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| <b>PHA 5-Year and Annual Plan 2010</b><br><b>TN044v01 – Final</b> | <b>U.S. Department of Housing and Urban Development</b><br><b>Office of Public and Indian Housing</b> | <b>OMB No. 2577-0226</b><br><b>Expires 4/30/2011</b> |
|---|---|--|

| 1.0 | <b>PHA Information</b><br>PHA Name: <u>Sparta Housing Authority</u> PHA Code: <u>TN044</u><br>PHA Type: <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8)<br>PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>   |          |                                      |                               |  |    |     |  |  |  |  |  |  |
|-----|--|----------|--------------------------------------|-------------------------------|--|----|-----|--|--|--|--|--|--|
| 2.0 | <b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above)<br>Number of PH units: <u>162</u> Number of HCV units: <u>NA</u>  |          |                                      |                               |  |    |     |  |  |  |  |  |  |
| 3.0 | <b>Submission Type</b><br><input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only   |          |                                      |                               |  |    |     |  |  |  |  |  |  |
| 4.0 | <b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)<br><b>Not Applicable</b>   |          |                                      |                               |  |    |     |  |  |  |  |  |  |
|     | Participating PHAs <b>Not Applicable</b>   | PHA Code | Program(s) Included in the Consortia | Programs Not in the Consortia | No. of Units in Each Program<br><table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table> | PH | HCV |  |  |  |  |  |  |
| PH  | HCV  |          |                                      |                               |  |    |     |  |  |  |  |  |  |
|     |  |          |                                      |                               |  |    |     |  |  |  |  |  |  |
|     |  |          |                                      |                               |  |    |     |  |  |  |  |  |  |
|     |  |          |                                      |                               |  |    |     |  |  |  |  |  |  |
| 5.0 | <b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.   |          |                                      |                               |  |    |     |  |  |  |  |  |  |
| 5.1 | <b>Mission.</b> 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: <ul style="list-style-type: none"> <li>• <b>To promote safe, decent, and sanitary housing opportunities for eligible low-income, very low-income and extremely low-income families of the City of Sparta, City of Spencer, White County and Van Buren County.</b></li> <li>• <b>To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.</b></li> <li>• <b>Contribute to the well-being of the residents, families and community we serve.</b></li> <li>• <b>Our major focus is to serve our existing residents, but we also have an obligation to attempt to meet the housing needs of all eligible citizens.</b></li> </ul> |          |                                      |                               |  |    |     |  |  |  |  |  |  |

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.

**FY 2010-2014 GOALS AND OBJECTIVES-**

**GOAL: Expand the supply of assisted housing.**

- **OBJECTIVE: Reduce public housing vacancies.**
- **OBJECTIVE: Assist in the implementation of an Elderly Section 202 Program through a separate non-profit entity.**

**GOAL: Improve the quality of assisted housing.**

- **OBJECTIVE: Increase customer satisfaction by training PHA employees in their areas of work so as to provide better information and efforts in the delivery of their services to the tenants.**
- **OBJECTIVE: Renovate or modernize public housing units to provide better housing, promote energy conservation, and reduce future maintenance repair costs**
- **OBJECTIVE: Encourage residents to participate in the planning, development, and implementation of the Authority's activities. This includes encouraging residents to attend all Resident Council Meetings and special meetings.**
- **OBJECTIVE: Maximize outside resources to impact on the needs of the residents by: 1) Acting as a catalyst for coordinated community action, 2) Promoting and supporting resident-initiated community improvement efforts, and 3) Taking a leadership role in coordinating the planning and delivery of services to residents.**
- **OBJECTIVE: Search for innovative and effective ways of accomplishing the mission of the Agency.**
- **OBJECTIVE: Improve the Authority's maintenance procedures; building adequate maintenance work space to continue to improve the quality of housing stock.**

**GOAL: Provide an improved living environment.**

- **OBJECTIVE: Promote crime prevention, security, and safety through a partnership with local law enforcement agencies.**
- **OBJECTIVE: Encourage residents to report crimes when seen immediately to the office or to local law enforcement.**

**GOAL: Promote self-sufficiency and asset development of assisted households.**

- **OBJECTIVE: Promote economic self-sufficiency through welfare-to-work, training, and job development, and encouraging employment opportunities while residing at the Authority.**

**GOAL: Ensure equal opportunity and affirmatively further fair housing.**

- **OBJECTIVE: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability.**
- **OBJECTIVE: 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.**
- **OBJECTIVE: Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required.**

**PROGRESS IN MEETING FY 2005-2009 GOALS AND OBJECTIVES-**

- **OBJECTIVE: Improve PHA PHAS score to High Performer Status. PROGRESS: Achieved High Performer status in 2006, 2007 & 2008.**
- **OBJECTIVE: Reduce public housing vacancies. PROGRESS: Achieved and maintained 98% occupancy rate since 2005.**
- **OBJECTIVE: Acquire or build units or developments. PROGRESS: Applied for Section 2002 funding in 2008 and will do so in 2009. The SHA has made an attempt to acquire units inside the city limits.**
- **OBJECTIVE: Increase customer satisfaction by training PHA employees in their areas of work so as to provide better information and efforts in the delivery of their services to the tenants. PROGRESS: SHA employees have successfully completed 32 hours of housing management training each year. One employee achieved her Public Housing Management Certification in 2006 through NAHRA training.**
- **OBJECTIVE: Renovate or modernize public housing units. PROGRESS: The SHA has successfully renovated 80 units in TN044-04 Crag Rock, and 20 units in TN044-03 in order to provide better housing, promote energy conservation, and reduce future maintenance costs.**
- **OBJECTIVE: Maximize outside resources to impact the needs of residents by acting as a catalyst for coordinated community action, and by promoting resident-initiated community improvement efforts. PROGRESS: The SHA has hosted Health Fairs for the community, financial planning and tax classes/preparation through VITA and energy conservation efforts. In addition, the Executive Director has been appointed to the County Emergency Management Disaster Committee, local Pre-School Board and local State Junior College Board.**
- **OBJECTIVE: Search for innovative and effective ways of accomplishing the mission of the SHA. PROGRESS: The SHA has upgraded the content of the resident monthly newsletter. Topics have included energy conservation, disaster planning, and announcements of resident programs and/or meetings. In addition, the SHA has published a tenant handbook, and is in the process of publishing a supplement to the tenant handbook that addresses disaster planning and preparedness.**
- **OBJECTIVE: Improve the SHA's Maintenance Procedures and providing adequate work space to continue to improve the quality of housing stock. PROGRESS: The SHA updated the Maintenance Plan; contracted with an outside inspection agency to help with the maintenance of the dwelling units, and; sent mechanics to necessary training.**
- **OBJECTIVE: Promote crime prevention, security, and safety through a partnership with local law enforcement agencies. PROGRESS: SHA is continuing crime reduction efforts with local law enforcement departments. SHA continues work with the Sate Drug Task Force on illegal drug activity issues. The SHA has reduced the number of 911 calls from approximately 400 calls per year to an average of approximately 25 calls per year.**
- **OBJECTIVE: Encourage residents to report crimes when seen immediately to the office or to local law enforcement. PROGRESS: SHA staff has met with residents and has encouraged them to inform the SHA of any criminal activity and /or safety issues. The results have been very positive.**

|      |   |
|------|---|
| 5.2  | <ul style="list-style-type: none"> <li>• <b>OBJECTIVE:</b> Promote economic self-sufficiency through welfare-to-work, training, and job development, and encouraging employment opportunities while residing at the Authority. <b>PROGRESS:</b> SHA has partnered with local employment agencies in posting job opportunities and training as well as with local agencies involved in the Work Investment Program. The SHA has applied for ROSS Grants to assist in the self-sufficiency program efforts.</li> <li>• <b>OBJECTIVE:</b> Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability. <b>PROGRESS:</b> SHA has maintained and reviewed all policies concerning affirmative measures.</li> <li>• <b>OBJECTIVE:</b> 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. <b>PROGRESS:</b> SHA has maintained and reviewed all policies concerning affirmative measures.</li> <li>• <b>OBJECTIVE:</b> Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required. <b>PROGRESS:</b> SHA has maintained and reviewed all policies concerning affirmative measures.</li> </ul> |
| 6.0  | <p><b>PHA Plan Update</b></p> <p>(8) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <ul style="list-style-type: none"> <li>• <b>Financial Resources Element:</b> the SHA Financial Statement including PHA Operating and Capital Fund, Rental Income, Investments etc. change on an annual basis. The SHA maintains this information on file and makes it available for HUD and public review at the SHA Administration Office</li> <li>• <b>Grievance Procedures:</b> the only change to this policy is the list of grievance hearing officers. The SHA Grievance Procedure Policy, as well as the list of current officers, is available for review at the SHA Administration Offices.</li> <li>• <b>Fiscal Year Audit:</b> The SHA's most recent Audit is on file at the SHA Administration Office and is available for HUD and public review.</li> <li>• <b>Violence Against Women Act (VAWA):</b> The SHA has completed and adopted the required VAWA Policy.</li> </ul> <p>(8) 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.<br/> <b>Sparta Housing Authority Administration Office</b></p>   |
| 7.0  | <p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p> <p>The SHA is proposing to assist in the development of housing for very low-income elderly persons through the HUD Section 202 Program. A separate non-profit entity has been created to administer the Program. Upon approval of an initial project application for 12 elderly units, HUD would provide money to finance the construction and to provide rent subsidies to make the project affordable. Additional applications will be submitted based on funding availability. The non-profit entity has a tract of land from the City of Sparta for which to locate the new units.</p>  |
| 8.0  | <p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>   |
|      | <p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> 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><b>See attached form HUD-50075.1 for FY2010 CFP and all open CFP Grants.</b></p>  |
| f8.2 | <p><b>Capital Fund Program Five-Year Action Plan.</b> 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><b>See attached form HUD-50075.2 for 5-Year CFP.</b></p>  |
| 8.3  | <p><b>Capital Fund Financing Program (CFFP).</b></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><b>Not Applicable.</b></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.

**The SHA has consulted with the State of Tennessee 2005-2010 Consolidated Plan for Housing and Community Development (developed by the THDA) in an effort to identify specific housing needs. Housing needs data for the SHA and this Agency Plan has also been developed from the 2000 Census and the SHA current public housing waiting list. See tables below.**

| Housing Needs of Families in the Jurisdiction by Family Type |          |                |        |         |                |      |          |
|--|----------|----------------|--------|---------|----------------|------|----------|
| Family Type  | Overall* | Afford-ability | Supply | Quality | Access-ibility | Size | Location |
| Income <= 30% of AMI   | 219      | 2              | 2      | 2       | 1              | NA   | NA       |
| Income >30% but <=50% of AMI                                 | 144      | 2              | 2      | 2       | 1              | NA   | NA       |
| Income >50% but <80% of AMI                                  | 158      | 1              | 1      | 2       | 1              | NA   | NA       |
| Elderly  | 167      | 1              | 1      | 2       | 1              | NA   | NA       |
| Families with Disabilities                                   | 321      | NA             | NA     | 2       | 1              | NA   | NA       |
| Race/Ethnicity/White   | 617      | NA             | NA     | 2       | 1              | NA   | NA       |
| Race/Ethnicity/Black   | 75       | NA             | NA     | 2       | 1              | NA   | NA       |
| Race/Ethnicity/Hispanic                                      | 10       | NA             | NA     | 2       | 1              | NA   | NA       |
| Race/Ethnicity/Other   | 0        | NA             | NA     | NA      | NA             | NA   | NA       |

\*Source: CHAS Data, City of Sparta, Tennessee Jurisdiction Area, 2000 Census

9.0

| Housing Needs of Families on the PHA's Current Waiting List   |               |                     |                                |
|---|---------------|---------------------|--------------------------------|
|   | # of families | % of total families | Annual Turnover (# of move-in) |
| Waiting list total:   | 55            |                     | 11                             |
| Extremely low income <=30% AMI  | 46            | 84                  |                                |
| Very low income(>30% but <=50% AMI)   | 5             | 9                   |                                |
| Low income(>50% but <80% AMI)   | 4             | 8                   |                                |
| Families with children  | 25            | 46                  |                                |
| Elderly families  | 47            | 13                  |                                |
| Families with Disabilities  | 16            | 29                  |                                |
| Race/ethnicity White  | 53            | 97                  |                                |
| Race/ethnicity Black  | 2             | 3                   |                                |
| Race/ethnicity Hispanic   | 0             | 0                   |                                |
| Race/ethnicity Other  | 0             | 0                   |                                |
| Characteristics by Bedroom Size:  |               |                     |                                |
| 1BR   | 26            | 47                  | 3                              |
| 2 BR  | 19            | 35                  | 4                              |
| 3 BR  | 9             | 16                  | 4                              |
| 4 BR  | 1             | 2                   | 0                              |
| 5 BR  | 0             | 0                   | 0                              |
| <ul style="list-style-type: none"> <li>Is the waiting list closed (select one)? <b>No</b> How long has it been closed (# of months)? <b>NA</b></li> <li>Does the PHA expect to reopen the list in the PHA Plan year? <b>NA</b></li> <li>Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <b>NA</b></li> </ul> |               |                     |                                |
| <b>Source: Sparta Housing Authority - Current Waiting List Data</b>   |               |                     |                                |

|      |  |
|------|--|
| 9.1  | <p><b>Strategy for Addressing Housing Needs.</b> 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. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p> <p><b>The SHA will continue its efforts to meet the specific needs of residents with in the jurisdiction of the SHA as identified above. Although the SHA will meet the needs of all of our residents, special emphasis will be directed towards toward the highest percentage needs such as the provision of smaller size bedroom units (1 &amp; 2 bedroom sizes) for families with children, elderly and individuals with disabilities. In addition, the SHA will continue to employ effective management and maintenance policies to minimize vacancies and turnover time.</b></p>  |
| 10.0 | <p><b>Additional Information.</b> 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><b>As discussed in Section 5.2 of this form, the Sparta Housing Authority continues its ongoing efforts to meet the Mission and Goals identified in our most recent 5-Year Agency Plan. The SHA is diligent in providing safe, descent and affordable housing; creating opportunities for our resident’s self-sufficiency and economic independence; and assure fiscal integrity in all public housing programs. Our staff is continually striving to improve our management and service delivery efforts, as well as maintain the physical appearance and function of our dwelling units, grounds and facilities.</b></p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p><b>PHA’s definition of “Significant Amendment or Substantial Deviation”:</b></p> <ol style="list-style-type: none"> <li><b>1. Changes to rent or admissions policies or organization of the waiting list.</b></li> <li><b>2. Addition of non-emergency work, items (items not included in the Annual Statement or 5-Year Action Plan) or a change in the use of replacement reserve funds under the Capital Fund.</b></li> <li><b>3. Any change with regard to demolition or disposition, designation, or homeownership programs or conversion activities.</b></li> </ol> <p><b>An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements.</b></p> |
| 11.0 | <p><b>Required Submission for HUD Field Office Review.</b> 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. <b>Note:</b> 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:**

### **1. Resident Advisory Board (RAB) Comments:**

The Sparta Housing Authority staff discussed the FY 2010 Agency Plan and the detailed list of proposed FY 2010 and 5-Year capital fund improvements with the SHA Resident Advisory Board (RAB) members and other tenants present at the August 20, 2009 RAB Meeting and September 22, 2009 formal Public Hearing. The RAB and participants supported the proposed improvements. The following physical needs comments and/or suggestions were made by RAB members/residents:

- Replace windows at Crag Rock and Lee Street. *Staff will consider new windows in future CFP budgets, although actual replacement will be dependent on funding levels. It was discussed that the SHA has applied for a HUD Competitive Grant that would fund window replacement.*
- Install clothes dryers on Lee Street. *Staff will consider in future CFP budgets, although actual installation will be dependent on funding levels.*
- Replace existing screen doors with storm doors. *Staff will consider screen door (not storm door) replacement in future CFP budgets, although actual installation will be dependent on funding levels.*
- Replace existing mailboxes. *Staff will consider new mail boxes in future CFP budgets, although actual installation will be dependent on funding levels, as well as approval by the local Post Master.*

### **2. Challenged Elements:**

The SHA does not have any challenged Elements.

| <b>Part I: Summary</b>  |  |   |                      |                                |   |  |
|---|--|---|----------------------|--------------------------------|---|--|
| <b>PHA Name:</b><br>Sparta Housing Authority  |  | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: <b>TN43P04450110</b> Replacement Housing Factor Grant No:<br>Date of CFFP: _____ |                      |                                | <b>FFY of Grant:2010</b><br><b>FFY of Grant Approval:</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><br><input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b> |  |   |                      |                                |   |  |
| Line  | Summary by Development Account   | Total Estimated Cost  |                      | Total Actual Cost <sup>1</sup> |   |  |
|   |  | Original  | Revised <sup>2</sup> | Obligated                      | Expended  |  |
| 1   | Total non-CFP Funds  | -   |                      |                                |   |  |
| 2   | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup>             | 46,000.00   |                      |                                |   |  |
| 3   | 1408 Management Improvements   | 18,650.00   |                      |                                |   |  |
| 4   | 1410 Administration (may not exceed 10% of line 21)                      | 15,000.00   |                      |                                |   |  |
| 5   | 1411 Audit   | -   |                      |                                |   |  |
| 6   | 1415 Liquidated Damages  | -   |                      |                                |   |  |
| 7   | 1430 Fees and Costs  | 39,280.00   |                      |                                |   |  |
| 8   | 1440 Site Acquisition  | -   |                      |                                |   |  |
| 9   | 1450 Site Improvement  | -   |                      |                                |   |  |
| 10  | 1460 Dwelling Structures   | 111,070.00  |                      |                                |   |  |
| 11  | 1465.1 Dwelling Equipment—Nonexpendable                                  | -   |                      |                                |   |  |
| 12  | 1470 Non-dwelling Structures   | -   |                      |                                |   |  |
| 13  | 1475 Non-dwelling Equipment  | -   |                      |                                |   |  |
| 14  | 1485 Demolition  | -   |                      |                                |   |  |
| 15  | 1492 Moving to Work Demonstration  | -   |                      |                                |   |  |
| 16  | 1495.1 Relocation Costs  | -   |                      |                                |   |  |
| 17  | 1499 Development Activities <sup>4</sup>                                 | -   |                      |                                |   |  |
| 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)                            | \$230,000.00  |                      |                                |   |  |
| 21  | Amount of line 20 Related to LBP Activities                              | -   |                      |                                |   |  |
| 22  | Amount of line 20 Related to Section 504 Activities                      | -   |                      |                                |   |  |
| 23  | Amount of line 20 Related to Security – Soft Costs                       | -   |                      |                                |   |  |
| 24  | Amount of Line 20 Related to Security – Hard Costs                       | -   |                      |                                |   |  |
| 25  | Amount of line 20 Related to Energy Conservation Measures                | -   |                      |                                |   |  |

<sup>1</sup> To be completed for the Performance and Evaluation Report  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations  
<sup>4</sup> 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

|   |                                |   |                      |  |          |
|---|--------------------------------|---|----------------------|--|----------|
| <b>Part I: Summary</b>  |                                |   |                      |  |          |
| PHA Name: <u>Sparta Housing Authority</u>   |                                | Grant Type and Number<br>Capital Fund Program Grant No: <u>TN4304450110</u><br>Replacement Housing Factor Grant No: |                      | Federal FY of Grant:<br><u>2010</u><br>FFY OF Grant Approval:<br><u>2010</u> |          |
| Type of Grant<br><input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )<br><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 <sup>1</sup>   |          |
|   |                                | Original  | Revised <sup>2</sup> | Obligated  | Expended |
| Signature of Executive Director<br><i>John Payer</i>  |                                | Date<br><u>09-29-2009</u>   |                      | Signature of Public Housing Director<br>Date                                 |          |



| Part II Supporting Pages                     |  |  |          |                      |                      |                                   |                             |                |
|--|--|--|----------|----------------------|----------------------|-----------------------------------|-----------------------------|----------------|
| <b>PHA Name:</b><br>Sparta Housing Authority |  | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: <b>TN43P04450110</b> CFFP (Yes/No): <b>No</b><br>Replacement Housing Factor Grant No: |          |                      |                      | <b>Federal FFY of Grant: 2010</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 <sup>1</sup> | Funds Obligated <sup>2</sup>      | Funds Expended <sup>2</sup> |                |
| PHA Wide                                     | Operations   | 1406   | 1        | 46,000.00            |                      |                                   |                             |                |
| PHA Wide                                     | Management   | 1408   | 1        | 18,650.00            |                      |                                   |                             |                |
| PHA Wide                                     | Administration   | 1410   | 1        | 15,000.00            |                      |                                   |                             |                |
| PHA Wide                                     | A/E Design   | 1430   | 1        | 15,000.00            |                      |                                   |                             |                |
| PHA Wide                                     | A/E Inspection   | 1430   | 1        | 11,200.00            |                      |                                   |                             |                |
| PHA Wide                                     | A/E Management   | 1430   | 1        | 6,280.00             |                      |                                   |                             |                |
| PHA Wide                                     | Consultant Planning (Agency Plan)  | 1430   | 1        | 5,000.00             |                      |                                   |                             |                |
| PHA Wide                                     | Environmental Assessment   | 1430   | 1        | 1,800.00             |                      |                                   |                             |                |
| PHA Wide                                     | Relocation   | 1495.1   |          | 0.00                 |                      |                                   |                             |                |
| TN044000001                                  | Building exterior (Remove existing and install new roofing) (TN044-01)       | 1460   | LS       | 10,000.00            |                      |                                   |                             |                |
| TN044000001                                  | Building exterior (Remove existing and install new metal roofing) (TN044-03) | 1460   | 375 SQ   | 101,070.00           |                      |                                   |                             |                |
|  |  |  |          |                      |                      |                                   |                             |                |
|  |  |  |          |                      |                      |                                   |                             |                |
|  |  |  |          |                      |                      |                                   |                             |                |
|  |  |  |          |                      |                      |                                   |                             |                |
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|  |  |  |          |                      |                      |                                   |                             |                |
|  |  |  |          |                      |                      |                                   |                             |                |

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.



| Part I: Summary   |  |   |                      |   |   |  |
|---|--|---|----------------------|---|---|--|
| <b>PHA Name:</b><br>Sparta Housing Authority  |  | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: <b>TN43P04450109</b> Replacement Housing Factor Grant No:<br>Date of CFFP: _____ |                      |   | <b>FFY of Grant:2009</b><br><b>FFY of Grant Approval:</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: 09/30/2010 |  | <input type="checkbox"/> Final Performance and Evaluation Report  |                      |   |   |  |
| Line  | Summary by Development Account   | Total Estimated Cost  |                      | Total Actual Cost <sup>1</sup>                                    |   |  |
|   |  | Original  | Revised <sup>2</sup> | Obligated   | Expended  |  |
| 1   | Total non-CFP Funds  | -   | -                    |   |   |  |
| 2   | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup>             | 46,000.00   | 50,920.00            | 0.00  | 0.00  |  |
| 3   | 1408 Management Improvements   | 18,650.00   | 28,650.00            | 0.00  | 0.00  |  |
| 4   | 1410 Administration (may not exceed 10% of line 21)                      | 15,000.00   | 15,000.00            | 0.00  | 0.00  |  |
| 5   | 1411 Audit   | -   | -                    |   |   |  |
| 6   | 1415 Liquidated Damages  | -   | -                    |   |   |  |
| 7   | 1430 Fees and Costs  | 39,280.00   | 39,280.00            | 0.00  | 0.00  |  |
| 8   | 1440 Site Acquisition  | -   | -                    |   |   |  |
| 9   | 1450 Site Improvement  | 84,490.00   | -                    |   |   |  |
| 10  | 1460 Dwelling Structures   | 26,580.00   | 93,703.00            | 0.00  | 0.00  |  |
| 11  | 1465.1 Dwelling Equipment—Nonexpendable                                  | -   | 6,000.00             | 0.00  | 0.00  |  |
| 12  | 1470 Non-dwelling Structures   | -   | -                    |   |   |  |
| 13  | 1475 Non-dwelling Equipment  | -   | 21,047.00            | 0.00  | 0.00  |  |
| 14  | 1485 Demolition  | -   | -                    |   |   |  |
| 15  | 1492 Moving to Work Demonstration  | -   | -                    |   |   |  |
| 16  | 1495.1 Relocation Costs  | -   | -                    |   |   |  |
| 17  | 1499 Development Activities <sup>4</sup>                                 | -   | -                    |   |   |  |
| 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)                            | 230,000.00  | 254,600.00           | 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                | -   | -                    |   |   |  |

<sup>1</sup> To be completed for the Performance and Evaluation Report

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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

<sup>4</sup> RHF funds shall be included here

|   |                                |  |                      |  |          |
|---|--------------------------------|--|----------------------|--|----------|
| <b>Part I: Summary</b>  |                                |  |                      |  |          |
| PHA Name: <i>Sparta Housing Authority</i>   |                                | Grant Type and Number<br>Capital Fund Program Grant No: <i>TN43P04450109</i><br>Replacement Housing Factor Grant No: |                      | Federal FY of Grant:<br><i>2009</i><br>FFY OF Grant Approval:<br><i>2009</i> |          |
| Type of Grant<br><input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )<br><input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>09/30/2010</i> <input type="checkbox"/> Final Performance and Evaluation Report |                                |  |                      |  |          |
| Line  | Summary by Development Account | Total Estimated Cost   |                      | Total Actual Cost <sup>1</sup>   |          |
|   |                                | Original   | Revised <sup>2</sup> | Obligated  | Expended |
| Signature of Executive Director<br><i>Jon Page</i>  |                                | Date<br><i>09-29-2009</i>  |                      | Signature of Public Housing Director<br>Date                                 |          |

| Part II Supporting Pages                   |  |   |          |                      |                      |                              |                             |                |
|--|--|---|----------|----------------------|----------------------|------------------------------|-----------------------------|----------------|
| PHA Name:<br>Sparta Housing Authority      |  | Grant Type and Number<br>Capital Fund Program Grant No: TN43P04450109 CFFP (Yes/No): No<br>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 <sup>1</sup> | Funds Obligated <sup>2</sup> | Funds Expended <sup>2</sup> |                |
| PHA Wide                                   | Operations   | 1406  | 1        | 46,000.00            | 50,920.00            | 0.00                         | 0.00                        |                |
| PHA Wide                                   | Management   | 1408  | 1        | 18,650.00            | 28,650.00            | 0.00                         | 0.00                        |                |
| PHA Wide                                   | Administration   | 1410  | 1        | 15,000.00            | 15,000.00            | 0.00                         | 0.00                        |                |
| PHA Wide                                   | A/E Design   | 1430  | 1        | 15,000.00            | 15,000.00            | 0.00                         | 0.00                        |                |
| PHA Wide                                   | A/E Inspection   | 1430  | 1        | 11,200.00            | 11,200.00            | 0.00                         | 0.00                        |                |
| PHA Wide                                   | A/E Management   | 1430  | 1        | 6,280.00             | 6,280.00             | 0.00                         | 0.00                        |                |
| PHA Wide                                   | Consultant Planning (Agency Plan)  | 1430  | 1        | 5,000.00             | 5,000.00             | 0.00                         | 0.00                        |                |
| PHA Wide                                   | Environmental Assessment   | 1430  | 1        | 1,800.00             | 1,800.00             | 0.00                         | 0.00                        |                |
| PHA Wide                                   | Relocation   | 1495.1  | 1        | 0.00                 | 0.00                 |                              |                             |                |
| TN044000001                                | Building exterior (Remove existing & install new 5 inch gutters with gutter guards) (TN044-01) | 1460  | 450 LF   | 2,700.00             | 0.00                 |                              |                             |                |
| TN044000001                                | Replace fascia and damaged soffits (TN044-01)  | 1460  | LS       | 12,000.00            | 0.00                 |                              |                             |                |
| TN044000001                                | Provide new parking bays (20) (TN044-01)   | 1450  | LS       | 84,490.00            | 0.00                 |                              |                             |                |
| TN044000001                                | Building exterior (Remove existing and install new asphalt shingles)                           | 1460  | LS       | 11,880.00            | 93,703.00            | 0.00                         | 0.00                        |                |
| TN044000001                                | Replace ranges   | 1465.1  | 10       | 0.00                 | 3,000.00             | 0.00                         | 0.00                        |                |
| TN044000001                                | Replace refrigerators  | 1465.1  | 10       | 0.00                 | 3,000.00             | 0.00                         | 0.00                        |                |
| TN044000001                                | Non-Dwelling Equipment ( Maintenance)  | 1475  | 10       | 0.00                 | 21,047.00            | 0.00                         | 0.00                        |                |
|  |  |   |          |                      |                      |                              |                             |                |
|  |  |   |          |                      |                      |                              |                             |                |

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.



| Part I: Summary  |  |   |                      |                                |  |  |
|--|--|---|----------------------|--------------------------------|--|--|
| <b>PHA Name:</b><br>Sparta Housing Authority   |  | <b>Grant Type and Number</b><br>Capital Fund Program Grant No: <b>TN43S04450109</b> Replacement Housing Factor Grant No:<br>Date of CFFP: _____ |                      |                                | <b>FFY of Grant:</b><br><b>ARRA</b><br><b>FFY of Grant Approval:</b> |  |
| <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: )<br><input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2009 <input type="checkbox"/> Final Performance and Evaluation Report |  |   |                      |                                |  |  |
| Line   | Summary by Development Account   | Total Estimated Cost  |                      | Total Actual Cost <sup>1</sup> |  |  |
|  |  | Original  | Revised <sup>2</sup> | Obligated                      | Expended   |  |
| 1  | Total non-CFP Funds  | -   | -                    | -                              | -  |  |
| 2  | 1406 Operations (may not exceed 20% of line 21) <sup>3</sup>             | -   | -                    | -                              | -  |  |
| 3  | 1408 Management Improvements   | -   | -                    | -                              | -  |  |
| 4  | 1410 Administration (may not exceed 10% of line 21)                      | 29,920.00   | -                    | 2,111.19                       | 2,111.19   |  |
| 5  | 1411 Audit   | -   | -                    | -                              | -  |  |
| 6  | 1415 Liquidated Damages  | -   | -                    | -                              | -  |  |
| 7  | 1430 Fees and Costs  | 44,627.00   | -                    | 21,111.85                      | 21,111.85  |  |
| 8  | 1440 Site Acquisition  | -   | -                    | -                              | -  |  |
| 9  | 1450 Site Improvement  | 224,659.00  | -                    | 0.00                           | 0.00   |  |
| 10   | 1460 Dwelling Structures   | -   | -                    | -                              | -  |  |
| 11   | 1465.1 Dwelling Equipment—Nonexpendable                                  | -   | -                    | -                              | -  |  |
| 12   | 1470 Non-dwelling Structures   | -   | -                    | -                              | -  |  |
| 13   | 1475 Non-dwelling Equipment  | -   | -                    | -                              | -  |  |
| 14   | 1485 Demolition  | -   | -                    | -                              | -  |  |
| 15   | 1492 Moving to Work Demonstration  | -   | -                    | -                              | -  |  |
| 16   | 1495.1 Relocation Costs  | -   | -                    | -                              | -  |  |
| 17   | 1499 Development Activities <sup>4</sup>                                 | -   | -                    | -                              | -  |  |
| 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)                            | 299,206.00  | -                    | 23,223.04                      | 23,223.04  |  |
| 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                | -   | -                    | -                              | -  |  |

<sup>1</sup> To be completed for the Performance and Evaluation Report


<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

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

<sup>4</sup> 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

|  |                                |  |                      |   |          |
|--|--------------------------------|--|----------------------|---|----------|
| <b>Part I: Summary</b>   |                                |  |                      |   |          |
| PHA Name: <i>Sparta Housing Authority</i>  |                                | Grant Type and Number<br>Capital Fund Program Grant No: <i>TN43S04450109</i><br>Replacement Housing Factor Grant No: |                      | Federal FY of Grant:<br><i>ARRA</i><br>FFY OF Grant Approval: |          |
| Type of Grant<br><input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:   ) <input type="checkbox"/> Final Performance and Evaluation Report<br><input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <i>06/30/2009</i> |                                |  |                      |   |          |
| Line   | Summary by Development Account | Total Estimated Cost   |                      | Total Actual Cost'  |          |
|  |                                | Original   | Revised <sup>F</sup> | Obligated   | Expended |
| Signature of Executive Director  |                                | Date   |                      | Signature of Public Housing Director                          |          |
|   |                                | <i>09-29-2009</i>  |                      |   |          |



| Part II Supporting Pages                         |   |   |          |                      |                      |                                   |                                |                   |
|--|---|---|----------|----------------------|----------------------|-----------------------------------|--------------------------------|-------------------|
| PHA Name:<br><b>Sparta Housing Authority</b>     |   | Grant Type and Number<br>Capital Fund Program Grant No: <b>TN43S04450109</b> CFFP (Yes/No):<br>Replacement Housing Factor Grant No: |          |                      |                      | Federal FFY of Grant: <b>ARRA</b> |                                |                   |
| Development Number<br>Name/HA-Wide<br>Activities | General Description of Major Work<br>Categories | Dev.<br>Acct<br>No.   | Quantity | Total Estimated Cost |                      | Total Actual Cost                 |                                | Status of<br>Work |
|  |   |   |          | Original             | Revised <sup>1</sup> | Funds<br>Obligated <sup>2</sup>   | Funds<br>Expended <sup>2</sup> |                   |
| TN044-001A                                       | Provide New Parking Bays                        | 1450  | 27       | 110,083.00           |                      | 0.00                              | 0.00                           |                   |
| Lee Street                                       | Off-Street Parking                              | 1450  | 600 L.F. | 60,658.00            |                      | 0.00                              | 0.00                           |                   |
| TN044-001B                                       | Off-Street Parking                              | 1450  | 500 L.F. | 53,918.00            |                      | 0.00                              | 0.00                           |                   |
| Oakwood  |   |   |          |                      |                      |                                   |                                |                   |
| PHA-Wide<br>Administration                       | Technical/Non-Technical Salaries                | 1410  | 1        | 29,920.00            |                      | 2,111.19                          | 2,111.19                       |                   |
| PHA-Wide<br>Fees & Costs                         | A/E Fees  | 1430  | 1        | 34,627.00            |                      | 21,111.85                         | 21,111.85                      |                   |
|  | Property Survey                                 | 1430  | 1        | 5,000.00             |                      | 0.00                              | 0.00                           |                   |
|  | Physical Needs Assessment                       | 1430  | 1        | 5,000.00             |                      | 0.00                              | 0.00                           |                   |
|  |   |   |          |                      |                      |                                   |                                |                   |
|  |   |   |          |                      |                      |                                   |                                |                   |
|  |   |   |          |                      |                      |                                   |                                |                   |
|  |   |   |          |                      |                      |                                   |                                |                   |
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|  |   |   |          |                      |                      |                                   |                                |                   |
|  |   |   |          |                      |                      |                                   |                                |                   |
|  |   |   |          |                      |                      |                                   |                                |                   |

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

| <b>Part III: Implementation Schedule for Capital Fund Program</b> |   |                               |   |                               |   |
|---|---|-------------------------------|---|-------------------------------|---|
| PHA Name: <b>Sparta Housing Authority</b>                         |   |                               |   |                               | Federal FY of Grant: <b>ARRA</b>              |
| Development Number<br>Name/PHA-Wide<br>Activities                 | All Fund Obligated<br>(Quarter Ending Date) |                               | All Funds Expended<br>(Quarter Ending Date) |                               | Reasons for Revised Target Dates <sup>1</sup> |
|   | Original Obligation<br>End Date             | Actual Obligation<br>End Date | Original Obligation<br>End Date             | Actual Obligation<br>End Date |   |
| TN044-001A<br>Lee Street  | 03/18/2010                                  |                               | 03/18/2012                                  |                               |   |
| TN044-001B<br>Oakwood   | 03/18/2010                                  |                               | 03/18/2012                                  |                               |   |
| PHA-Wide<br>Administration  | 03/18/2010                                  |                               | 03/18/2012                                  |                               |   |
| PHA-Wide<br>Fees & Costs  | 03/18/2010                                  |                               | 03/18/2012                                  |                               |   |

<sup>1</sup> 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.

| <b>PART I: SUMMARY</b>                                     |  |   |                                       |                                       |  |                                       |
|--|--|---|---------------------------------------|---------------------------------------|--|---------------------------------------|
| PHA Name/Number<br><b>Sparta Housing Authority / TN044</b> |  | Locality (City/County & State)<br><b>Sparta / White County, Tennessee</b> |                                       |                                       | <input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b> |                                       |
| A.   | Development Number and Name                    | Work Statement for Year 1<br>FFY 2009                                     | Work Statement for Year 2<br>FFY 2011 | Work Statement for Year 3<br>FFY 2012 | Work Statement for Year 4<br>FFY 2013  | Work Statement for Year 5<br>FFY 2014 |
| B.   | Physical Improvements Subtotal                 | Annual Statement  | \$109,070.00                          | \$109,070.00                          | \$109,070.00   | \$109,070.00                          |
| C.   | Management Improvements                        |   | \$57,930.00                           | \$57,930.00                           | \$57,930.00  | \$60,330.00                           |
| D.   | PHA-Wide Non-dwelling Structures and Equipment |   | \$2,000.00                            | \$2,000.00                            | \$2,000.00   | \$20,000.00                           |
| E.   | ADMINISTRATION                                 |   | \$15,000.00                           | \$15,000.00                           | \$15,000.00  | \$15,000.00                           |
| F.   | Other  |   |                                       |                                       |  |                                       |
| G.   | Operations                                     |   | \$46,000.00                           | \$46,000.00                           | \$46,000.00  | \$25,600.00                           |
| H.   | Demolition                                     |   |                                       |                                       |  |                                       |
| I.   | Development                                    |   |                                       |                                       |  |                                       |
| J.   | Capital Fund Financing – Debt Service          |   |                                       |                                       |  |                                       |
| K.   | Total CFP Funds                                |   | \$230,000.00                          | \$230,000.00                          | \$230,000.00   | \$230,000.00                          |
| L.   | Total Non-CFP Funds                            |   | \$0.00                                | \$0.00                                | \$0.00   | \$0.00                                |
| M.   | Grand Total                                    |   | \$230,000.00                          | \$230,000.00                          | \$230,000.00   | \$230,000.00                          |

| <b>PART I: SUMMARY (CONTINUATION)</b>                      |                             |  |   |  |  |  |
|--|-----------------------------|--|---|--|--|--|
| PHA Name/Number<br><b>Sparta Housing Authority / TN044</b> |                             |  | Locality (City/county & State)<br><b>Sparta / White County, Tennessee</b> |  | <input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b> |  |
| A.   | Development Number and Name | Work Statement for Year 1<br>FFY <b>2010</b> | Work Statement for Year 2<br>FFY <b>2011</b>                              | Work Statement for Year 3<br>FFY <b>2012</b> | Work Statement for Year 4<br>FFY <b>2013</b>   | Work Statement for Year 5<br>FFY <b>2014</b> |
|  |                             | Annual Statement                             |   |  |  |  |
|  | TN044000001                 |  | \$230,000.00  | \$230,000.00                                 | \$230,000.00   | \$230,000.00                                 |
|  |                             |  |   |  |  |  |
|  |                             |  |   |  |  |  |
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