

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

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# PHA Plans

Annual Plan for Fiscal Year 2008

Prepared for:

**SHELBYVILLE HOUSING AUTHORITY**  
**316 Templeton Street**  
**P.O. Box 560**  
**Shelbyville, TN 37162**

**TN039v01**

Prepared by:

**GREAT RIVER PLANNING AND DEVELOPMENT, INC.**  
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**Burns, Tennessee 37029**

**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: Shelbyville Housing Authority**

**PHA Number: TN039**

**PHA Fiscal Year Beginning: (10/2008)**

**PHA Programs Administered:**

☐ **Public Housing and Section 8**    ☐ **Section 8 Only**    ☒ **Public Housing Only**  
Number of public housing units:                      Number of S8 units:                      Number of public housing units: **412**  
Number of S8 units:

☐ **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

**Display Locations For PHA Plans and Supporting Documents**

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

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

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

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

**ANNUAL PLAN**  
**PHA FISCAL YEAR 2008**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

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

**B. Goals**

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

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

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

- ☐ Demolish or dispose of obsolete public housing:
- ☐ Provide replacement public housing:
- ☐ Provide replacement vouchers:
- ☐ Other: (list below)

- ☐ PHA Goal: Increase assisted housing choices

Objectives:

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

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

- ☒ PHA Goal: Provide an improved living environment

Objectives:

- ☒ Implement measures to de-concentrate poverty by bringing higher income public housing households into lower income developments:
- ☒ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
- ☒ Implement public housing security improvements:
- ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- ☐ Other: (list below)

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

- ☒ PHA Goal: Promote self-sufficiency and asset development of assisted households

Objectives:

- ☒ Increase the number and percentage of employed persons in assisted families:
- ☒ Provide or attract supportive services to improve assistance recipients' employability:

- ☐ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

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

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - ☐ Other: (list below)

**Other PHA Goals and Objectives: (list below)**

**Annual PHA Plan**  
**PHA Fiscal Year 2008**  
[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.



**Standard Plan**



**Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

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

The Shelbyville Housing Authority (SHA) has completed this Agency Plan in consultation with both our residents, and the local community. The public is provided with an opportunity to review the plan and offer comments at a public hearing to be held on June 24, 2008. The Annual Agency Plan is summarized as follows:

1. Housing Needs

Our current waiting list holds 113 applicants. Our greatest demand is for 1-bedroom units with 42% of our applicants on that list. 36% of our applicants are waiting for a 2-bedroom apartment, 15% are on the 3-bedroom list and 5% are waiting for a 4-bedroom apartment. The SHA does not have any current plans to expand it's public housing stock.

2. Financial Resources

SHA expects to expend approximately \$3,331,072 in FY 2008 for Operations, Capital Improvements and Administrative Costs.

3. Eligibility, Selection and Admission Policies

The ACOP, Lease and all related policies comply with the requirements of the Quality Housing and Work Responsibility Act (QHWRA). Policies address de-concentration and income mixing, thereby encouraging higher income families in the developments. Although the SHA has provided incentives for higher income families, the majority of our applicants are from the extremely low income levels. All policies are reviewed on a regular basis.

4. Rent Determination/Discretionary Policies

The Authority's Minimum Rent is established at \$50.

5. Operations and Management  
The SHA administers the HUD Conventional Public Housing Program and all policies comply with all mandated requirements of the QHWRA. All policies are available for review by the general public.
6. Grievance Procedure  
The SHA Grievance Procedures are in compliance with the provisions of QHRWA.
7. Capital Improvements  
Our projected funding under the Capital Fund Program (CFP) is approximately \$629,767. Our primary focus under the current Annual Plan is to perform various improvements in AMP 1, AMP 2 and AMP 3.
8. Demolition and/or Disposition  
The SHA has no current plans for demolition or disposition of Authority properties.
9. Designation  
SHA's 50-unit development TN039-03 (included in AMP-2) is designated elderly.
10. Conversion of Public Housing  
SHA has no current plans to designate any developments or buildings to tenant-based assistance.
11. Homeownership  
The SHA administers a HUD approved ESS homeownership program to assist its residents in becoming homeowners.
12. Self-Sufficiency Programs  
The SHA administers a "Workforce Investment Grant" to assist our residents in obtaining their GED. The SHA also administers a "ROSS Grant" to promote self-sufficiency.
13. Safety and Crime Prevention  
Current services include allowing police officers to live in SHA housing developments, as well as activities targeted to at-risk youth, adults or seniors.
14. Ownership of Pets  
SHA has a pet policy that is in compliance with QHWRA requirements.

15. Civil Rights Certification

We have included the required certification regarding Fair Housing and Civil Rights within this plan.

16. Annual Audit

Our most recent annual audit is on file at our local HUD Field Office and is available for review at our main office during normal business hours.

17. Asset Management

It is the goal of the SHA to manage our assets (physical property, financial resources and manpower) as efficiently as possible to meet the intent of our mission statement. We will be using the new HUD Asset Management Guidelines starting in FY 2008 to help us achieve this goal.

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

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

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## Attachments

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

### Required Attachments:

- ☒ Admissions Policy for De-concentration
- ☒ FY 2008 Capital Fund Program Annual Statement tn039a01
- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
- ☒ List of Resident Advisory Board Members
- ☒ List of Resident Board Member
- ☒ Community Service Description of Implementation
- ☒ Information on Pet Policy
- ☐ Section 8 Homeownership Capacity Statement, if applicable
- ☐ Description of Homeownership Programs, if applicable

### Optional Attachments:

- ☐ PHA Management Organizational Chart
- ☒ FY 2008 Capital Fund Program 5 Year Action Plan tn039a01
- ☐ Public Housing Drug Elimination Program (PHDEP) Plan
- ☐ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
- ☒ Other (List below, providing each attachment name)
  - P&E Reports for FY2005, FY2006 & FY2007 tn039a02
  - Violence Against Women Act Policy tn039a012

## Supporting Documents Available for Review

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

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair	Annual Plan: Housing Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	
<b>X</b>	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
<b>X</b>	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>X</b>	Public Housing De-concentration and Income Mixing Documentation: 1. PHA board certifications of compliance with de-concentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required de-concentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
<b>X</b>	Public housing rent determination policies, including the methodology for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
<b>X</b>	Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
<b>X</b>	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
<b>X</b>	Public housing grievance procedures  check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
<b>X</b>	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
<b>X</b>	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
<b>X</b>	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
<b>X</b>	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
<b>X</b>	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[24 CFR Part 903.7 9 (a)]

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

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	1074	5	5	3	3	2	2
Income >30% but <=50% of AMI	681	5	5	3	3	2	2
Income >50% but <80% of AMI	897	4	5	3	3	2	1
Elderly	337	5	5	3	3	2	4
Families with Disabilities	565	5	5	3	4	3	3
Race/white	2302	5	5	3	3	2	2
Race/Minority	350	5	5	3	3	2	2
Race/Ethnicity							
Race/Ethnicity							

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

- ☒ Consolidated Plan of the Jurisdiction/s  
Indicate year 2000
- ☐ U.S. Census data: the Comprehensive Housing Affordability Strategy ("CHAS") dataset
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study  
Indicate year:
- ☒ Other sources: (list and indicate year of information)  
United States Census Data: 2000 Census

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

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

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input type="checkbox"/>	Section 8 tenant-based assistance		
<input checked="" type="checkbox"/>	Public Housing		
<input type="checkbox"/>	Combined Section 8 and Public Housing		
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)		
If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total	113		126
Extremely low income <=30% AMI	84	74.4	
Very low income (>30% but <=50% AMI)	24	21.2	
Low income (>50% but <80% AMI)	5	4.4	
Families with children	88	77.9	
Elderly families	10	8.8	
Families with Disabilities	15	13.3	
Race/white	76	67.3	
Race/minority	37	32.7	
Race/ethnicity			
Race/ethnicity			
Characteristics by Bedroom Size (Public Housing Only)			
0BR	0	0	12
1 BR	48	42.5	23
2 BR	41	36.3	36
3 BR	17	15.1	39

Housing Needs of Families on the Waiting List			
4 BR	6	5.3	14
5 BR	1	.8	2
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

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

Select all that apply

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

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

Select all that apply

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

**Need: Specific Family Types: Families at or below 30% of median****Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

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

**Need: Specific Family Types: Families at or below 50% of median****Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

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

**Need: Specific Family Types: The Elderly****Strategy 1: Target available assistance to the elderly:**

Select all that apply

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

Obtain financial resources other than Public Housing Funding.

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

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

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

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

Select if applicable

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

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

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

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

**(2) Reasons for Selecting Strategies**

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

- ☒ Funding constraints
- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing



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

## **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

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

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2008 grants)</b>		
a) Public Housing Operating Fund	1,119,786	
b) Public Housing Capital Fund	628,403	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants	246,141	
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
Replacement Housing	134,021	Housing Replacement
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
2006 CFP	189,512	
2007 CFP	402,629	
<b>3. Public Housing Dwelling Rental Income</b>	607,101	Management &
		Maintenance
<b>4. Other income</b> (list below)		
Excess Utilities	95,000	Utilities
<b>4. Non-federal sources</b> (list below)		
Investments/Reserves	722,409	Unexpected Needs
Interest & Other Income	107,697	Unexpected Needs
Tenn. Dept. of Labor	42,500	GED/Workforce
<b>Total resources</b>	4,295,199	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

#### **A. Public Housing**

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

##### **(1) Eligibility**

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

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

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

- ☒ Criminal or Drug -related activity  
☒ Rental history  
☒ Housekeeping  
☒ Other (describe)  
 Violent Behavior  
 Rape/Sex Offender  
 Record Of Serious Disturbances

Alcohol Related Criminal Activity  
False Information & Refusal To Complete Required Forms

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

**(2)Waiting List Organization**

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

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

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

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

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

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

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists?

3. ☐ Yes ☐ No: May families be on more than one list simultaneously  
If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- ☐ PHA main administrative office  
☐ All PHA development management offices  
☐ Management offices at developments with site-based waiting lists  
☐ At the development to which they would like to apply

☐ Other (list below)

**(3) Assignment**

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- ☐ One  
☒ Two  
☐ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

**(4) Admissions Preferences**

a. Income targeting:

☒ Yes ☐ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

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

c. Preferences

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

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

Former Federal preferences:

☒ Involuntary Displacement (Disaster, Government Action, Action of Housing

- ☐ Owner, Inaccessibility, Property Disposition)
- ☒ Victims of domestic violence
- ☒ Substandard housing
- ☒ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
  - ☐ Veterans and veterans' families
  - ☐ Residents who live and/or work in the jurisdiction
  - ☐ Those enrolled currently in educational, training, or upward mobility programs
  - ☐ Households that contribute to meeting income goals (broad range of incomes)
  - ☐ Households that contribute to meeting income requirements (targeting)
  - ☐ Those previously enrolled in educational, training, or upward mobility programs
  - ☐ Victims of reprisals or hate crimes
  - ☒ Other preference(s) (list below)
- Elderly/disabled for elderly units & developments over other applicants.  
Allow Police Officers to reside in Public Housing Developments.

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

Date and Time

Former Federal preferences:

- 1      Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- 1      Victims of domestic violence
- 2      Substandard housing
- 1      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)  
Elderly/disabled for elderly units over other applicants.  
All other applicants

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) De-concentration and Income Mixing**

a. ☒ Yes ☐ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote de-concentration 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 de-concentration 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 de-concentration 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 de-concentration 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 de-concentration 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:  
TN039 001 Parkway Apartments
- 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:  
TN039 005 South Maple Apartments  
TN039 008 East Side Multi-Family

## B. Section 8

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

**(1) Eligibility**

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

**(2) Waiting List Organization**

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- ☐ None
- ☐ Federal public housing
- ☐ Federal moderate rehabilitation
- ☐ Federal project-based certificate program
- ☐ Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- ☐ PHA main administrative office
- ☐ Other (list below)



### **(3) Search Time**

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

If yes, state circumstances below:

### **(4) Admissions Preferences**

- a. Income targeting

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

- b. Preferences

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

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

Former Federal preferences

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

Other preferences (select all that apply)

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

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

Date and Time

Former Federal preferences

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

Other preferences (select all that apply)

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

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

- ☐ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

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

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

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

- ☐ The PHA applies preferences within income tiers

- ☐ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

**(5) Special Purpose Section 8 Assistance Programs**

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

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

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

- ☐ Through published notices  
☐ Other (list below)

**4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

**A. Public Housing**

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

**(1) Income Based Rent Policies**

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

a. Use of discretionary policies: (select one)

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

---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  
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families  
☐ Other (describe below)

e. Ceiling rents

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

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

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

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

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

- ☒ Market comparability study  
☐ Fair market rents (FMR)  
☐ 95<sup>th</sup> 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)  
Income Decrease

- 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**

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

### **(1) Payment Standards**

Describe the voucher payment standards and policies.

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

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

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

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

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

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area

- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

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

- ☐ Annually
- ☐ Other (list below)

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

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

## **(2) Minimum Rent**

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

- ☐ \$0
- ☐ \$1-\$25
- ☐ \$26-\$50

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

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

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

### **A. PHA Management Structure**

Describe the PHA's management structure and organization.

(select one)

- ☐ An organization chart showing the PHA's management structure and organization is attached.
- ☒ A brief description of the management structure and organization of the PHA follows:

1. Board of Commissioners-Consists of five members, including a resident.
2. Resident Advisory Board-Consists of four members.
3. Executive Director

Director of Operations – Plus Assistant

Director of Resident Services-Plus (1) Staff Member

Office Manager-Plus (3) Staff Members

Maintenance Manager-Plus (8) Staff Members

Lead Carpenter-Plus (3) Staff Members

## 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	412	126
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers (list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs(list individually)		

## C. Management and Maintenance Policies

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

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

1. Dwelling Lease
2. Admissions & Continued Occupancy Policy (ACOP)
3. Grievance Policy
4. Tenant Transfer Policy
5. Tenant Charges for Abuse
6. Tenant Utility Allowances
7. Pet Policy



8. Unit/Building/Site Housing Quality Standards Materials
9. Maintenance Plan
10. Disposition Policy
11. Procurement Policy
12. Personnel Policy and Job Descriptions
13. Travel Policy
14. Operating Budget
15. Capital Fund Budget
16. Public Housing Agency Plans (5-Year and Annual)
17. Public Housing Assessment System Certification & Score
18. HUD Regulations, Notices and Circular Letters
19. Annual Contributions Contract (ACC) & Amendments with HUD
20. Non-profit Corporation Act and Charter
21. Shelbyville Housing Authority By-Laws
22. Cooperation Agreement Between Shelbyville Housing Authority & City of Shelbyville.
23. Violence Against Women Act Policy.

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

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

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

### **A. Public Housing**

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

If yes, list additions to federal requirements below:

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

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

## **B. Section 8 Tenant-Based Assistance**

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

If yes, list additions to federal requirements below:

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

- ☐ PHA main administrative office  
☐ Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

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

### **A. Capital Fund Activities**

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

#### **(1) Capital Fund Program Annual Statement**

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

Select one:

- ☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) tn039a01 (Capital Fund Program)

-OR-

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

#### **(2) Optional 5-Year Action Plan**

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

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

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name tn039a01 CFP Five Year Action Plan)

-or-

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

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

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

☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)  
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

- ☐ Revitalization Plan under development
- ☐ Revitalization Plan submitted, pending approval
- ☐ Revitalization Plan approved
- ☐ Activities pursuant to an approved Revitalization Plan underway

☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name/s below:

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?  
If yes, list developments or activities below:

- ☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?  
If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

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

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

### 2. Activity Description

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

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

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

[24 CFR Part 903.7 9 (i)]

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

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

2. Activity Description

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

Designation of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
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.

<b>Conversion of Public Housing Activity Description</b>	
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: _____)

- ☐ Requirements no longer applicable: vacancy rates are less than 10 percent
- ☐ Requirements no longer applicable: site now has less than 300 units
- ☐ Other: (describe below)

**B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

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

**11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

**A. Public Housing**

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

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

2. Activity Description

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

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name: 1b. Development (project) number:	
2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA's Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application	
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected: 6. Coverage of action: (select one) <input 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 part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

### 2. Program Description:

#### a. Size of Program

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

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

- ☐ 25 or fewer participants  
☐ 26 - 50 participants  
☐ 51 to 100 participants



☐ more than 100 participants

b. PHA established eligibility criteria

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

## **12. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (1)]

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

### **A. PHA Coordination with the Welfare (TANF) Agency**

1. Cooperative agreements:

☒ Yes ☐ No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? Verbal

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

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

### **B. Services and programs offered to residents and participants**

#### **(1) General**

a. Self-Sufficiency Policies

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

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

b. Economic and Social self-sufficiency programs

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

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
<i>Workforce Investment Grant (GED)</i>	<i>30</i>	<i>Waiting List</i>	<i>PHA Main Office</i>	<i>PH</i>
Family Self Sufficiency (ROSS)	167	Waiting List	PHA Main Office	PH

**(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: DD/MM/YY)
Public Housing		
Section 8		

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

**C. Welfare Benefit Reductions**

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

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

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

Attachment tn039a04

**13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

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

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

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

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

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

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

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

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

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

- ☐ Contracting with outside and/or resident organizations for the provision of crime-and/or drug-prevention activities
- ☐ Crime Prevention Through Environmental Design
- ☒ Activities targeted to at-risk youth, adults, or seniors
- ☐ Volunteer Resident Patrol/Block Watchers Program
- ☒ Other (describe below)  
Allowing Police Officers To Live In Public Housing.  
Planning to open Police Precinct in AMP 2.

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

### C. Coordination between PHA and the police

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

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

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

### 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)]

See Attachment tn039a05

## **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? 1
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:
- The RAB met on May 1, 2008 at 11:00 a.m. and reviewed the preliminary draft of the 2008 Plan. There were several questions by the residents but they were in agreement with the plan as presented. The RAB would like speed bumps installed in most of the developments but since the City owns the streets they are going to meet with the City of Shelbyville to request the installation.
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.) Resident Commissioner Appointed by Mayor

#### 3. Description of Resident Election Process

- a. Nomination of candidates for place on the ballot: (select all that apply)
- ☐ Candidates were nominated by resident and assisted family organizations
- ☐ Candidates could be nominated by any adult recipient of PHA assistance
- ☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot
- ☐ Other: (describe)
- b. Eligible candidates: (select one)

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

c. Eligible voters: (select all that apply)

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

### **C. Statement of Consistency with the Consolidated Plan**

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

1. Consolidated Plan jurisdiction: (provide name here)
  
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)
    - Preserve existing affordable housing stock.
    - Promote economic self-sufficiency/welfare to work.
    - Promote crime prevention, security and safety.
    - Insure equal housing and employment opportunities.
    - Provide housing for special needs persons.
    - Promote and conserve energy resources.
  - ☐ 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.

#### **Definition of “Substantial Deviation” and/or “Significant Amendment or Modification”**

The Shelbyville Housing Authority will consider a “Substantial Deviation” to be a change in the Mission, Goals, and Objectives of the PHA Plans that is duly determined by the Board of Commissioners and the Resident Advisory Board to be a deviation from the latest approved PHA Plans. If the Board of Commissioners and the Resident Advisory Board consider the change(s) in the Mission, Goals and Objectives to be substantial, in their determination, the Plans will be submitted to HUD for review and approval.

In addition, if there is a change in funding of greater than 20 percent of the Operating Budget and/or the Capital Fund amount, this will be considered an amendment/modification to the Plans, except for emergencies that are beyond the control of the PHA. If the item/activity is included in the 5-year Capital Improvement Program, it will not be considered a significant change although the cost may exceed the 20 percent threshold; therefore, not requiring HUD review and approval.

## **Attachments**

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

### **DECONCENTRATION POLICY:**

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

1. At the beginning of each PHA fiscal year, the PHA will establish a goal for housing 40% of its new admissions with families whose incomes are at or below the area median income. The annual goal will be calculated by taking 40% of the total number of move-ins from the previous PHA fiscal year.

To accomplish the goals of:

Housing not less than 40% of its public housing inventory on an annual basis with families that have incomes at or below 30% of area median income;and

Not housing families with incomes that exceed 30% of the area median income in developments that have 60% or more of the total household living in the development with incomes that exceed 30% of the area median income, in accordance with the incentives reflected in Section II,6, Resident Selection, of the PHA's ACOP.

## **COMMUNITY SERVICE POLICY – Attachment tn039a04**

### **PHA OBLIGATIONS**

1. The Housing Authority reviews and evaluates all individuals that are 18 years of age to determine if they are to perform the required Community Service activities on a monthly basis.
2. The PHA reviews family compliance with service requirements and verifies compliance annually at least thirty days before the end of the twelve month lease term. The PHA also obtains third party verification of family compliance. Documentation of service requirement performance or exemption is maintained in the participant files.
3. The Housing Authority provides the resident with an approved list of activities that will meet the intent of the Law and Regulations.
4. The Housing Authority reviews and monitors the resident's activities to determine compliance with the 8 hour requirement.
5. Residents that are required to perform the Community Service are notified by the Housing Authority of their responsibility.
6. The PHA complies with non-discrimination and equal opportunity requirements.

### **RESIDENT OBLIGATIONS**

1. The resident may submit a Community Service activity to the Housing Authority for approval within 15 days after the resident is notified that Community Service must be performed.
2. The resident may also provide evidence that he/she is working or is in an Educational/training program at least 8 hours per month in order that Community Service would not be required.
3. The resident may also perform a combination of work, educational/training and Community Service of 8 hours per month to comply with the requirements of the Law.

(A list of eligible Community Service activities is posted in the SHA Office)

**PET POLICY:**    (SHA Agency Plan)

The Shelbyville Housing Authority has implemented the Pet Policy adopted by the Board of Commissioners and discussion with the Resident Advisory Board with the following requirements contained therein:

- (a)    Definition of Pets permitted in developments.
- (b)    Maximum number of pets (1)
- (c)    Requirements of neutering, spaying, proof of immunizations, and restrictions of vicious animals.
- (d)    Responsibilities and control of pets by residents and other requirements of ownership of a pet within the developments.
- (e)    Charges for damages.
- (f)    Leash requirements.
- (g)    PHA's responsibilities

Each family is required to sign a copy of the pet policy stating they have read and understand the policy and agree to abide by the provisions.

## **RESIDENT SERVICES AND SATISFACTION FOLLOW-UP PLAN**

### **Attachment tn039a07**

In fiscal year 2007, the HUD Real Estate Assessment Center (REAC) conducted a Resident Services and Satisfaction Survey of the residents of the Shelbyville Housing Authority, TN039. The SHA scored 9.1 on a scale of 10 which is a total grade of 91%. As a result of the Survey of the residents, the Housing Authority prepared a Resident Satisfaction Survey Follow-up Plan for two (2) of the five (5) Factors reflected in the Survey.

The two Sections/Factors that the Housing Authority received the lowest scores were Communications and Neighborhood Appearance. All other Sections/Factors were above the 75 percent threshold.

The following is the SHA Resident Satisfaction Follow-up Plan:

#### **COMMUNICATION**

SHA will make sure that all Residents of the Shelbyville Housing Authority will be informed with any changes that involve the residents. Also, the Housing Manager will attend Resident Meetings to keep Residents informed of any changes and also to answer any questions the Residents may have regarding any aspect of housing. Also, the community center is planning on having an Open House for all residents.

#### **NEIGHBORHOOD APPEARANCE**

We will add some shrubbery to areas where needed, and we will make certain that residents keep their yards clean. We will also continue giving Beautification Awards.

**Mission and Goal Progress:**

The PHA recently received a score of 9.1 on the Resident Services and Satisfaction Survey conducted in fiscal 2007. Customer satisfaction continues to improve over the survey that was conducted in fiscal year 2006 and customer satisfaction will continue to be a major priority with the SHA Management and we will work for further improvements during the coming year.

Efforts to improve management functions are included in the amendments to the ACOP and Lease.

De-concentration is being accomplished by implementation of ACOP revisions and admissions criteria.

Increasing the percentage and number of employed persons in the developments continues to improve with the preference for working families included in the revised ACOP.

Based on the PHA's waiting list the goals to ensure equal opportunity in Housing for all Americans are being met.

The PHA recently was awarded the High Performer designation by HUD REAC.

**Resident Advisory Board Members:**

**Patricia Overcast  
352 Courtland Drive  
Shelbyville, TN 37160**

**Kathy Hunt  
332 Lane Parkway  
Shelbyville, TN 37160**

**Clara Viola  
219 Lentz Street  
Shelbyville, TN 37160**

**Josie Johnson  
322 Courtland Drive  
Shelbyville, TN 37160**

**John Patterson  
332 Lane Parkway  
Shelbyville, TN 37160**

**Resident Member/Board of Commissioners**

**The following resident was appointed to the Board of Commissioners of the Shelbyville Housing Authority by the Mayor of Shelbyville 06/14/2007.**

**Kimberley Tankersley**

**Term: 06/27/2007 – 10/30/2010**



**Conversion**

**Component 10 (B) Voluntary Conversion Initial Assessments**

- b. How many of the PHA's developments are subject to the Required Initial Assessments? (7)
- c. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? (None)
- d. How many Assessments were conducted for the PHA's covered developments? (7)
- e. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: (None)

## **Attachment tn039a012**

### **SHELBYVILLE HOUSING AUTHORITY**

#### **Violence Against Women Act (VAWA)**

##### **PHA Policy**

#### **BACKGROUND**

The Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA) provides protection for residents and family members of residents who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on such acts of violence against them.

In general, the law provides, in part, that criminal activity directly relating to domestic violence, dating violence or stalking, engaged in by a member of a resident's household, or any guest or other persons under the resident's control, shall not be cause for termination of assistance, tenancy or occupancy rights of the resident or immediate family member if the resident's family is the victim or threatened victim of the abuse.

The law provides that an incident or incidents of actual or threatened domestic violence, dating violence or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence, and will not be "good cause" for termination of assistance, tenancy, or occupancy rights of a victim of such violence.

Furthermore, the law allows a PHA to "bifurcate" a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a resident or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a resident or lawful occupant.

The VAWA also allows PHAs to request an individual to certify that the individual is a victim of abuse and that the incidences of abuse are bona fide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification within 14 business days after the individual receives a request for such a certification from the PHA.

#### **DEFINITIONS**

The following definitions were incorporated into the United States Housing Act and apply to this policy:

**Domestic Violence:** Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with, or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

**Dating Violence:** Violence committed by a person:

☐ who is or has been in a social relationship of a romantic or intimate nature with the victim; and

☐ where the existence of such a relationship shall be determined based on a consideration of the following factors: 1) the length of the relationship; 2) the type of relationship, and 3) the frequency of interaction between the persons involved in the relationship.

**Stalking:** To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to 1) that person; 2) a member of the immediate family of that person, or 3) the spouse or intimate partner of that person.

**Immediate Family Member:** A spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

## **POLICY**

The following policy amends the *Admissions and Occupancy Policy (ACOP)* and the Dwelling Lease by reference. Appropriate language will be added to the ACOP and Dwelling Lease at the next revision dates of each.

A copy of this policy is available at the main office of the housing authority. A copy will be made available on request.

### **Admissions and Occupancy and Termination of Assistance**

Being a victim of domestic violence, dating violence, or stalking, will not be considered by the Shelbyville Housing Authority (SHA) to be a basis for denial of assistance, or admission to public housing if the applicant otherwise qualifies for assistance or admission.

Incidents or threats of abuse will not be construed by the SHA as serious or repeated violations of the lease or other "good cause" for termination of the assistance, tenancy, or occupancy rights of a victim of abuse.

Criminal activity directly relating to abuse, engaged in by a member of a resident's household or any guest or other person under the resident's control, shall not be cause for termination of assistance, tenancy or occupancy rights if the resident or an immediate family member of the resident's family is the victim or threatened victim of the abuse.

## **Rights of the Shelbyville Housing Authority**

The SHA may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights or terminate assistance to any individual who is a resident or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a resident or lawful occupant, and such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by federal, state and local law for the termination of leases, or assistance under HUD's Public Housing Program.

## **Certification of Abuse and Confidentiality**

The SHA will require that an individual certify that he/she is a victim of abuse and that the incidences of abuse are bonafide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification to the SHA within 14 business days after the individual receives a request from the SHA. The individual may utilize the attached *Form HUD 50066, Certification of Domestic Violence, Dating Violence, or Stalking* to certify the abuse to the SHA.

In lieu of Form HUD 50066, the individual may provide the HHA with documentation signed by an employee, agent, volunteer of a victim service provider, an attorney, or a medical professional from whom the victim has sought assistance in addressing domestic violence, dating violence, or stalking, or the affects of the abuse, in which the professional attests (under penalty of perjury (28 U.S.C. 1746) to the professionals belief that the incident or incidents in question are bonafide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation. In cases where the individual does not submit the required certification, the HHA may terminate assistance.

## **Notification to Residents**

The SHA will provide notice to all residents and applicants of their rights under Section 6 of the United States Housing Act of 1937 as amended by the Violence Against Women Act of 2005. These rights include the residents' right to confidentiality and the limits thereof, the availability of Form HUD 50066, and that the resident may not be evicted solely on the basis that they are a victim of domestic violence. A sample notice is included with this policy.

## **Confidentiality**

All information provided to the SHA relating to the incident(s) of domestic violence, including the fact that the individual is a victim of domestic violence, dating violence, or stalking will be retained in confidence by the SHA and will not be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is (a) requested or consented by the individual in writing; (b) required for use in an eviction proceeding or termination of assistance; or, (c) otherwise required by applicable law.

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950108</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2008</b>
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☒ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )  
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations	125,953			
3	1408 Management Improvements	0			
4	1410 Administration	62,976			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	10,000			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	7,636			
10	1460 Dwelling Structures	395,838			
11	1465.1 Dwelling Equipment—Nonexpendable	25,000			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	0			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	1,000			
18	1499 Development Activities	0			
19	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 628,403</b>			
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of Line 21 Related to Security – Hard Costs	0			
26	Amount of line 21 Related to Energy Conservation Measures	<b>\$ 236,838</b>			

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

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950108</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>FY 2008</b>	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

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

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950108</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2008</b>		
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	
All Amps	Operations	1406	LS	125,953				
All Amps	Administrative	1410	LS	62,976				
All Amps	Professional	1430	LS	10,000				
All Amps	Misc. Site Work (Drainage, Lighting, Walks, Landscaping etc)	1450	LS	7,636				
All Amps	Ranges/Refrigerators	1475	56 Ea	25,000				
All Amps	Window Treatments	1465	LS	15,000				
All Amps	Relocation	1495	LS	1,000				
All Amps	Interior Patch & Paint	1460	60 DU	60,000				
Amp 1 (Proj 1)	Roofs & Accys. (110 units...56 Bldgs)	1460	56 Bldgs	84,000				
Amp 3 (Proj 5)	Windows	1460	46 DU	67,280				
Amp 3 (Proj 5)	Central HVAC	1460	32 DU	96,000				

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950108</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2008</b>
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☒ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )  
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

Amp 3 (Proj 7)	Windows	1460	66 DU	73,558				
	<b>Total Program</b>			\$ 628,403				

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program No: <b>TN43P03950108</b> Replacement Housing Factor No:	Federal FY of Grant: <b>FY 2008</b>
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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	

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

[illegible]

# Capital Fund Program Five-Year Action Plan

## Part I: Summary



PHA Name Shelbyville Housing Authority				<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: 2009 PHA FY: 2009	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 2010	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 2011	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 2012
	Annual Statement				
ALL AMPs		332,311	285,811	296,052	376,052
AMP-01					
AMP-02				37,351	153,000
AMP-03		296,092	342,592		
AMP-04				295,000	99,351
CFP Funds Listed for 5-year planning		\$ 628,403	\$ 628,403	\$ 628,403	\$ 628,403
Replacement Housing Factor Funds		26,986	26,986		

Capital Fund Program Five-Year Action Plan

**Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year : __2__ FFY Grant: 2009 PHA FY: 2009			Activities for Year: __3__ FFY Grant: 2010 PHA FY: 2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
<b>See</b>						
<b>Annual</b>	All AMPs	Operations	125,953	All AMPs	Operations	125,953
<b>Statement</b>	All AMPs	Administrative	62,972	All AMPs	Administrative	62,972
	All AMPs	Professional	8,500	All AMPs	Professional	9,000
	All AMPs	<b>Site Work:</b> (Drainage, Lighting, Walks, etc). <b>Major Component:</b> Accessible Walks in AMPs 1 & 3	20,886	All AMPs	Misc. Site Work (Drainage, Lighting, Walks, Landscaping etc)	7,636
	All AMPs	Int. Painting/Patching	89,000	All AMPs	Maint. Vehicles (3)	53,500
	All AMPs	Ranges/Refrigerators	25,000	All AMPs	Ranges/Refrigerators	26,750
	AMP-03 (Dev 05)	Central HVAC (Phase II)	82,750	AMP-03 (Dev 05)	Parking Lot/Entrance	90,000
	AMP-03 (Dev 05)	Water Heaters	11,500	AMP-03 (Dev 05)	Replace Dumpster Pads	26,750
	AMP-03 (Dev 05)	Install Water Meters	35,500	AMP-03 (Dev 07)	Roofs & Accessories	143,092
	AMP-03 (Dev 05)	Curb Appeal (Shutters)	22,250	AMP-03 (Dev 07)	Water Heaters	17,750
	AMP-03 (Dev 05)	Gutters/Downspouts	15,000	AMP-03 (Dev 07)	Curb Appeal	9,000
	AMP-03 (Dev 05)	Make Cable-Ready	9,000	AMP-03 (Dev 07)	Renovate Comm. Bldg.	43,000
	AMP-03 (Dev 05)	Re-Design 12 0-Br. DU	120,092	AMP-03 (Dev 07)	Make Cable-Ready	13,000
Total CFP Estimated Cost			\$ 628,403			\$ 628,403

# Capital Fund Program Five-Year Action Plan

## Part II: Supporting Pages—Work Activities

Activities for Year : __4__ FFY Grant: 2011 PHA FY: 2011			Activities for Year: __5__ FFY Grant: 2012 PHA FY: 2012		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
All AMPs	Operations	125,944	All AMPs	Operations	125,944
All AMPs	Administrative	62,972	All AMPs	Administrative	62,972
All AMPs	Professional	20,000	All AMPs	Professional	10,000
All AMPs	Maint. Tools & Equip. (Tractor w/Cutter, Zero Turn Mower & Trailer	42,136	All AMPs	Misc. Site Work (Drainage, Lighting, Walks, Landscaping etc)	8,636
All AMPs	Interior Paint	45,000	All AMPs	Computer Hardware	16,000
AMP-02 (Dev-04)	Sewer Laterals (46)	37,351	All AMPs	Phones/Office Machines	5,000
AMP-04 (Dev 08)	Replace Doors (44 DU)	150,000	All AMPs	Misc. HVAC	15,000
AMP-04 (Dev 08)	Rep. Flooring (44 DU)	100,000	All AMPs	Misc. Electrical Renov.	12,500
AMP-04 (Dev 08)	Paint (44 DU)	45,000	All AMPs	Misc. Flooring	5,000
			All AMPs	Misc. Doors/Hdwr.	8,000
			All AMPs	Painting	60,000
			All AMPs	Vehicles	35,000
			All AMPs	Siding	12,000
			AMP 02 (Dev-03)	Roofs & Accessories	84,000
			AMP 02 (Dev-04)	Roofs & Accessories	69,000
			AMP 04	Roofs & Accessories	99,351
Total CFP Estimated Cost		\$ 628,403			\$ 628,403

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950107</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2007</b>
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☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 03/31/08 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0		
2	1406 Operations	125,953	125,953.00	125,953.00	125,953.00
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	60,500	60,500.00	60,500.00	30,250.09
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	9,000	9,000.00	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	9,000	9,000.00	0	0
10	1460 Dwelling Structures	367,278	347,314.00	17,165.00	17,165.05
11	1465.1 Dwelling Equipment—Nonexpendable	21,500	21,500.00	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	35,500	55,500.00	23,520.00	23,520.00
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	1,000	0	0	0
18	1499 Development Activities	0	0	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 629,767</b>	<b>\$ 629,767</b>	<b>\$ 227,138.00</b>	<b>\$196,888.14</b>
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	13,500.00	13,500.00	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

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

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950107</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>FY 2007</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:   ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

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

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950107</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2007</b>		
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	
All Amps	Operations	1406	LS	125,953	125,953.00	125,953.00	125,953.00	Complete
All Amps	Administrative	1410	LS	60,500	60,500.00	60,500.00	30,250.09	In Process
All Amps	Professional	1430	LS	9,000	9,000.00	0	0	Planning
All Amps	Misc. Site Work (Drainage, Lighting, Walks, Landscaping etc)	1450	LS	9,000	9,000.00	0	0	Planning
All Amps	Vehicles (3 Maintenance)	1475	3	35,500	55,500.00	23,520.00	23,520.00	In Process
All Amps	Ranges/Refrigerators	1465	50	21,500	21,500.00	0	0	Planning
All Amps	Window Treatments	1460	LS	20,036	20,036.00	0	0	Planning
All Amps	Relocation	1495	LS	1,000	1,000.00	0	0	Planning
All Amps	Painting & Patching	1460	LS	47,000	47,000.00	17,165.00	17,165.05	In Process
AMP-02	Clean Roofs	1460	56 DU	4,500	4,500.00	0	0	Planning
AMP-02	Renovate for 1 H/C Unit	1460	56 DU	13,500	13,500.00	0	0	Planning
AMP-02	Curb Appeal (Shutters Posts, etc)	1460	56 DU	19,500	19,500.00	0	0	Planning
AMP-03	Central HVAC (66 DU)	1460	66 DU	216,528	196,528.00	0	0	Planning
AMP-03	Roofs & Accessories (30)	1460	30 DU	46,250	46,250.00	0	0	Planning

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

<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN43P03950107</b> Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>FY 2007</b>
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<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/ Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no: )
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/08		<input type="checkbox"/> Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

	Total Program			\$ 629,767	\$ 629,767.00	\$ 227,138.00	\$ 196,888.14	

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program No: <b>TN43P03950107</b> Replacement Housing Factor No:	Federal FY of Grant: <b>FY 2007</b>
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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	
ALL AMPs	05/04/2009			05/04/2011			
AMP-01	05/04/2009			05/04/2011			

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

[illegible]

<p><b>Annual Statement/Performance and Evaluation Report</b></p> <p><b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I:</b></p> <p><b>Summary</b></p>
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<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN43P03950106</b> Replacement Housing Factor Grant No:	<b>Federal FY of Grant:</b> <b>FY 2006</b>
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<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:   ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations	122,330.00	122,330.00	122,330.00	122,330.00
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	58,561.00	58,561.00	58,561.00	58,561.00
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	8,900.00	8,900.00	4,000.00	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	25,636.00	25,636.00	7,565.00	7,565.00
10	1460 Dwelling Structures	311,945.00	274,395.00	269,977.00	204,939.00
11	1465.1 Dwelling Equipment—Nonexpendable	53,40.00	53,400.00	53,400.00	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	48,950.00	86,500.00	86,500.00	54,216.00
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	0	0	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 629,722.00</b>	<b>\$ 629,722.00</b>	<b>\$ 602,333.00</b>	<b>\$ 447,611.00</b>
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

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



# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950106</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2006</b>
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☐ Original Annual Statement
 ☐ Reserve for Disasters/ Emergencies
 ☐ Revised Annual Statement (revision no: )
 ☒ Performance and Evaluation Report for Period Ending: 03/31/2008
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950106</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2006</b>		
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	
All AMPs	Operating Funds	1406	LS	122,330.00	122,330.00	122,330.00	122,330.00	Complete
All AMPs	Administration	1410	LS	58,561.00	58,561.00	58,561.00	58,561.00	In Process
All AMPs	Fees & Costs	1430	LS	8,900.00	8,900.00	4,000.00	0	Planning
All AMPs	Ranges & Refrigerators	1465	LS	53,400.00	53,400.00	53,400.00	0	Planning
All AMPs	Vehicles (4 Maintenance)	1475	LS	48,950.00	86,500.00	86,500.00	54,216.00	In Process
All AMPs	Site Improvements: Landscaping, Walks, Parking, Lighting, Signs, etc.	1450	LS	25,636.00	25,636.00	7,565.00	7,565.00	In Process
All AMPs	Patching/Painting	1460	1 DU	0	30,000.00	30,000.00	0	
TN039-01	Renovate for 1 H/C Dwelling Unit	1460	1 DU	13,350.00	6,432.00	6,432.00	6,432.03	In Process
TN039-01	Replace Furnaces	1460	LS	53,400.00	0	0	0	Delayed
TN039-01	Replace Windows	1460	LS	106,800.00	180,000.00	180,000.00	155,821.00	In Process
TN039-01	Water Heaters	1460	LS	29,370.00	17,913.00	13,495.00	13,495.00	In Process
TN039-01	Bath Improvements (Showers, Exhaust Fans, etc.)	1460	LS	46,725.00	0	0	0	Delayed
TN039-01	Curb Appeal (Shutters, Decorative Posts, etc.)	1460	LS	40,050.00	40,050.00	40,050.00	29,191.00	In Process
TN039-01	Make Cable Ready	1460	LS	22,250.00	0	0	0	Delayed

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950106</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2006</b>
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☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 03/31/2008 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
	Total Program		\$ 629,722.00	\$ 629,722.00	\$ 602,333.00

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program No: <b>TN43P03950106</b> Replacement Housing Factor No:	Federal FY of Grant: <b>FY 2006</b>
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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	
PHA-WIDE	07/18/2008			07/17/2010			
TN039-01	07/18/2008			07/17/2010			

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

[illegible]

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950105</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>FY 2005</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950105</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2005</b>
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☐ Original Annual Statement
 ☐ Reserve for Disasters/ Emergencies
 ☒ Revised Annual Statement (revision no: 3)
 ☒ Performance and Evaluation Report for Period Ending: 03/31/2008
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
2	1406 Operations	125,713.00	125,713.00	125,713.00	125,713.00
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	63,242.00	63,242.00	63,242.00	63,242.00
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	10,000.00	9,794.00	9,794.00	9,793.75
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	15,000.00	14,295.00	14,295.00	14,294.77
10	1460 Dwelling Structures	435,000.00	446,701.00	446,701.00	404,510.56
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	2,500.00	1,643.00	1,643.00	1,643.15
13	1475 Nondwelling Equipment	25,867.00	23,046.00	23,046.00	23,046.00
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	10,000.00	2,888.00	2,888.00	2,777.36
18	1499 Development Activities	0	0	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 687,322.00</b>	<b>\$ 687,322.00</b>	<b>\$ 687,322.00</b>	<b>\$ 645,020.59</b>
	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	26,715.00	36,460.00	36,460.00	36,460.00
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	50,840.00	173,975.00	173,975.00	112,258.57

## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950105</b> Replacement Housing Factor Grant No:		Federal FY of Grant: <b>FY 2005</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

## Annual Statement/Performance and Evaluation Report

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

#### Part II: Supporting Pages

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950105</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2005</b>		
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	
PHA Wide	Operating Funds	1406	LS	125,713.00	125,713.00	125,713.00	125,713.00	Complete
PHA Wide	Administration	1410	LS	63,242.00	63,242.00	63,242.00	63,242.00	Complete
PHA Wide	Fees & Costs	1430	LS	10,000.00	9,794.00	9,794.00	9,793.75	Complete
PHA Wide	Site Improvements: Landscaping, Walks, Parking, Lighting, Signs, etc.	1450	LS	15,000.00	14,295.00	14,295.00	14,294.77	Complete
PHA Wide	Ranges & Refrigerators	1475	32 Each	25,867.00	23,046.00	23,046.00	23,046.00	Complete
PHA Wide	Relocation	1495.1	LS	10,000.00	2,888.00	2,888.00	2,777.36	Complete
TN039-02	Kitchen Imp.: Cabinets, Vent Hoods, Plumbing, Electrical, etc.	1460	LS	52,000.00	52,000.00	52,000.00	52,000.00	Complete
TN039-02	Bath Imp.: Fixtures, Showers, Plumbing, Exhaust Fans, Electrical, etc.	1460	LS	27,000.00	27,000.00	27,000.00	27,000.00	Complete
TN039-02	DU Imp.: Flooring, Painting, etc	1460	LS	66,702.55	66,703.00	66,703.00	66,702.55	Complete
TN039-02	Water Heaters	1460	LS	12,000.00	12,000.00	12,000.00	12,000.00	Complete
TN039-02	Make Cable Ready	1460	LS	9,200.00	9,200.00	9,200.00	9,200.00	Complete
TN039-02	Curb Appeal: Shutters, Decorative Posts, etc.	1460	LS	7,000.00	7,000.00	7,000.00	7,000.00	Complete
TN039-02	Renovate Office/Bathroom	1470	LS	0	0	0	0	Deleted
TN039-03	Install Central HVAC	1460	50 DUs	45,000.00	45,000.00	45,000.00	44,241.52	In Process
TN039-03	Replace Windows	1460	LS	55,000.00	55,000.00	55,000.00	52,483.19	In Process
TN039-03	DU Imp.: Flooring, Painting, etc	1460	LS	85,000.00	85,000.00	85,000.00	53,231.35	In Process

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: <b>TN43P03950105</b> Replacement Housing Factor Grant No:	Federal FY of Grant: <b>FY 2005</b>
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☐ Original Annual Statement
 ☐ Reserve for Disasters/ Emergencies
 ☒ Revised Annual Statement (revision no: 3)
 ☒ Performance and Evaluation Report for Period Ending: 03/31/2008
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account		Total Estimated Cost				Total Actual Cost		
			Original		Revised		Obligated		Expended
TN039-03	Replace Water Heaters		1460	LS	7,500.00	7,272.00	7,272.00	3,533.86	In Process
TN039-03	Bath Imp.: Fixtures, Showers, Plumbing, Exhaust Fans, Electrical, etc.		1460	LS	11,250.00	8,872.00	8,872.00	6,878.50	In Process
TN039-03	Make Cable Ready		1460	LS	11,250.00	19,097.00	19,097.00	19,097.26	Complete
TN039-03	Curb Appeal: Shutters, Decorative Posts, etc.		1460	LS	16,097.00	16,097.00	16,097.00	14,681.89	In Process
TN039-03	Renovate DU for H/C Accessibility		1460	2 DUs	30,000.00	36,460.00	36,460.00	36,460.44	Complete
TN039-03	Repair Storage Building		1470	LS	2,500.00	1,643.00	1,643.00	1,643.15	Complete
	Total				\$687,322.00	\$687,322.00	\$687,322.00	\$645,020.59	

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

[illegible]

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

<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03950108	<b>Federal FY of Grant:</b> <b>FY 2008</b>
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☒ **Original Annual Statement** ☐ **Reserve for Disasters/ Emergencies** ☐ **Revised Annual Statement (revision no: )**  
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations	0			
3	1408 Management Improvements	0			
4	1410 Administration	0			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	0			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	0			
11	1465.1 Dwelling Equipment—Nonexpendable	0			
12	1470 Nondwelling Structures	0			
13	1475 Nondwelling Equipment	0			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1499 Development Activities	26,986			
19	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 26,986</b>			
22	Amount of line 21 Related to LBP Activities	0			
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of Line 21 Related to Security – Hard Costs	0			
26	Amount of line 21 Related to Energy Conservation Measures	0			



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

<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03950108		<b>Federal FY of Grant:</b> <b>FY 2008</b>	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:     )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
		<b>Original</b>	<b>Revised</b>	<b>Obligated</b>	<b>Expended</b>

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

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03950108	Federal FY of Grant: <b>FY 2008</b>
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☒ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )  
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended


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

PHA Name: <b>Shelbyville Housing Authority</b>			Grant Type and Number Capital Fund Program No: Replacement Housing Factor No: TN43R03950108				Federal FY of Grant: <b>FY 2008</b>
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	
ALL AMPs	06/12/2010			06/12/2012			

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

[illegible]

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

<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03950107	<b>Federal FY of Grant:</b> <b>FY 2007</b>
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☐ Original Annual Statement 
 ☐ Reserve for Disasters/ Emergencies 
 ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 03/31/2008 
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	0	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	65,136	65,136	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 65,136</b>	<b>\$ 65,136</b>	<b>0</b>	<b>0</b>
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

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

## Annual Statement/Performance and Evaluation Report

### Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03950107		<b>Federal FY of Grant:</b> <b>FY 2007</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
		<b>Original</b>	<b>Revised</b>	<b>Obligated</b>	<b>Expended</b>

[illegible]

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: TN43R03950107	Federal FY of Grant: <b>FY 2007</b>
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☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )  
☒ Performance and Evaluation Report for Period Ending: 03/31/2008 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended


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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program No: Replacement Housing Factor No: TN43R03950107	Federal FY of Grant: <b>FY 2007</b>
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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	
ALL AMPs	03/31/2010			03/31/2010			

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

[illegible]

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

PHA Name: <b>Shelbyville Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: <b>TN43R03950106</b>	Federal FY of Grant: <b>FY 2006</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:   )		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>03/31/2008</b> <input type="checkbox"/> Final Performance and Evaluation Report		

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0	0	0	0
2	1406 Operations	0	0	0	0
3	1408 Management Improvements	0	0	0	0
4	1410 Administration	0	0	0	0
5	1411 Audit	0	0	0	0
6	1415 Liquidated Damages	0	0	0	0
7	1430 Fees and Costs	0	0	0	0
8	1440 Site Acquisition	0	0	0	0
9	1450 Site Improvement	0	0	0	0
10	1460 Dwelling Structures	0	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	0	0	0	0
12	1470 Nondwelling Structures	0	0	0	0
13	1475 Nondwelling Equipment	0	0	0	0
14	1485 Demolition	0	0	0	0
15	1490 Replacement Reserve	0	0	0	0
16	1492 Moving to Work Demonstration	0	0	0	0
17	1495.1 Relocation Costs	0	0	0	0
18	1499 Development Activities	68,885	68,885	0	0
19	1501 Collateralization or Debt Service	0	0	0	0
20	1502 Contingency	0	0	0	0
21	Amount of Annual Grant: (sum of lines 2 – 20)	<b>\$ 68,885</b>	<b>\$ 68,885</b>	<b>0</b>	<b>0</b>
22	Amount of line 21 Related to LBP Activities	0	0	0	0
23	Amount of line 21 Related to Section 504 compliance	0	0	0	0
24	Amount of line 21 Related to Security – Soft Costs	0	0	0	0
25	Amount of Line 21 Related to Security – Hard Costs	0	0	0	0
26	Amount of line 21 Related to Energy Conservation Measures	0	0	0	0

## Annual Statement/Performance and Evaluation Report

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

#### Part II: Supporting Pages

PHA Name: <b>Shelbyville Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: <b>TN43R03950106</b>			Federal FY of Grant: <b>2006</b>	
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



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

<b>PHA Name:</b> <b>Shelbyville Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: Replacement Housing Factor Grant No: <b>TN43R03950106</b>	<b>Federal FY of Grant:</b> <b>FY 2006</b>
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<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/ Emergencies	<input type="checkbox"/> Revised Annual Statement (revision no:     )
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2008 <input type="checkbox"/> Final Performance and Evaluation Report		

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended

[illegible]

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

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