

1.0	PHA Information PHA Name: <u>Murfreesboro Housing Authority</u> PHA Code: <u>TN020</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2009</u>																										
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>350</u> Number of HCV units: <u>576</u>																										
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																										
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.) Not Applicable																										
	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width:30%;">Participating PHAs</th> <th rowspan="2" style="width:5%;">PHA Code</th> <th rowspan="2" style="width:20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width:20%;">Programs Not in the Consortia</th> <th colspan="2" style="width:25%;">No. of Units in Each Program</th> </tr> <tr> <th style="width:10%;">PH</th> <th style="width:15%;">HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:					
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																			
		PH	HCV																								
PHA 1:																											
PHA 2:																											
PHA 3:																											
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update. Not Applicable. Required only in 5-Year Plan.																										
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: Not Applicable. Required only in 5-Year Plan.																										
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. Not Applicable. Required only in 5-Year Plan.																										
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <ul style="list-style-type: none"> • Financial Resources Element: the MHA Financial Statement including PHA Operating and Capital Fund, Section 8 Funds, Rental Income, Investments etc. change on an annual basis. The MHA maintains this information on file and makes it available for HUD and public review at the MHA Administration Office • Grievance Procedures: the only change to this policy is the list of grievance hearing officers. The MHA Grievance Procedure Policy, as well as the list of current officers, is available for review at the MHA Administration Offices. • Fiscal Year Audit: The MHA's most recent Audit is on file at the MHA Administration Office and is available for HUD and public review. • Violence Against Women Act (VAWA): The MHA has completed the required VAWA Policy and will be presenting it to the MHA Board of Commissioners for approval. (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Murfreesboro Housing Authority Administration Office																										
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> The MHA has been considering various options and proposed plans for Development TN020-2 Highland Heights. The 60-unit PHA Development is in need of substantial renovation. Options which have been considered are total renovation using CFP funds, total demolition, partial demolition, and disposition. The MHA will continue to assess the housing needs of the area, the current structural condition of the existing buildings, and future funding opportunities.																										
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.																										

8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p>See attached form HUD-50075.1 for FY2009 and all open CFP Grants.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p>See attached form HUD-50075.2 for 5-Year CFP.</p>
8.3	<p>Capital Fund Financing Program (CFFP).</p> <p><input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p> <p>Not Applicable.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>Not Applicable. PHA is a High Performer, therefore this component is required only in 5-Year Plan.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>Not Applicable. PHA is a High Performer, therefore this component is required only in 5-Year Plan.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>Not Applicable. PHA is a High Performer, therefore this component is required only in 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>Not Applicable. PHA is a High Performer, therefore this component is required only in 5-Year Plan.</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

ATTACHMENTS

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

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

Part I: Summary						
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2009 FFY of Grant Approval:	
<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	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds	-				
2	1406 Operations (may not exceed 20% of line 21) ³	112,760.00				
3	1408 Management Improvements	38,000.00				
4	1410 Administration (may not exceed 10% of line 21)	13,200.00				
5	1411 Audit	-				
6	1415 Liquidated Damages	-				
7	1430 Fees and Costs	15,000.00				
8	1440 Site Acquisition	-				
9	1450 Site Improvement	8,000.00				
10	1460 Dwelling Structures	194,850.00				
11	1465.1 Dwelling Equipment—Nonexpendable	142,000.00				
12	1470 Non-dwelling Structures	-				
13	1475 Non-dwelling Equipment	40,000.00				
14	1485 Demolition	-				
15	1492 Moving to Work Demonstration	-				
16	1495.1 Relocation Costs	-				
17	1499 Development Activities ⁴	-				
18a	1501 Collateralization or Debt Service paid by the PHA	-				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	-				
19	1502 Contingency (may not exceed 8% of line 20)	-				
20	Amount of Annual Grant: (sum of lines 2 – 19)	563,810.00				
21	Amount of line 20 Related to LBP Activities	-				
22	Amount of line 20 Related to Section 504 Activities	-				
23	Amount of line 20 Related to Security – Soft Costs	-				
24	Amount of Line 20 Related to Security – Hard Costs	-				
25	Amount of line 20 Related to Energy Conservation Measures	-				

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

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

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

Part I: Summary	
PHA Name: <u>Mudtreesboro Housing Authority</u>	Grant Type and Number Capital Fund Program Grant No: <u>TN43P02050109</u> Replacement Housing Factor Grant No:
	Federal FY of Grant: 2009 FFY OF Grant Approval:
Type of Grant <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	Summary by Development Account
	Total Estimated Cost Total Actual Cost ¹ Original Revised ² Obligated Expended
Signature of Executive Director	Date
<i>Satay M. Roland</i>	<i>1/15/09</i>
Signature of Public Housing Director	Date

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050109 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
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 ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406		112,760.00				
	Improve Annual Inspections	1408		-				
	Reduce Outstanding Work Orders	1408		-				
	Reduce Vacancies	1408		-				
	Tenant Accounts Receivable	1408		-				
	Unit Turnaround	1408		-				
	Resident Activities Coordinator	1408		-				
	Resident Activities Supplies	1408		4,000.00				
	Staff Training/Travel	1408		8,000.00				
	Computer Software	1408		5,000.00				
	Vista Volunteer	1408		19,000.00				
	Jobs Transportation	1408		2,000.00				
	CFP Administrative Costs	1410		13,200.00				
	A/E Services	1430		15,000.00				
	Force Account Labor	1460		-				
	Computer Hardware	1475		15,000.00				
	Maintenance Equipment	1475		25,000.00				

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

² To be completed for the Performance and Evaluation Report.

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050109 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
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 ¹	Funds Obligated ²	Funds Expended ²	
TN20-1 Franklin Heights	Site Improvement	1450		2,000.00				
TN20-2 Highland Heights	Site Improvement	1450		2,000.00				
	Kitchen Renovations	1460		11,000.00				
	Bathroom Renovations	1460		11,000.00				
	Interior Paint	1460		2,000.00				
	Replace Floor Tile	1460		6,000.00				
	Replace Interior/Exterior Doors & Hardware	1460		3,350.00				
	Electrical Renovations	1460		2,000.00				
	Window Replacement	1460		7,500.00				
	Exterior Caulking	1460		2,000.00				
	Replace Hot Water Heaters	1465.1		5,000.00				
	Replace Appliances	1465.1		5,000.00				
	HVAC	1465.1		132,000.00				
TN20-3 Oakland Ct.	Site Improvement	1450		2,000.00				
	Administrative Building Roof	1460		150,000.00				
TN20-4 Mercury Ct.	Site Improvement	1450		2,000.00				

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

² To be completed for the Performance and Evaluation Report.

Part I: Summary						
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050108 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant:2008 FFY of Grant Approval:	
<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: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds	-	-			
2	1406 Operations (may not exceed 20% of line 21) ³	113,045.00	50,000.00	0.00	0.00	
3	1408 Management Improvements	78,000.00	75,800.00	0.00	0.00	
4	1410 Administration (may not exceed 10% of line 21)	56,522.00	39,600.00	0.00	0.00	
5	1411 Audit	-	-			
6	1415 Liquidated Damages	-	-			
7	1430 Fees and Costs	15,000.00	15,000.00	0.00	0.00	
8	1440 Site Acquisition	-	-			
9	1450 Site Improvement	6,000.00	6,000.00	0.00	0.00	
10	1460 Dwelling Structures	174,500.00	325,400.00	0.00	0.00	
11	1465.1 Dwelling Equipment—Nonexpendable	30,000.00	32,000.00	0.00	0.00	
12	1470 Non-dwelling Structures	-	-			
13	1475 Non-dwelling Equipment	40,000.00	20,000.00	0.00	0.00	
14	1485 Demolition	50,743.00	10.00	0.00	0.00	
15	1492 Moving to Work Demonstration	-	-			
16	1495.1 Relocation Costs	-	-			
17	1499 Development Activities ⁴	-	-			
18a	1501 Collateralization or Debt Service paid by the PHA	-	-			
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	-	-			
19	1502 Contingency (may not exceed 8% of line 20)	-	-			
20	Amount of Annual Grant: (sum of lines 2 – 19)	563,810.00	563,810.00	0.00	0.00	
21	Amount of line 20 Related to LBP Activities	-	-			
22	Amount of line 20 Related to Section 504 Activities	-	-			
23	Amount of line 20 Related to Security – Soft Costs	-	-			
24	Amount of Line 20 Related to Security – Hard Costs	-	-			
25	Amount of line 20 Related to Energy Conservation Measures	-	-			

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations

⁴ RHF funds shall be included here

Part I: Summary					
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050108 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008 FFY OF Grant Approval:	
Type of Grant <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: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director <i>Patsy H. Roland</i>		Date <i>1/15/09</i>		Signature of Public Housing Director Date	

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050108 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
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 ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406		113,045.00	50,000.00	0.00	0.00	
	Improve Annual Inspections	1408		-	-			
	Reduce Outstanding Work Orders	1408		-	-			
	Reduce Vacancies	1408		-	-			
	Tenant Accounts Receivable	1408		-	-			
	Unit Turnaround	1408		-	-			
	Resident Activities Coordinator	1408		46,000.00	37,800.00	0.00	0.00	
	Resident Activities Supplies	1408		4,000.00	4,000.00	0.00	0.00	
	Staff Training/Travel	1408		8,000.00	8,000.00	0.00	0.00	
	Computer Software	1408		5,000.00	5,000.00	0.00	0.00	
	VISTA Volunteer	1408		13,000.00	19,000.00	0.00	0.00	
	WTW Jobs Transportation	1408		2,000.00	2,000.00	0.00	0.00	
	Capital Fund Administration Costs/Fees	1410		56,522.00	39,600.00	0.00	0.00	
	A/E Services	1430		15,000.00	15,000.00	0.00	0.00	
	Force Account Labor	1460		50,000.00	189,000.00	0.00	0.00	
	Computer Hardware	1475		15,000.00	15,000.00	0.00	0.00	
	Maintenance Equipment	1475		25,000.00	5,000.00	0.00	0.00	
TN 20-1 Franklin Heights	Site Improvements	1450		2,000.00	2,000.00	0.00	0.00	
	Kitchen Renovations			10,000.00	11,000.00	0.00	0.00	
	Bathroom Renovations	1460		10,000.00	11,000.00	0.00	0.00	
	Paint	1460		2,000.00	3,000.00	0.00	0.00	
	Floor Tile	1460		5,000.00	6,000.00	0.00	0.00	
	Interior/Exterior Doors	1460		3,000.00	4,000.00	0.00	0.00	

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050108 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
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 ¹	Funds Obligated ²	Funds Expended ²	
	Electrical Renovations	1460		2,000.00	3,000.00	0.00	0.00	
	Window Replacement	1460		7,500.00	8,500.00	0.00	0.00	
	Replace Appliances	1465.1		5,000.00	6,000.00	0.00	0.00	
	Replace Hot water Heaters	1465.1		5,000.00	6,000.00	0.00	0.00	
	Exterior Caulking	1460		2,000.00	2,000.00	0.00	0.00	
TN 20-2 Highland Heights	Demolition work	1485		50,743.00	10.00	0.00	0.00	
TN 20-3 Oakland Court	Site Improvements	1450		2,000.00	2,000.00	0.00	0.00	
	Kitchen Renovations			10,000.00	11,000.00	0.00	0.00	
	Bathroom Renovations	1460		10,000.00	11,000.00	0.00	0.00	
	Paint	1460		2,000.00	3,000.00	0.00	0.00	
	Floor Tile	1460		5,000.00	6,000.00	0.00	0.00	
	Interior/Exterior Doors	1460		3,000.00	3,000.00	0.00	0.00	
	Electrical Renovations	1460		2,000.00	2,900.00	0.00	0.00	
	Window Replacement	1460		7,500.00	7,500.00	0.00	0.00	
	Replace Appliances	1465.1		5,000.00	5,000.00	0.00	0.00	
	Replace Hot water Heaters	1465.1		5,000.00	5,000.00	0.00	0.00	
	Exterior Caulking	1460		2,000.00	2,000.00	0.00	0.00	
TN 20-4 Mercury Court	Site Improvements	1450		2,000.00	2,000.00	0.00	0.00	
	Kitchen Renovations			10,000.00	10,000.00	0.00	0.00	
	Bathroom Renovations	1460		10,000.00	10,000.00	0.00	0.00	
	Paint	1460		2,000.00	2,000.00	0.00	0.00	
	Floor Tile	1460		5,000.00	5,000.00	0.00	0.00	
	Interior/Exterior Doors	1460		3,000.00	3,000.00	0.00	0.00	
	Electrical Renovations	1460		2,000.00	2,000.00	0.00	0.00	
	Window Replacement	1460		7,500.00	7,500.00	0.00	0.00	
	Replace Appliances	1465.1		5,000.00	5,000.00	0.00	0.00	
	Replace Hot water Heaters	1465.1		5,000.00	5,000.00	0.00	0.00	
	Exterior Caulking	1460		2,000.00	2,000.00	0.00	0.00	

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

² To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Program					
PHA Name: Murfreesboro Housing Authority					Federal FY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Obligation End Date	Actual Obligation End Date	
PHA-Wide	9/30/2010		9/30/2012		
TN20-1 Franklin Heights	9/30/2010		9/30/2012		
TN20-2 Highland Heights	9/30/2010		9/30/2012		
TN20-3 Oakland Ct.	9/30/2010		9/30/2012		
TN20-4 Mercury Ct.	9/30/2010		9/30/2012		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: Summary					
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050107 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2007 FFY of Grant Approval:	
<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:		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds	-	-	-	-
2	1406 Operations (may not exceed 20% of line 21) ³	111,522.00	70,172.94	37,563.94	37,563.94
3	1408 Management Improvements	71,000.00	69,412.48	61,533.86	44,175.78
4	1410 Administration (may not exceed 10% of line 21)	51,116.00	48,999.30	47,383.30	33,543.71
5	1411 Audit	-	-	-	-
6	1415 Liquidated Damages	-	-	-	-
7	1430 Fees and Costs	5,000.00	5,000.00	831.25	831.25
8	1440 Site Acquisition	-	-	-	-
9	1450 Site Improvement	79,000.00	77,500.00	5,033.74	4,806.24
10	1460 Dwelling Structures	212,590.00	239,404.88	209,343.70	147,683.59
11	1465.1 Dwelling Equipment—Nonexpendable	-	9,236.40	3,640.40	3,640.40
12	1470 Non-dwelling Structures	-	1,500.00	-	-
13	1475 Non-dwelling Equipment	35,000.00	44,000.00	5,669.39	5,669.39
14	1485 Demolition	-	1.00	-	-
15	1492 Moving to Work Demonstration	-	-	-	-
16	1495.1 Relocation Costs	-	-	-	-
17	1499 Development Activities ⁴	-	1.00	-	-
18a	1501 Collateralization or Debt Service paid by the PHA	-	-	-	-
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	-	-	-	-
19	1502 Contingency (may not exceed 8% of line 20)	-	-	-	-
20	Amount of Annual Grant: (sum of lines 2 – 19)	565,228.00	565,228.00	370,999.58	277,914.30
21	Amount of line 20 Related to LBP Activities	-	-	-	-
22	Amount of line 20 Related to Section 504 Activities	-	-	-	-
23	Amount of line 20 Related to Security – Soft Costs	-	-	-	-
24	Amount of Line 20 Related to Security – Hard Costs	-	-	-	-
25	Amount of line 20 Related to Energy Conservation Measures	-	-	-	-

¹ To be completed for the Performance and Evaluation Report

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

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations

⁴ RHF funds shall be included here

Part I: Summary				
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050107 Replacement Housing Factor Grant No:		Federal FY of Grant: 2007 FFY OF Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director <i>Patsy H. Roland</i>		Date <i>1/13/09</i>		Signature of Public Housing Director Date

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050107 CFFP (Yes/No): No Replacement Housing Factor Grant No:				Federal FFY of Grant: 2007		
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 ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operations	1406.00		111,522.00	70,172.94	37,563.94	37,563.94	
	Improve Annual Inspections	1408.00		-	-			
	Reduce Outstanding Work Orders	1408.00		-	-			
	Reduce Vacancies	1408.00		-	-			
	Tenant Accounts Receivable	1408.00		-	-			
	Unit Turnaround	1408.00		-	-			
	Resident Activities Coordinator	1408.00		44,000.00	36,412.48	36,412.48	19,054.40	8mos.(Aug-)
	Resident Activities Supplies	1408.00		3,000.00	3,000.00	1,357.67	1,357.67	
	Staff Training/Travel	1408.00		6,000.00	6,000.00	4,763.71	4,763.71	
	Computer Software	1408.00		5,000.00	5,000.00			
	VISTA Volunteer	1408.00		13,000.00	19,000.00	19,000.00	19,000.00	
	WTW Jobs Transportation	1408.00		-	-			
	PHA Staff Salaries	1410.00		1,616.00	1,616.00			
	Modernization Coordinator	1410.00		49,500.00	47,383.30	47,383.30	33,543.71	10 mos (Jun-)
	A/E Services	1430.00		5,000.00	5,000.00	831.25	831.25	
	Force Account Labor	1460.00		204,590.00	191,754.88	191,754.88	130,094.77	8 mos.(Aug-)
	Computer Hardware	1475.00		10,000.00	10,000.00	89.85	89.85	
	Maintenance Equipment	1475.00		25,000.00	34,000.00	5,579.54	5,579.54	

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

² To be completed for the Performance and Evaluation Report.

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050107 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2007		
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 ¹	Funds Obligated ²	Funds Expended ²	
TN20-1 Franklin Heights	Site Improvement	1450		30,000.00	27,000.00	1,452.50	1,225.00	
	Bldg. Structure Lift	1460		2,000.00	7,650.00	7,650.00	7,650.00	
	Exterior Facelift	1460		-	1,500.00	1,086.00	1,086.00	
	Replace Floor Tile	1460		-	1,500.00	0.00	0.00	
	Replace Interior Doors & Hardware	1460		-	1,500.00	1,164.02	1,164.02	
	Replace Interior Electrical	1460		-	1,500.00	536.18	536.18	
	Picnic Shelter	1450		-	1,500.00	0.00	0.00	
	Maintenance Bldg. Renovation	1470		-	1,500.00	0.00	0.00	
	Replace HVAC	1465.1		-	1,500.00	499.00	499.00	
	Replace Appliances	1465.1		-	1,736.40	1,736.40	1,736.40	
	Interior Paint	1460		-	4,500.00	4,090.84	4,090.84	
	Replace Window Screens	1460		-	1,500.00	0.00	0.00	
	Kitchen Renovations	1460		-	1,500.00	0.00	0.00	
TN20-2 Highland Heights	Site Improvement	1450		25,000.00	25,000.00	0.00	0.00	
	Bldg. Structure Lift	1460		2,000.00	-	0.00	0.00	
	Demolition	1485		-	1.00	0.00	0.00	From 2006
	Development Activities	1499		-	1.00	0.00	0.00	From 2006
TN20-3 Oakland Ct.	Site Improvement	1450		12,000.00	12,000.00	3,515.44	3,515.44	
	Bldg. Structure Lift	1460		2,000.00	2,000.00	0.00	0.00	
	Exterior Facelift	1460		-	1,500.00	0.00	0.00	
	Replace Interior Doors & Hardware	1460		-	1,500.00	0.00	0.00	
	Replace Interior Electrical	1460		-	1,500.00	61.78	61.78	
	Interior Paint	1460		-	1,500.00	1,500.00	1,500.00	

Part II Supporting Pages								
PHA Name: Murfreesboro Housing Authority		Grant Type and Number Capital Fund Program Grant No: TN43P02050107 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2007		
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 ¹	Funds Obligated ²	Funds Expended ²	
	Replace Appliances	1465.1		-	1,500.00	0.00	0.00	
	Repair Kitchen Sink Drains	1460		-	1,500.00	0.00	0.00	
	Kitchen Renovations	1460		-	1,500.00	0.00	0.00	
	Replace HVAC	1465.1		-	1,500.00	1,405.00	1,405.00	
	Replace Floor Tile	1460		-	1,500.00	0.00	0.00	
TN20-4 Mercury Ct.	Site Improvement	1450		12,000.00	12,000.00	65.80	65.80	
	Bldg. Structure Lift	1460		2,000.00	2,000.00	0.00	0.00	
	Exterior Facelift	1460		-	1,500.00	0.00	0.00	
	Replace Interior Doors & Hardware	1460		-	1,500.00	0.00	0.00	
	Replace Interior Electrical	1460		-	1,500.00	0.00	0.00	
	Interior Paint	1460		-	1,500.00	1,500.00	1,500.00	
	Repair Exterior Storage Units	1460		-	1,500.00	0.00	0.00	
	Replace Appliances	1465.1		-	1,500.00	0.00	0.00	
	Repair Kitchen Sink Drains	1460		-	1,500.00	0.00	0.00	
	Kitchen Renovations	1460		-	1,500.00	0.00	0.00	
	Replace HVAC	1465.1		-	1,500.00	0.00	0.00	
	Replace Floor Tile	1460		-	1,500.00	0.00	0.00	

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

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Program					
PHA Name: Murfreesboro Housing Authority					Federal FY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Obligation End Date	Actual Obligation End Date	
PHA-Wide	9/30/2009		9/30/2011		
TN20-1 Franklin Heights	9/30/2009		9/30/2011		
TN20-2 Highland Heights	9/30/2009		9/30/2011		
TN20-3 Oakland Ct.	9/30/2009		9/30/2011		
TN20-4 Mercury Ct.	9/30/2009		9/30/2011		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program – Five Year Action Plan

U.S. Department of Housing and Urban Development
OFFICE OF PUBLIC AND INDIAN HOUSING

Expires 4/30/2011

PART I: SUMMARY						
PHA Name/Number Murfreesboro Housing Authority / TN020		Locality (City/County & State) Murfreesboro / Rutherford Co., Tennessee			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
B.	Physical Improvements Subtotal	Annual Statement	375,507.00	448,582.00	448,000.00	506,000.00
C.	Management Improvements		188,303.00	115,228.00	115,810.00	47,810.00
D.	PHA-Wide Non-dwelling Structures and Equipment					10,000.00
E.	ADMINISTRATION					
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service		NA	NA	NA	NA
K.	Total CFP Funds		563,810.00	563,810.00	563,810.00	563,810.00
L.	Total Non-CFP Funds		0.00	0.00	0.00	0.00
M.	Grand Total		563,810.00	563,810.00	563,810.00	563,810.00

PART I: SUMMARY (CONTINUATION)

PHA Name/Number Murfreesboro Housing Authority / TN020		Locality (City/county & State) Murfreesboro / Rutherford Co., Tennessee		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:		
A.	Development Number and Name	Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2010	Work Statement for Year 3 FFY 2011	Work Statement for Year 4 FFY 2012	Work Statement for Year 5 FFY 2013
		Annual Statement				
	PHA-Wide		188,303.00	115,228.00	115,810.00	338,810.00
	TN020-001		152,500.00	100,582.00	200,000.00	75,000.00
	TN020-002		219,007.00	-	16,000.00	50,000.00
	TN020-003		2,000.00	174,000.00	116,000.00	50,000.00
	TN020-004		2,000.00	174,000.00	116,000.00	50,000.00

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

Work Statement for Year 1 FFY 2009	Work Statement for Year 2012 FFY 2012			Work Statement for Year: 2013 FFY 2013		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
SEE						
ANNUAL						
Statement						
	TN020-001	Exterior Bldg. Facelift	200,000.00	HA-Wide	Site Improvement	35,000.00
				HA-Wide	Interior Paint	10,000.00
				HA-Wide	Storm Doors	25,000.00
				HA-Wide	Appliances	30,000.00
	TN020-002	Replace Hot Water Heaters	16,000.00	HA-Wide	Bathroom Renovations	30,000.00
		Exterior Bldg. Facelift		HA-Wide	Kitchen Renovations	30,000.00
				HA-Wide	Replace HVAC	30,000.00
	TN020-003	Exterior Bldg. Facelift	116,000.00	HA-Wide	Floor Tile	15,000.00
				HA-Wide	Building Exterior Improvements	25,000.00
				HA-Wide	Electrical/Lighting Fixtures	15,000.00
	TN020-004	Exterior Bldg. Facelift	116,000.00	HA-Wide	Plumbing Improvements	15,000.00
				HA-Wide	Roofing	15,000.00
				HA-Wide	Non-Dwelling Equipment	10,000.00
				HA-Wide	Interior/Exterior Doors	5,000.00
				HA-Wide	Relocation	1,000.00
				TN020-001	Gas Pipeline Replacement	75,000.00
				TN020-002	Gas Pipeline Replacement	50,000.00
				TN020-003	Gas Pipeline Replacement	50,000.00
				TN020-004	Gas Pipeline Replacement	50,000.00
	Subtotal of Estimated Cost		\$448,000.00	Subtotal of Estimated Cost		\$516,000.00

