, if applicable.
		14.	Areas Affected By Project: List the areas or entities using the categories (e.g., cities, counties, states, etc.) specified in agency instructions. Use the continuation sheet to enter additional areas, if needed.
3.	Date Received: Leave this field blank. This date will be assigned by the Federal agency.	15.	Descriptive Title of Applicant's Project: (Required) Enter a brief descriptive title of the project. If appropriate, attach a map showing project location (e.g., construction or real property projects). For preapplications, attach a summary description of the project.
4.	Applicant Identifier: Enter the entity identifier assigned by the Federal agency, if any, or applicant's control number, if applicable.		
5a.	Federal Entity Identifier: Enter the number assigned to your organization by the Federal Agency, if any.	16.	Congressional Districts Of: (Required) 16a. Enter the applicant's Congressional District, and 16b. Enter all District(s) affected by the program or project. Enter in the format: 2 characters State Abbreviation – 3 characters District Number, e.g., CA-005 for California 5 th district, CA-012 for California 12 th district, NC-103 for North Carolina's 103 rd district. <ul style="list-style-type: none"> • If all congressional districts in a state are affected, enter "all" for the district number, e.g., MD-all for all congressional districts in Maryland. • If nationwide, i.e. all districts within all states are affected, enter US-all. • If the program/project is outside the US, enter 00-000.
5b.	Federal Award Identifier: For new applications leave blank. For a continuation or revision to an existing award, enter the previously assigned Federal award identifier number. If a changed/corrected application, enter the Federal Identifier in accordance with agency instructions.		
6.	Date Received by State: Leave this field blank. This date will be assigned by the State, if applicable.	17.	Proposed Project Start and End Dates: (Required) Enter the proposed start date and end date of the project.
7.	State Application Identifier: Leave this field blank. This identifier will be assigned by the State, if applicable.	18.	Estimated Funding: (Required) Enter the amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines, as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses.
8.	Applicant Information: Enter the following in accordance with agency instructions: <ul style="list-style-type: none"> a. Legal Name: (Required): Enter the legal name of applicant that will undertake the assistance activity. This is the name that the organization has registered with the Central Contractor Registry. Information on registering with CCR may be obtained by visiting the Grants.gov website. b. Employer/Taxpayer Number (EIN/TIN): (Required): Enter the Employer or Taxpayer Identification Number (EIN or TIN) as assigned by the Internal Revenue Service. If your organization is not in the US, enter 44-4444444. c. Organizational DUNS: (Required) Enter the organization's DUNS or DUNS+4 number received from Dun and Bradstreet. Information on obtaining a DUNS number may be obtained by visiting the Grants.gov website. d. Address: Enter the complete address as follows: Street address (Line 1 required), City (Required), County, State (Required, if country is US), Province, Country (Required), Zip/Postal Code (Required, if country is US). e. Organizational Unit: Enter the name of the primary organizational unit (and department or division, if applicable) that will undertake the 	19.	Is Application Subject to Review by State Under Executive Order 12372 Process? Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the

	<p>assistance activity, if applicable.</p> <p>f. Name and contact information of person to be contacted on matters involving this application: Enter the name (First and last name required), organizational affiliation (if affiliated with an organization other than the applicant organization), telephone number (Required), fax number, and email address (Required) of the person to contact on matters related to this application.</p>	<p>State intergovernmental review process. Select the appropriate box. If "a." is selected, enter the date the application was submitted to the State</p> <p>20. Is the Applicant Delinquent on any Federal Debt? (Required) Select the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.</p> <p>If yes, include an explanation on the continuation sheet.</p>		
9.	<p>Type of Applicant: (Required) Select up to three applicant type(s) in accordance with agency instructions.</p> <table border="0" data-bbox="198 436 862 978"> <tr> <td data-bbox="198 436 532 978"> <p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p> </td> <td data-bbox="532 436 862 978"> <p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p> </td> </tr> </table>	<p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p>	<p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p>	<p>21. Authorized Representative: (Required) To be signed and dated by the authorized representative of the applicant organization. Enter the name (First and last name required) title (Required), telephone number (Required), fax number, and email address (Required) of the person authorized to sign for the applicant.</p> <p>A copy of the governing body's authorization for you to sign this application as the official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)</p>
<p>A. State Government</p> <p>B. County Government</p> <p>C. City or Township Government</p> <p>D. Special District Government</p> <p>E. Regional Organization</p> <p>F. U.S. Territory or Possession</p> <p>G. Independent School District</p> <p>H. Public/State Controlled Institution of Higher Education</p> <p>I. Indian/Native American Tribal Government (Federally Recognized)</p> <p>J. Indian/Native American Tribal Government (Other than Federally Recognized)</p> <p>K. Indian/Native American Tribally Designated Organization</p> <p>L. Public/Indian Housing Authority</p>	<p>M. Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>N. Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education)</p> <p>O. Private Institution of Higher Education</p> <p>P. Individual</p> <p>Q. For-Profit Organization (Other than Small Business)</p> <p>R. Small Business</p> <p>S. Hispanic-serving Institution</p> <p>T. Historically Black Colleges and Universities (HBCUs)</p> <p>U. Tribally Controlled Colleges and Universities (TCCUs)</p> <p>V. Alaska Native and Native Hawaiian Serving Institutions</p> <p>W. Non-domestic (non-US) Entity</p> <p>X. Other (specify)</p>			

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

PHA Name: Franklin Redevelopment & Housing Authority	Grant Type and Number Capital Fund Program Grant No: VA36P01850105 Replacement Housing Factor Grant No:	Federal FY of Grant: 2005
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 03/31/07 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				
2	1406 Operations	\$ 38,314	38,314	38,314	38,032
3	1408 Management Improvements	38,314	38,314	38,314	38,314
4	1410 Administration	38,314	38,314	38,314	38,314
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	268,201	200,201	125,094	112,113
11	1465.1 Dwelling Equipment—Nonexpendable		30,000	30,000	30,000
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment		38,000	9,657	9,657
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 383,143	383,143	279,693	266,430
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

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

PHA Name: Franklin Redevelopment & Housing Authority		Grant Type and Number Capital Fund Program Grant No: VA36P01850105 Replacement Housing Factor Grant No:				Federal FY of Grant: 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 Work
				Original	Revised	Funds Obligated	Funds Expended	
HA wide	Security	VA 18-2	1	\$38,314	38,314	\$38,314	38,032	On going
HA wide	IT support/upgrade/training		1	38,314	38,314	38,314	38,314	Complete
HA wide	Administration			38,314	38,314	38,314	38,314	Complete
All Developments	Refrigerators & Ranges		60	0	30,000	30,000	30,000	complete
Suburban	Transformer & others	VA 18-1	1		38,000	9,657	9,657	On going
Suburban	Heating, Electrical & Sewer line design, others	VA 18-1	1	55,000	55,000	51,925	38,944	On going
Suburban	Sewer, drain lines & others	VA 18-1	1	213,201	145,201	73,169	73,169	On going

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

PHA Name: : Franklin Redevelopment & Housing Authority	Grant Type and Number Capital Fund Program No: VA36P01850105 Replacement Housing Factor No:	Federal FY of Grant: 2005
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Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA wide	6-30-07		12/31/06	6-30-08		03/31/07	
HA wide	6-30-07		03/31/07	6-30-08		03/31/07	
HA wide	6-30-07		12/31/06	6-30-08		03/31/07	
All Developments	6-30-07		12/31/06	6-30-08		12-31/06	
Suburban	6-30-07	12-31-07		6-30-08	12-31-08		Delayed relocation & insufficient fund/budget available to make it feasible to start the project
Suburban	6-30-07	12-31-07		6-30-08	12-31-08		Delayed relocation & insufficient fund/budget available to make it feasible to start the project

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

PHA Name: Franklin Redevelopment & Housing Authority	Grant Type and Number Capital Fund Program Grant No: VA36P01850106 Replacement Housing Factor Grant No:	Federal FY of Grant: 2006
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Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no:)
 Performance and Evaluation Report for Period Ending: 03/31/07 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				
2	1406 Operations	\$ 34,999		34,999	2,808
3	1408 Management Improvements	34,999		25,922	25,922
4	1410 Administration	34,999		34,999	13,879
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	183,035		0	0
11	1465.1 Dwelling Equipment—Nonexpendable	17,990		1,857	1,857
12	1470 Nondwelling Structures	43,900		35,001	0
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 349,922		132,778	44,466
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs	\$70,000			
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 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

PHA Name: Franklin Redevelopment & Housing Authority		Grant Type and Number Capital Fund Program Grant No: VA36P01850106 Replacement Housing Factor Grant No:				Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
HA wide	Security	VA 18-2	1	\$70,000		\$70,000	2,808	
HA wide	IT support/upgrade/training	VA 18-2	1	34,999		20,490	25,922	
Berkley Court	Sewer & drain lines	VA 18-2	1	183,035		0	0	
Berkley Court	Refrigerators & Ranges	VA 18-2	60	17,920		1,857	1,857	
HA wide	Administration			34,999		34,999	13,879	
Admin. Building	Floor Carpeting	VA 18-2	1	8,969		0	0	

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

PHA Name: : Franklin Redevelopment & Housing Authority		Grant Type and Number Capital Fund Program No: VA36P01850106 Replacement Housing Factor No:					Federal FY of Grant: 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA wide / Admin	6-30-08			6-30-09			
Berkley Court	6-30-08			6-30-09			

