

Streamlined Annual PHA Plan <i>(High Performer PHAs)</i>	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires: 09/30/2027
--	---	--

Purpose. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services. They also inform HUD, families served by the PHA, and members of the public of the PHA's mission, goals, and objectives for serving the needs of low-, very low-, and extremely low- income families.

Applicability. The Form HUD-50075-HP is to be completed annually by **High Performing PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, HCV-Only PHA, Small PHA, or Qualified PHA do not need to submit this form. PHAs with zero public housing units must continue to comply with the PHA Plan requirements until they closeout their Section 9 programs (ACC termination).

Definitions.

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers (HCVs) and was designated as a high performer on both the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments if administering both programs, SEMAP for PHAs that only administer tenant-based assistance and/or project-based assistance, or PHAS if only administering public housing.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, and that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceed 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceed 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or HCVs combined and is not PHAS or SEMAP troubled.

A.	PHA Information.
A.1	<p>PHA Name: <u>Knox County Housing Authority</u> PHA Code: <u>IL085</u></p> <p>PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>04/01/2026</u></p> <p>PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above)</p> <p>Number of Public Housing (PH) Units <u>424</u> Number of Housing Choice Vouchers (HCVs) <u>285</u></p> <p>Total Combined <u>709</u></p> <p>PHA Plan Submission Type: <input checked="" type="checkbox"/> Annual Submission <input type="checkbox"/> Revised Annual Submission</p> <p>Public Availability of Information. In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan but excluded from their streamlined submissions. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA and should make documents available electronically for public inspection upon request. PHAs are strongly encouraged to post complete PHA Plans on their official websites and to provide each resident council with a copy of their PHA Plans.</p> <ul style="list-style-type: none"> - Central Office Cost Center: 216 W. Simmons St. Galesburg, IL 61401 - Moon Towers: 255 W. Tompkins St. Galesburg, IL 61401 - Cedar Creek Place: 1598 McKnight St. Galesburg, IL 61401 - Bluebell Tower: 300 N. Jefferson St. Abingdon, IL 61410 - www.knoxcountyhousing.org

☐ **PHA Consortia:** (Check box if submitting a Joint PHA Plan and complete table below)

Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	No. of Units in Each Program	
				PH	HCV
Lead PHA:					

B. Plan Elements

B.1 Revision of Existing PHA Plan Elements.

(a) Have the following PHA Plan elements been revised by the PHA since its last **Annual PHA Plan** submission?

Y N

- ☐ ☒ Statement of Housing Needs and Strategy for Addressing Housing Needs.
- ☐ ☒ Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.
- ☒ ☐ Financial Resources.
- ☒ ☐ Rent Determination.
- ☐ ☒ Homeownership Programs.
- ☐ ☒ Safety and Crime Prevention.
- ☐ ☒ Pet Policy.
- ☐ ☒ Substantial Deviation.
- ☐ ☒ Significant Amendment/Modification

(b) If the PHA answered yes for any element, describe the revisions for each element below:

SEE ATTACHMENT 1.0

(c) The PHA must submit its Deconcentration Policy for Field Office Review.

SEE ATTACHMENT 1.0

B.2 New Activities.

(a) Does the PHA intend to undertake any new activities related to the following in the PHA's applicable Fiscal Year?

Y N

- | | | |
|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Choice Neighborhoods Grants. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Modernization or Development. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Demolition and/or Disposition. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Conversion of Public Housing to Tenant Based Assistance. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Conversion of Public Housing to Project-Based Rental Assistance or Project-Based Vouchers under RAD. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Homeownership Program under Section 32, 9 or 8(Y) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Project Based Vouchers. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | Units with Approved Vacancies for Modernization. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants). |

(b) If any of these activities are planned for the applicable Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project-based units and general locations, and describe how project basing would be consistent with the PHA Plan.

SEE ATTACHMENT 2.0

B.3 Progress Report.

Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year Plan.

SEE ATTACHMENT 3.0

B.4	<p>Capital Improvements. Include a reference here to the most recent HUD-approved 5-Year Action Plan in EPIC and the date that it was approved.</p> <p>SEE ATTACHMENT 6.0</p>
B.5	<p>Most Recent Fiscal Year Audit.</p> <p>(a) Were there any findings in the most recent FY Audit?</p> <p>Y N <input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>(b) If yes, please describe:</p>
C.	<p>Other Document and/or Certification Requirements.</p>
C.1	<p>Resident Advisory Board (RAB) Comments.</p> <p>(a) Did the RAB(s) have comments to the PHA Plan?</p> <p>Y N <input checked="" type="checkbox"/> <input type="checkbox"/></p> <p>(b) If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.</p> <p>SEE ATTACHMENT 5.0</p>

C.2	<p>Certification by State or Local Officials.</p> <p>Form HUD-50077-SL, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>
C.3	<p>Civil Rights Certification/Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan.</p> <p>Form 50077-ST-HCV-HP, <i>PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed</i> must be submitted by the PHA as an electronic attachment to the PHA Plan.</p> <p>SEE ATTACHED CERTIFICATION</p>
C.4	<p>Challenged Elements. If any element of the PHA Plan is challenged, a PHA must include such information as an attachment with a description of any challenges to Plan elements, the source of the challenge, and the PHA's response to the public.</p> <p>(a) Did the public challenge any elements of the Plan?</p> <p>Y N <input type="checkbox"/> <input checked="" type="checkbox"/></p> <p>(b) If yes, include Challenged Elements.</p> <p>SEE ATTACHMENT 7.0</p>

Instructions for Preparation of Form HUD-50075-HP Annual Plan for High Performing PHAs

A. PHA Information. All PHAs must complete this section (24 CFR 903.4).

A.1 Include the full PHA Name, PHA Code, PHA Type, PHA Fiscal Year Beginning (MM/YYYY), PHA Inventory, Number of Public Housing Units and or Housing Choice Vouchers (HCVs), PHA Plan Submission Type, and the Availability of Information, specific location(s) of all information relevant to the public hearing and proposed PHA Plan (24 CFR 903.23(e)).

PHA Consortia: Check box if submitting a Joint PHA Plan and complete the table (24 CFR 943.128(a)).

B. Plan Elements.

B.1 Revision of Existing PHA Plan Elements. PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the "yes" box. If an element has not been revised, mark "no."

☐ **Statement of Housing Needs and Strategy for Addressing Housing Needs.** Provide a statement addressing the housing needs of low-income, very low-income and extremely low-income families and a brief description of the PHA's strategy for addressing the housing needs of families who reside in the jurisdiction served by the PHA and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income); (ii) elderly families (iii) households with individuals with disabilities, and households of various races and ethnic groups residing in the jurisdiction or on the public housing and Section 8 tenant-based assistance waiting lists based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location (24 CFR 903.7(a)(2)(i)). Provide a description of the ways in which the PHA intends, to the maximum extent practicable, to address those housing needs in the upcoming year and the PHA's reasons for choosing its strategy (24 CFR 903.7(a)(2)(ii)).

☐ **Deconcentration and Other Policies that Govern Eligibility, Selection and Admissions.** Describe the PHA's admissions policy for deconcentration of poverty and income mixing of lower-income families in public housing. The Deconcentration Policy must describe the PHA's policy for bringing higher income tenants into lower income developments and lower income tenants into higher income developments. The deconcentration requirements apply to general occupancy and family public housing developments. Refer to 24 CFR 903.2(b)(2) for developments not subject to deconcentration of poverty and income mixing requirements 24 CFR 903.7(b). Describe the PHA's procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists 24 CFR 903.7(b). A statement of the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV (24 CFR 903.7(b)). Describe the unit assignment policies for public housing 24 CFR 903.7(b).

☐ **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA operating, capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program and state the planned use for the resources (24 CFR 903.7(c)).

☐ **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units, including applicable public housing flat rents, minimum rents, voucher family rent contributions, and payment standard policies (24 CFR 903.7(d)).

☐ **Homeownership Programs.** A description of any homeownership programs (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent that the PHA participates in homeownership programs under section 8(y) of the 1937 Act (24 CFR 903.7(k) and 24 CFR 903.11(c)(1)).

☐ **Safety and Crime Prevention.** A description of PHA's plan for safety and crime prevention. For High Performing PHAs, the information required by 24 CFR 903.7(m) must be included only to the extent this information is required for PHA's participation in the public housing drug elimination program and the PHA anticipates participating in this program in the applicable year (24 CFR 903.11(c)(1)).

☐ **Pet Policy.** Describe the PHA's policies and requirements pertaining to the ownership of pets in public housing (24 CFR 903.7(n)).

☐ **Substantial Deviation.** PHA must provide its criteria for determining a "substantial deviation" to its 5-Year Plan (24 CFR 903.7(s)(2)(i)).

☐ **Significant Amendment/Modification.** PHA must provide its criteria for determining a "Significant Amendment or Modification" to its 5-Year and Annual Plan (24 CFR 903.7(s)(2)(ii)). For modifications resulting from the Rental Assistance Demonstration (RAD) program, refer to the 'Sample PHA Plan Amendment' found in Notice PIH-2019-23(HA), successor RAD Implementation Notices, or other RAD Notices.

If any boxes are marked "yes", describe the revision(s) to those element(s) in the space provided.

PHAs must submit a Deconcentration Policy for Field Office review. For additional guidance on what a PHA must do to deconcentrate poverty in its development and comply with fair housing requirements, see 24 CFR 903.2 (24 CFR 903.23(b)).

B.2 New Activities. If the PHA intends to undertake any new activities related to these elements or discretionary policies in the applicable Fiscal Year, mark "yes" for those elements, and describe the activities to be undertaken in the space provided. If the PHA does not plan to undertake these activities, mark "no."

☐ **Choice Neighborhoods Grants.** 1) A description of any housing (including project name, number (if known) and unit count) for which the PHA will apply for Choice Neighborhoods Grants; and 2) A timetable for the submission of applications or proposals. The application and approval process for Choice Neighborhoods is a separate process. See guidance on HUD's website at: <https://www.hud.gov/cn> (Notice PIH 2011-47).

☐ **Modernization or Development (Conventional & Mixed-Finance).** 1) A description of any housing (including name, project number (if known) and unit count) for which the PHA will apply for modernization or development; and 2) A timetable for the submission of applications or proposals. The application and approval process for modernization or development is a separate process. See 24 CFR part 905 and guidance on HUD's website at: https://www.hud.gov/program_offices/public_indian_housing/programs/ph/hope6/mfph#4.

☐ **Demolition and/or Disposition.** With respect to public housing only, describe (1) any public housing development(s), or portion of a public housing development projects, owned by the PHA and subject to ACCs (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition approval under section 18 of the 1937 Act (42 U.S.C. 1437p); and (2) a timetable for the demolition or disposition. This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed as described in the PHA's last Annual and/or 5-Year PHA Plan submission. The application and approval process for demolition and/or disposition is a separate process. Approval of the PHA Plan does not constitute approval of these activities. See guidance on HUD's website at: https://www.hud.gov/program_offices/public_indian_housing/centers/sac/demo_dispo/ and 24 CFR 903.7(h).

☐ **Conversion of Public Housing under the Voluntary or Mandatory Conversion programs.** Describe (1) any public housing building(s) (including project number and unit count) owned by the PHA that the PHA is required to convert or plans to voluntarily convert to tenant-based assistance; (2) An analysis of the projects or buildings required to be converted under Section 33; and (3) A statement of the amount of assistance received to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at the Special Applications Center (SAC) (<https://www.hud.gov/sac>) and 24 CFR 903.7(j).

☐ **Conversion of Public Housing under the Rental Assistance Demonstration (RAD) program (including Faircloth to RAD).** Describe any public housing building(s) (including project number and unit count) owned by the PHA that the PHA plans to voluntarily convert to Project-Based Assistance or Project-Based Vouchers under RAD. Note that all PHAs shall be required to provide the information listed in Attachment 1D of Notice PIH 2019-23(HA) as a significant amendment or its successor notice. See additional guidance on HUD's website at: <https://www.hud.gov/RAD/library/notices>.

☐ **Homeownership Programs.** A description of any homeownership programs (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent that the PHA participates in homeownership programs under section 8(y) of the 1937 Act (24 CFR 903.7(k) and 24 CFR 903.11(c)(1)).

☐ **Project-Based Vouchers.** Describe any plans to use HCVs for new project-based vouchers, which must comply with PBV goals, civil rights requirements, Housing Quality Standards (HQS) and deconcentration standards, as stated in (24 CFR 983.55(b)(1)) and set forth in the PHA Plan statement of deconcentration and other policies that govern eligibility, selection, and admissions. If using project-based vouchers, provide the projected number of project-based units and general locations (including if PBV units are planned on any former or current public housing units or sites) and describe how project-basing would be consistent with the PHA Plan (24 CFR 903.7(b), 24 CFR 903.7(r)).

☐ **Units with Approved Vacancies for Modernization.** The PHA must include a statement related to units with approved vacancies that are undergoing modernization in accordance with 24 CFR 990.145(a)(1).

☐ **Other Capital Grant Programs (i.e., Capital Fund Lead Based Paint, Housing Related Hazards, At Risk/Receivership/Substandard/Troubled Program, and/or Emergency Safety and Security Grants).** For all activities that the PHA plans to undertake in the applicable Fiscal Year, provide a description of the activity in the space provided.

B.3 Progress Report. For all Annual Plans following submission of the first Annual Plan, a PHA must include a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year PHA Plan (24 CFR 903.7(s)(1)).

B.4 Capital Improvements. PHAs that receive funding from the Capital Fund Program (CFP) must complete this section (24 CFR 903.7 (g)). To comply with this requirement, the PHA must reference the most recent HUD approved Capital Fund 5 Year Action Plan in EPIC and the date that it was approved. PHAs can reference the form by including the following language in the Capital Improvement section of the appropriate Annual or Streamlined PHA Plan Template: "See Capital Fund 5 Year Action Plan in EPIC approved by HUD on XX/XX/XXXX."

B.5 Most Recent Fiscal Year Audit. If the results of the most recent fiscal year audit for the PHA included any findings, mark "yes" and describe those findings in the space provided (24 CFR 903.7(p)).

C. Other Document and/or Certification Requirements

C.1 Resident Advisory Board (RAB) comments. If the RAB had comments on the annual plan, mark "yes," submit the comments as an attachment to the Plan and describe the analysis of the comments and the PHA's decision made on these recommendations (24 CFR 903.13(c), 24 CFR 903.19).

C.2 Certification by State or Local Officials. Form HUD-50077-SL, *Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan*, must be submitted by the PHA as an electronic attachment to the PHA Plan. (24 CFR 903.15). Note: A PHA may request to change its fiscal year to better coordinate its planning with planning done under the Consolidated Plan process by State or local officials as applicable.

C.3 Civil Rights Certification/ Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan. Provide a certification that the following plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public. This requirement is satisfied by completing and submitting form HUD-50077 ST-HCV-HP, *PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed*. Form HUD-50077-ST-HCV-HP, *PHA Certifications of Compliance with PHA Plan, Civil Rights, and Related Laws and Regulations Including PHA Plan Elements that Have Changed* must be submitted by the PHA as an electronic attachment to the PHA Plan. This includes all certifications relating to Civil Rights and related regulations. A PHA will be considered in compliance with the certification requirement to affirmatively further fair housing if the PHA fulfills the requirements of 24 CFR 5.150 et. seq., 903.7(o)(1), and 903.15(d).

C.4 Challenged Elements. If any element of the Annual PHA Plan or 5-Year PHA Plan is challenged, a PHA must include such information as an attachment to the Annual PHA Plan or 5-Year PHA Plan with a description of any challenges to Plan elements, the source of the challenge, and the PHA's response to the public (24 CFR 903.23(b)).

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced the 5-Year and Annual PHA Plan. The 5-Year and Annual PHA Plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission, goals, and objectives for serving the needs of low- income, very low- income, and extremely low- income families.

Public reporting burden for this information collection is estimated to average 5.26 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Reports Management Officer, REE, Department of Housing and Urban Development, 451 7th Street, SW, Room 4176, Washington, DC 20410-5000. When providing comments, please refer to OMB Approval No. 2577-0226. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.



PUBLIC NOTICE

GALESBURG, IL, 11/01/2025: The Knox County Housing Authority (KCHA) hereby announces its annual policy revisions and planning processes in accordance with federal regulations. 24 CFR § 903.17 requires a public housing authority to “Make the proposed PHA plan(s), the required attachments and documents related to the plans, and all relevant information available for inspection by the public at the principal office of the PHA during normal business hours.”

The **KCHA Annual Plan and Associated Documents for FYE 03/31/2025** are hereby made available for review:

- Annual Plan Submission – HUD Form 50075-HP and all attachments.
- Housing Choice Voucher Program Administrative Plan (Admin Plan)

The documents are available for review at the following locations:

- Central Office Cost Center: 216 W. Simmons St. Galesburg, IL 61401
- Moon Towers: 255 W. Tompkins St. Galesburg, IL 61401
- Cedar Creek Place: 1598 McKnight St. Galesburg, IL 61401
- Bluebell Tower: 300 N. Jefferson St. Abingdon, IL 61410
- www.knoxcountyhousing.org

The KCHA will hold a public hearing regarding the proposed PHA Annual Plan submissions at the following location, date, and time:

- **Thursday, December 18, 2025 @ 11:30 AM**
- **Moon Towers Community Room**
255 W. Tompkins St.
Galesburg, IL 61401

The general public is invited to present either oral or written comments on the proposed plans. Interested persons who do not wish to attend the hearing may also submit comments for review. Comments or questions regarding this notice should be addressed to:

Derek Antoine, Executive Director
Annual Plan Review and Comment
Knox County Housing Authority
216 W. Simmons St.
Galesburg, IL 61401
(309) 342.8129 ext. 1223
dantoine@knoxhousing.org

The Knox County Housing Authority is an equal opportunity housing provider.





NOTICE OF PUBLIC HEARING
ANNUAL PUBLIC HOUSING AUTHORITY (PHA) PLAN
KNOX COUNTY HOUSING AUTHORITY

The Knox County Housing Authority (KCHA) will hold a Public Hearing regarding the proposed CY 2014 Annual Public Housing Authority (PHA) Plan in compliance with Section 903.17 of Title 24 of the Code of Federal Regulations. The Public Hearing will take place on the following date, time, and location:

DATE: Thursday, December 18th, 2025
TIME: 11:30 a.m.
LOCATION: Knox County Housing Authority
Moon Towers Community Room
255 W. Tompkins St.
Galesburg, IL 61401

Plan documents will be available as of 11/01/2025. The general public may obtain additional information or a copy of the proposed FYE 2027 Annual PHA Plan and Five-Year Plan prior to the hearing on the KCHA's web site or by contacting the person listed below between 8:00 a.m. and 4:30 p.m. Monday through Friday.

The general public is invited to present either written or oral comments on the proposed CY 2014 Annual PHA Plan. Persons who do not attend the hearing may also submit written comments to the address mentioned below by 4:30 p.m. Friday, December 26, 2025.

Derek Antoine, Executive Director
Knox County Housing Authority
PHA Plan Public Hearing Request
216 W. Simmons St.
Galesburg, IL 61401
(309) 342-8129, extension 1223
dantoine@knoxhousing.org
www.knoxcountyhousing.org

Persons with disabilities requiring a reasonable accommodation to effectively participate in this Public Hearing should contact Cheryl Lefler, Assistant Director, KCHA at (309) 342-8129, extension 214 at least seven (7) days prior to the meeting.



Civil Rights Certification (Qualified PHAs)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB Approval No. 2577-0226
Expires: 09/30/2027

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairperson or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year PHA Plan, hereinafter referred to as "the Plan," of which this document is a part, and make the following certification and agreements with the Department of Housing and Urban Development (HUD) for the fiscal year beginning _____, in which the PHA receives assistance under 42 U.S.C. 1437f and/or 1437g in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d-2000d—4), the Fair Housing Act (42 U.S.C. 3601-19), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794), Title II of the Americans with Disabilities Act (42 U.S.C. 12101 *et seq.*), the Violence Against Women Act (34 U.S.C. § 12291 *et seq.*), and other applicable civil rights requirements, and that it will affirmatively further fair housing in the administration of all HUD programs. In addition, if it administers a Housing Choice Voucher Program, the PHA certifies that it will administer the program in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, Section 504 of the Rehabilitation Act of 1973, Title II of the Americans with Disabilities Act, the Violence Against Women Act, and other applicable civil rights requirements, and that it will affirmatively further fair housing in the administration of all HUD programs. The PHA will affirmatively further fair housing in compliance with the Fair Housing Act, 24 CFR § 5.150 *et seq.*, 24 CFR § 903.7(o), and 24 CFR § 903.15, which means that it will take meaningful actions, in addition to combating discrimination, that overcome patterns of segregation and foster inclusive communities free from barriers that restrict access to opportunity based on protected characteristics. Specifically, affirmatively furthering fair housing means taking meaningful actions that, taken together, address significant disparities in housing needs and in access to opportunity, replacing segregated living patterns with truly integrated and balanced living patterns, transforming racially or ethnically concentrated areas of poverty into areas of opportunity, and fostering and maintaining compliance with civil rights and fair housing laws (24 CFR § 5.151). Pursuant to 24 CFR § 903.15(c)(2), a PHA's policies are designed to reduce the concentration of tenants and other assisted persons by race, national origin, and disability. PHA policies include affirmative steps stated in 24 CFR § 903.15(c)(2)(i) and 24 CFR § 903.15(c)(2)(ii). Furthermore, under 24 CFR § 903.7(o), a PHA must submit a civil rights certification with its Annual and 5-year PHA Plans, except for qualified PHAs who submit the Form HUD-50077-CR as a standalone document. The PHA certifies that it will take no action that is materially inconsistent with its obligation to affirmatively further fair housing.

PHA Name

PHA Number/HA Code

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802)

Name of Executive Director:

Name of Board Chairperson:

Signature:

Date:

Signature:

Date:

The information is collected to ensure that PHAs carry out applicable civil rights requirements.

Public reporting burden for this information collection is estimated to average 0.16 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Reports Management Officer, REE, Department of Housing and Urban Development, 451 7th Street, SW, Room 4176, Washington, DC 20410-5000. When providing comments, please refer to OMB Approval No. 2577-0226. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Notice. The United States Department of Housing and Urban Development is authorized to collect the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 *et seq.*, and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.



IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 1.0
HUD-50075 Section B.1 – Revision of PHA Plan Elements

1. KCHA MISSION STATEMENT

- a. The Knox County Housing Authority is a dynamic force in our community, providing high-quality affordable housing opportunities for individuals and families, while promoting self-sufficiency, empowerment, and a sense of community development. Further, we will partner with other agencies to implement programs and services designed to help our families thrive.

2. HOUSING NEEDS OF FAMILIES IN THE JURISDICTION SERVED BY THE PHA

- a. Based upon the information applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. Rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being “severe impact,” and 5 being “little impact.” Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Family Type	Households	Affordability	Supply	Quality	Accessibility	Size	Location
Income < 30% AMI	3,455	1	1	2	2	3	3
Income < 50% AMI	2,795	2	2	2	2	3	3
Income < 80% AMI	4,040	3	3	3	3	4	4
Elderly	6,852	3	3	4	2	4	4
Disabled	6,644	1	1	3	1	3	2
Ethnicity - Caucasian	17,297	4	4	4	3	4	4
Ethnicity - African	1,723	2	2	2	2	3	3
Ethnicity - Hispanic	1,204	3	3	3	3	2	3
Ethnicity - Other	541	3	3	3	3	2	3

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

Key Rationale for Ratings:

- Extremely Low Income (<30% AMI): Rated 1 in Affordability and Supply because the market rent is almost universally higher than 30% of their income, and voucher/public housing waitlists are typically long.

- Disabled Households: Rated 1 in Accessibility and Supply. Knox County has older housing stock (pre-1978), which rarely meets UFAS/ADA standards (e.g., narrow doors, steps at entry), creating a severe shortage of livable units.
- Elderly: Accessibility is rated 2 because while specific "Senior Buildings" exist (Good Supply/Quality), the general private market lacks features for "aging in place" (ramps, walk-in showers).
- Hispanic/Latino: Size is rated 2 because this demographic often has larger family sizes, and there is typically a shortage of affordable 3+ bedroom units in the rental market.

3. DECONCENTRATION AND OTHER POLICIES THAT GOVERN ELIGIBILITY, SELECTION, AND ADMISSIONS.

a. Deconcentration

- i. Sub-Title A, Section 513 of the Quality Housing and Work Responsibility Act of 1998 (QHWRA), establishes two interrelated requirements for implementation by Public Housing Authorities: (1) Economic De-concentration of public housing developments and (2) Income Targeting to assure that families in the "extremely low" income category are proportionately represented in public housing and that pockets of poverty are reduced or eliminated. In order to implement these new requirements, the PHA must promote these provisions as policies and revise their Admission and Occupancy policies and procedures to comply.
- ii. Therefore, the Knox County Housing Authority, (hereinafter referred to as PHA) hereby affirms its commitment to implementation of the two requirements by adopting the following policies:
- iii. Economic De-concentration: Admission and Continued Occupancy Policies are revised to include the PHA's policy of promoting economic de-concentration. Implementation of this program may require the PHA to determine the median income of residents in each development, determine the average income of residents in all developments, compute the Established Income Range (EIR), determine developments outside the EIR, and provide adequate explanations and/or policies as needed to promote economic de-concentration.
- iv. Implementation may include one or more of the following options:
 1. Skipping families on the waiting list based on income;
 2. Establishing preferences for working families;
 3. Marketing campaign geared toward targeting income groups for specific developments;
 4. Additional supportive services;
 5. Additional amenities for all units;
 6. Flat rents for developments and unit sizes;

7. Different tenant rent percentages per development;
8. Different tenant rent percentages per bedroom size;
9. Saturday and evening office hours;
10. Security Deposit waivers;
11. Revised transfer policies;
12. Site-based waiting lists;
13. Mass Media advertising/Public service announcements; and
14. Giveaways.

v. Analysis of Income by Development/Program

AMP	Development Name	Total Household Income Reported	# of Households	Average Reported Income	85%	115%
IL085000001	Moon Towers	\$ 1,940,349.00	177	\$ 10,962.42	\$ 9,318.06	\$ 12,606.79
IL085000002	Woodland Bend	\$ 1,328,508.00	78	\$ 17,032.15	\$ 14,477.33	\$ 19,586.98
IL085000002	Cedar Creek Place	\$ 1,133,735.00	76	\$ 14,917.57	\$ 12,679.93	\$ 17,155.20
IL085000002	Whispering Hollow	\$ 581,870.00	42	\$ 13,854.05	\$ 11,775.94	\$ 15,932.15
IL085000003	Bluebell Tower	\$ 820,399.00	51	\$ 16,086.25	\$ 13,673.32	\$ 18,499.19
Highrise Developments		\$ 2,760,748.00	228	\$ 12,108.54	\$ 11,495.69	\$ 15,552.99
Scattered Family Sites		\$ 3,044,113.00	196	\$ 15,531.19	\$ 12,977.73	\$ 17,558.11
Total KCHA		\$ 5,804,861.00	424	\$ 13,690.71	\$ 12,384.92	\$ 16,756.06

Gross Income by Household

AMP	Development Name	Total Household Income Reported	# of Households	Average Reported Income	85%	115%
IL085000001	Moon Towers	\$ 1,876,320.00	177	\$ 10,600.68	\$ 9,010.58	\$ 12,190.78
IL085000002	Woodland Bend	\$ 1,214,924.00	78	\$ 15,575.95	\$ 13,239.56	\$ 17,912.34
IL085000002	Cedar Creek Place	\$ 1,043,278.00	76	\$ 13,727.34	\$ 11,668.24	\$ 15,786.44
IL085000002	Whispering Hollow	\$ 543,090.00	42	\$ 12,930.71	\$ 10,991.11	\$ 14,870.32
IL085000003	Bluebell Tower	\$ 776,620.00	51	\$ 15,227.84	\$ 12,943.67	\$ 17,512.02
Highrise Developments		\$ 2,652,940.00	228	\$ 11,635.70	\$ 10,977.12	\$ 14,851.40
Scattered Family Sites		\$ 2,801,292.00	196	\$ 14,292.31	\$ 11,966.30	\$ 16,189.70
Total KCHA		\$ 5,454,232.00	424	\$ 12,863.75	\$ 11,570.63	\$ 15,654.38

Adjusted Income by Household

1. Review of the “Analysis of Income by Development/Program” demonstrates average income falls generally within the Established Income Range (EIR). Applicants to the public housing program have their choice of developments at which they are able to apply. Developments located within Galesburg, IL tend to be the preferred properties at which to apply, as Galesburg is the largest city in the jurisdiction with greater access to supportive services and desirable amenities. Bluebell Tower is located in Abingdon, Illinois, approximately

12 miles from Galesburg, and generally only receives applicants from within the immediate area.

b. Income Targeting

- i. As public housing dwelling units become available for occupancy, responsible PHA employees will offer units to applicants on the waiting list. In accordance with the Quality Housing and Work Responsibility Act of 1998, the PHA encourages occupancy of its developments by a broad range of families with incomes up to eighty percent (80%) of the median income for the jurisdiction in which the PHA operates. Depending on the availability of applicants with proper demographics, at a minimum, 40% of all new admissions to public housing on an annual basis may be families with incomes at or below thirty percent (30%) (extremely low-income) of the area median income. The offer of assistance will be made without discrimination based on race, color, religion, sex, national origin, age, handicap or familial status.
- ii. In order to implement the income targeting program, the following policy is adopted:
- iii. The PHA may select, based on date and time of application and preferences, two (2) families in the extremely low-income category and two (2) families from the lower/very low-income category alternately until the forty percent (40%) admission requirement of extremely low-income families is achieved (2 plus 2 policy).
- iv. After the minimum level is reached, all selections may be made based solely on date, time and preferences. Any applicants passed over as a result of implementing this 2-plus-2 policy will retain their place on the waiting list and will be offered a unit in order of their placement on the waiting list.
- v. To the maximum extent possible, the offers will also be made to affect the PHA's policy of economic de-concentration.
- vi. The PHA reserves the option, at any time, to reduce the targeting requirement for public housing by no more than ten percent (10%), if it increases the target figure for its Section 8 program from the required level of seventy-five percent (75%) of annual new admissions to no more than eighty-five percent (85%) of its annual new admissions. (Optional for PHAs with both Section 8 and Public Housing programs).

4. ELIGIBILITY, SELECTION AND ADMISSION POLICIES

- a. Annual updates to PH Admissions and Continued Occupancy Policy (ACOP) and HCVP Administrative Plan (Admin Plan); added federal and local regulatory requirements. Both documents available at www.knoxcountyhousing.org.
- b. Updates to include compliance with HOTMA Sections 102 and 104, reflecting implementation guidance from PIH 2023-27.

- c. No changes to PH lease, PH House Rules, or other lease addendum.

5. FINANCIAL RESOURCES FOR FYE 03/31/2027

SOURCES		FORECASTED \$	CATEGORY
1.1	PH Operating Fund	\$ 1,666,328.00	PH Operations
1.2	PH Income	\$ 1,126,886.00	PH Operations
1.3	PH Capital Fund 2026	\$ 1,671,192.00	Other
1.4	PH Capital Fund 2025	\$ 1,010,169.00	Other
1.5	PH Capital Fund 2024	\$ 912,543.00	Other
1.9	PH Reserves	\$ 1,973,566.00	Other
1.10	PH Investments	\$ -	
1.11	TOTAL PH RESOURCES	\$ 8,360,684.00	
2.1	HCVP Tenant-Based HAP	\$ 1,058,709.00	HCVP Operations
2.2	HCVP NRP	\$ -	HCVP Operations
2.3	HCVP Admin Fee	\$ 164,180.00	HCVP Operations
2.4	HCVP UNP	\$ -	HCVP Operations
2.5	HCVP HUD-Held Reserve	\$ 55,247.00	HCVP Operations
2.6	HCVP Investments	\$ -	HCVP Operations
2.7	HCVP - EHV - Tenant-Based HAP	\$ 30,400.00	HCVP Operations
2.8	HCVP - EHV - NRP	\$ 500.00	HCVP Operations
2.9	HCVP - EHV - Admin Fee	\$ 7,567.00	HCVP Operations
2.10	HCVP - EHV - UNP	\$ 27,500.00	HCVP Operations
2.11	TOTAL HCVP RESOURCES	\$ 1,344,103.00	
3.1	COCC Reserves	\$ 767,713.00	PH Operations
3.2	TOTAL COCC RESOURCES	\$ 767,713.00	
4.1	State of Illinois	\$ 31,847.00	Homelessness
4.2	City of Galesburg	\$ -	Homelessness
4.3	Knox County 708	\$ -	Homelessness
4.4	GCF - HC	\$ 50,000.00	Homelessness
4.5	Donations/Fundraising	\$ 5,000.00	Homelessness
4.6	TOTAL NON-FEDERAL RESOURCES	\$ 86,847.00	
5.0	TOTAL RESOURCES	\$ 10,559,347.00	

6. PH RENT DETERMINATION

a. Flat Rents

- i. Charged per the following schedule (80% FMR)
- ii. Utility Allowances deducted from FR amounts per:
 1. Notice PIH 2021-27
 2. Notice PIH 2015-13
 3. Notice PIH 2014-12

Location	Unit Size	FFY 2025	FFY 2026	+/-	%
MT	0BR	\$ 478.00	\$ 506.00	\$ 28.00	5.9%
MT	1BR	\$ 486.00	\$ 507.00	\$ 21.00	4.3%
MT	2BR	\$ 645.00	\$ 672.00	\$ 27.00	4.2%
FAM	2BR	\$ 489.00	\$ 498.00	\$ 9.00	1.8%
FAM	3BR	\$ 667.00	\$ 688.00	\$ 21.00	3.1%
FAM	4BR	\$ 656.00	\$ 668.00	\$ 12.00	1.8%
FAM	5BR	\$ 765.00	\$ 787.00	\$ 22.00	2.9%
BB	1BR	\$ 486.00	\$ 505.00	\$ 19.00	3.9%
BB	2BR	\$ 645.00	\$ 670.00	\$ 25.00	3.9%

- b. HCVP Payment Standards
 - i. Agency utilizing 110% of FMR.

Fair Market Rent (FMR) Analysis Tool						
FFY 2026	Efficiency	1-BR	2-BR	3-BR	4-BR	5-BR
FMR	\$ 694.00	\$ 698.00	\$ 916.00	\$ 1,199.00	\$ 1,213.00	\$ 1,394.00
110%	\$ 763.00	\$ 767.00	\$ 1,007.00	\$ 1,318.00	\$ 1,334.00	\$ 1,533.00
100%	\$ 694.00	\$ 698.00	\$ 916.00	\$ 1,199.00	\$ 1,213.00	\$ 1,394.00
90%	\$ 624.00	\$ 628.00	\$ 824.00	\$ 1,079.00	\$ 1,091.00	\$ 1,254.00

Proposed Payment Standard Schedule			
BR	FFY 2025	FFY 2026	+ / -
Efficiency	\$ 718.00	\$ 763.00	\$ 45.00
1-BR	\$ 729.00	\$ 767.00	\$ 38.00
2-BR	\$ 957.00	\$ 1,007.00	\$ 50.00
3-BR	\$ 1,243.00	\$ 1,318.00	\$ 75.00
4-BR	\$ 1,268.00	\$ 1,334.00	\$ 66.00
5-BR	\$ 1,457.00	\$ 1,533.00	\$ 76.00

7. OPERATIONS AND MANAGEMENT

1. See attachment 4.0 for a list of policies and revisions.

8. LIST OF POLICIES/PROCEDURES WITH NO CHANGES/REVISIONS

- a. House Rules
- b. Grievance Procedures
- c. Designated Housing – Elderly/Disabled
- d. Community Service and Self-Sufficiency
- e. Safety and Crime Prevention
- f. Pet/Service/Assistance Animal Policy
- g. Civil Rights Certification (attached to annual plan documents)
- h. Violence Against Women Act (VAWA)

9. FISCAL YEAR AUDIT

- a. Audited FDS submission for FYE 03/31/2025 submitted 12/22/2025.

10.ILLINOIS CARBON MONOXIDE ALARM DETECTOR ACT (PUBLIC ACT 094-0741); CONSOLIDATED APPROPRIATIONS ACT, 2021 (PIH NOTICE 2022-01)

- a. The Knox County Housing Authority remains compliant with the requirements of the Carbon Monoxide (CO) Alarm Detector Act. All 424 public housing units shall carbon monoxide alarm detectors installed within 15 feet of all sleeping areas and on each floor of the unit. Additionally, The HCV Program Manager shall require all units occupied through the Housing Choice Voucher Program to conform to the Carbon Monoxide Alarm Detector Act during Housing Quality Standards inspections. Any units not conforming to the act shall fail its HQS inspection and subsidy is abated until the unit fully complies.
- b. The Consolidated Appropriations Act, 2021, Pub. L. No. 116-260, 134 Stat. 2162 (2020) requires CO alarms or detectors be installed in certain HUD-assisted housing, consistent with the requirements set the International Fire Code (IFC) 2018, within two years of enactment (12/27/2022). To be compliant, the KCHA has installed CO detectors in each bedroom for AMP 002 – Scattered Family Sites. Bedrooms at the other two AMPS – 001 and 003 – are not served by a fossil fuel burning forced air furnace, and as such only require CO detectors within 15 feet of all sleeping rooms. Further, all landlords for the HCV program will be held to the same standards, enforceable through HQS and NSPIRE protocols.



IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 2.0
HUD-50075 Section B.2 – New Activities

1. Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?
 - a. Various Capital Fund grant activities
 - b. Lease space/administer grant for winter warming shelter
2. If any of these activities are planned for the current Fiscal Year, describe the activities.
 - a. Various Capital Fund grant activities
 - i. Fire system modernization
 - ii. Kitchen and bathroom renovations
 - iii. Boiler and generator modernization
 - iv. Concrete/parking lot repair/rehabilitation
 - v. Security camera repair/replacement
 - vi. Unit exteriors and exterior doors
 - vii. Common area renovations
 - viii. Rehabilitation of floors in dwelling units at public housing properties – including removal of asbestos containing material (ACM).
 - b. In partnership with the City of Galesburg, Illinois, the Knox County 708 Mental Health Biard, and the Salvation Army, the Knox County Housing Authority operates a Winter Warming Center at 525/527 Iowa Court, Galesburg, IL. This building is owned by the Knox County Housing Authority.
 - i. The mission of the Warming Center is to save lives, link resources, and encourage dignity through low-barrier access to a warm safe place for those in need. Through this collaborative alliance, we shall provide seasonal, low-barrier, unbiased access to night shelter services regardless of personal barriers to housing security, and provide referrals and connections to additional housing and supportive resources.
 - ii. The KCHA proposes to be involved in the operation of the warming center with a breakdown of roles/responsibilities as follows:
 - City of Galesburg – Funding for staffing and operation expenses
 - Knox County 708 Mental Health Board – funding for shelter operations
 - Salvation Army – Day-to-day operation of the center and direction of employees
 - Knox County Housing Authority – grant recipient (funding disbursement and reimbursement), hiring center staff, project accounting; lessor of 525/527 Iowa Ct.
 - iii. The Warming Shelter will operate daily 24 hours a day, including weekends and holidays. The shelter will offer food service consisting of a minimum of snacks and beverages, though the KCHA is working to secure meal donations. Additionally, there will be a measure of case management involved, as each

client will be subject to an intake process which will afford opportunities to connect to other housing and shelter resources.

- iv. In the event funding for the shelter were to cease, the building at 525/527 could be easily returned to the PH inventory and operate as additional units of public housing.
- v. Funding to operate the shelter is provided entirely from external sources.

External funding sources potentially include:

- Grants from HUD, State of Illinois, and the City of Galesburg
- Knox County 708 Mental Health Board funding
- Galesburg Community Foundation
- Fundraising



IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 3.0

HUD-50075-HP Section B.3 – MISSION, GOALS, AND OBJECTIVES

1. **KCHA MISSION STATEMENT:** The Knox County Housing Authority is a dynamic force in our community, providing high-quality affordable housing opportunities for individuals and families, while promoting self-sufficiency, empowerment, and a sense of community development. Further, we will partner with other agencies to implement programs and services designed to help our families thrive.

2. **GOALS AND OBJECTIVES (FYE 03/31/2025 PROJECTED)**

- a. **To improve the quality of authority-owned assisted housing.**

- i. Commitment to providing quality housing units that are decent, safe, sanitary, and accessible.
 - ii. Maintenance program: timely and efficient unit turns

SITE	DEVELOPMENT	URNS	DOWN	MAINT.	LEASE	EXEMPT	TOTAL	AVG.
Moon Towers	IL085000001	51	124	521	215	83	777	15.34
Family Sites	IL085000002	69	99	1392	227	816	901	13.00
Bluebell Tower	IL085000003	17	56	188	137	48	333	19.23
TOTAL PH		137	279	2101	579	947	2012	14.65

1. Average Unit Turn Time:

- a. IL085000001: 15.34 days
 - b. IL085000002: 13.00 days
 - c. IL085000003: 19.23 days

2. Exempt days due to rehabilitation/modernization work (HUD approved)

- iii. Maintenance program: timely and efficient work order completion

SITE	DEVELOPMENT	NON-EMERGENCY (ROUTINE)			EMERGENCY		
		#	DAYS	AVG	#	# < 24	%
Moon Towers	IL085000001	723	2399	3.32	121	121	100.0%
Family Sites	IL085000002	1187	3071	2.59	155	155	100.0%
Bluebell Tower	IL085000003	160	249	1.56	33	33	100.0%
TOTAL PH		2069	5719	2.76	309	309	100.0%

1. EMERGENCY WO

- a. 123 emergency work orders completed (through 12/2025)
 - b. Percentage repaired/closed within 24 hours:
 - i. IL085000001: 100.0%
 - ii. IL085000002: 100.0%
 - iii. IL085000003: 100.0%

2. NON-EMERGENCY WO

- a. 2,069 routine work orders completed (through 12/2025)

- b. Average days to complete/close:
 - i. IL085000001: 3.32 days
 - ii. IL085000002: 2.59 days
 - iii. IL085000003: 1.56 days
- iv. Quality workmanship on every maintenance task
- v. Grounds kept clean and safe from hazard
- vi. Security of property remains a priority through partnership with committed residents and local police departments
 - 1. Dedicated housing officer – Galesburg Police Department
 - 2. Direct resource on all matters of public safety
 - 3. Dedicated patrols and targeted operations
 - 4. Weekly reporting of criminal activity on sites
- vii. CFP grant funds used to modernize apartments at all three PH AMPs to upgrade accessibility features
- viii. Maintain occupancy rate of 98.0% or higher for PH program

SITE	DEVELOPMENT	UNIT DAYS LEASED (UDL)			UNIT MONTHS LEASED (UML)		
		UDA	UDL	%	UMA	UML	%
Moon Towers	IL085000001	84016	83177	99.0%	2832	2832	100.0%
Family Sites	IL085000002	93035	91637	98.5%	3136	3136	100.0%
Bluebell Tower	IL085000003	24208	23881	98.7%	816	816	100.0%
TOTAL PH		201259	198696	98.7%	6784	6784	100.0%

- 1. Reported occupancy Rates by FYE for the previous Annual Plan period:
 - a. Unit-days leased (UDL):
 - i. IL085000001: 99.0%
 - ii. IL085000002: 98.5%
 - iii. IL085000003: 98.7%
 - b. Unit-months leased (UML) (as of the first of each month):
 - i. IL085000001: 100.0%
 - ii. IL085000002: 100.0%
 - iii. IL085000003: 100.0%
- ix. Use of Capital Grant Funds to modernize and rehabilitate the developments prioritized by the green physical needs assessment conducted in 2014.
 - 1. Planned capital fund expenditures for FYE 03/31/2027:
 - a. Masonry restoration and stabilization
 - b. Water heaters/water softeners at high rise buildings
 - c. Garage heaters
 - d. CCTV system updates
 - e. Landscaping, tree trimming & removal
 - f. Site signage refresh
 - g. Rehabilitation of floors – including removal of asbestos containing material (ACM).

- x. Maintain status of “High Performer” in recognition of effective program operations and management

1. PHAS Scores by FYE for the previous Annual Plan period (current FYE anticipated):

FYE	DESIGNATION	SCORE
FYE 03/31/2021	High Performer	95.00
FYE 03/31/2022	High Performer	95.00
FYE 03/31/2023	High Performer	99.00
FYE 03/31/2024	High Performer	96.00
FYE 03/31/2025	High Performer	95.00
PH - AVG.		96.00

b. To improve the quality of assisted housing in the private sector.

- i. Enhancing the voucher program to support and grow the number of families served
- ii. Work with jurisdiction to improve access and availability of affordable housing.
 - 1. Partner with stakeholders to educate landlords on programs rules and benefits, including Source of Income protections for Illinois renters.
 - a. Stakeholders include:
 - i. Applicants and participants of the housing choice voucher program
 - ii. City of Galesburg
 - iii. Knox County, IL
 - iv. Department of Housing and Urban Development
 - v. Illinois Department of Human Rights
- iii. Make adequate use of available reserves – net-restricted position (NRP) and HUD-held reserves (HHR).
 - 1. Anticipated NRP CY 2026: \$0.00
 - 2. Anticipated HHR CY 2026: \$55,247
- iv. Effective management of administrative resources to reduce agency cost per voucher, thus ensuring agency reserves can be efficiently utilized
 - 1. Unrestricted-net position (UNP) has dwindled on an annual basis. The cost of running the program exceeds the funding received for administrative fees.
 - 2. Agency was projected as a “gainer” agency based on administrative fee study designed to assess actual cost of voucher administration and redistribute the funds accordingly.
 - 3. HUD proration of congressionally appropriated funds continues to fund admin fees at inadequate levels
- v. Maintain utilization rate of 98.0% or higher allocated HAP funding

CYE	ACC UM	UML	%	BUDGET AUTH + NRP	HAP EXPENDITURE	%
CYE 12/31/2021	3360	2412	71.79%	\$ 932,411.00	\$ 936,090.00	100.39%
CYE 12/31/2022	3420	2382	69.65%	\$ 957,339.00	\$ 904,391.00	94.47%
CYE 12/31/2023	3420	2499	73.07%	\$ 924,792.00	\$ 1,030,462.00	111.43%
CYE 12/31/2024	3420	2469	72.19%	\$ 983,112.00	\$ 1,033,641.00	105.14%
CYE 12/31/2025	3420	2370	69.30%	\$ 1,119,492.00	\$ 1,068,428.73	95.44%
HCVP 5YR TOTAL	17040	12132	71.20%	\$ 4,917,146.00	\$ 4,973,012.73	101.14%

1. Utilization Rates by CYE for the previous Annual Plan period:
 - a. ACC Units: 69.30%
 - b. Budget Authority: 95.44% (anticipated)
- vi. Maintain status of “High Performer” in recognition of effective program operations and management

1. SEMAP Scores by FYE for the previous Annual Plan period:

FYE	DESIGNATION	SCORE
FYE 03/31/2021	High Performer	100.00
FYE 03/31/2022	High Performer	100.00
FYE 03/31/2023	High Performer	77.00
FYE 03/31/2024	Standard Performer	100.00
FYE 03/31/2025	High Performer	100.00
PH - AVG.	High Performer	95.40

c. To expand/maintain the supply of assisted housing.

- i. Public Housing Program
 1. Faircloth limits for public housing units in Knox County, IL is 438.
 2. Availability of public housing units for previous Annual Plan period:
 - a. FYE 03/31/2025: 424 units
 - b. FYE 03/31/2026: 424 units
- ii. Housing Choice Voucher Program
 1. ACC units budgeted at 285 (3420 unit months)
 - a. Previous ACC set at 280 (2260)
 - b. Five (5) baseline vouchers added, effective 10/01/2022 (PIH Notice 2022-29)
 2. Goal has been utilization of allocated dollars as opposed to reaching ACC unit baseline, which isn’t economically viable. Agency baseline expectation is approximately 200 vouchers leased per month (2,400 UML).
 - a. Anticipated leasing CY 2025: 205 vouchers leased per month (2,460 UML)
 - b. Leasing goal CY 2026: 210 vouchers leased per month (2,520 UML)
 3. Voucher activity analysis for Annual Plan period FYE 03/31/2025:
 - a. Voucher activity generally decreased for total period due to funding concerns throughout CY2025.
 - b. EHV program sunset and transition planned for CY 2026.
 - c. Payment standard maintained at 110% of area FMRs to remain in place for CYE 2026.
 - d. Portability
 - i. Steady number of port-outs over Annual Plan period
 - ii. Port-in activity remains low
- iii. Affordable Housing Preservation
 1. PHA owns and operates two AHP developments
 - a. Brentwood Manor
 - i. 72 units
 - ii. 1-BR, 2-BR, and 3-BR units available

- iii. Affordable rents
- b. Prairieland Townhouse Apartments
 - i. 66 units
 - ii. 1-BR, 2-BR, and 3-BR units available
 - iii. Affordable rents
 - iv. 13 project-based vouchers

d. General and operational objectives.

- i. Administer all programs in accordance with applicable federal, state, and local laws and regulations

- 1. Independent Auditor annually reviews agency financials and program compliance.

An “unmodified” opinion is the opinion where auditor expresses an opinion that financial statements and major program controls are presented, in all material respects, in accordance with applicable reporting and compliance framework.

Independent audit results for previous Annual Plan periods:

FYE	DESIGNATION	FINDINGS
FYE 03/31/2021	Unmodified	0
FYE 03/31/2022	Unmodified	0
FYE 03/31/2023	Unmodified	0
FYE 03/31/2024	Unmodified	0
FYE 03/31/2025	Unmodified	0
PH - AVG.		0

- ii. Fair Housing and Equal Opportunity

- 1. Administer all programs in accordance with applicable federal, state, and local laws and regulations

- 2. Ensure the protection of housing opportunity for persons in the following protected classes:

- a. Federally protected classes:

- i. Race
- ii. Religion
- iii. National Origin
- iv. Color
- v. Familial Status
- vi. Sex
- vii. Disability

- b. State of Illinois additional protected classes:

- i. Sexual Harassment
- ii. Ancestry
- iii. Age (Over 40)
- iv. Pregnancy
- v. Arrest Record
- vi. Military Status
- vii. Source of Income

3. Ensure equal opportunity and affirmatively further fair housing through the implementation of the following objectives:
 - a. Carry out affirmative measures to ensure access to assisted housing regardless of race, religion, national origin, sexual orientation, familial status, or disability
 - 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
 - c. Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required
 - d. The agency will work to take the steps necessary to fully assess and implement the requirements set forth at 24 CFR § 5 Subpart A to:
 - i. Improve integrated living patterns and overcoming historic patterns of segregation;
 - ii. Reduce racial and ethnic concentrations of poverty;
 - iii. Reduce disparities by race, color, religion, sex, familial status, national origin, or disability in access to community assets such as education, transit access, and employment, as well as exposure to environmental health hazards and other stressors that harm a person's quality of life; and
 - iv. Respond to disproportionate housing needs by protected class
 - e. Analysis of waiting lists and participant lists to ensure demographics in the jurisdiction are adequately served
 - i. Use of census data to determine demographic representation
 - ii. Monitor agency 50058 reports to record and monitor demographic participation
 - f. Engage in targeted outreach for underserved populations
 - i. Newspaper advertisement
 - ii. Social media presence
 - iii. Community outreach
 - iv. Focus groups
 - g. Application process accessible
 - i. Website availability
 - ii. Accept applications in person, via mail, email, fax
 - iii. Accessibility to other formats available
 - iv. Application assistance available
 - v. Compliant applicant pulls from all waiting lists
 - h. Interview accessibility
 - i. LEP Plan
 - ii. LEP options available for secondary languages spoken in area
 1. Spanish
 2. French
 - i. Work done to identify and rectify impediments to fair housing
 - j. Reasonable accommodation and modification requests responded to promptly
 - k. Fair and consistent application of agency policy

I. Staff training, development, and accountability

iii. The Violence Against Women Act

1. The passage of VAWA in 1994 and its reauthorization in 2000, 2005, 2013, and 2022 has changed the landscape for victims who once suffered in silence. Victims of domestic violence, dating violence, sexual assault and stalking have been able to access housing, and the Knox County Housing Authority will work to reduce the barriers to housing that domestic violence, dating violence, sexual assault and stalking may present.
 2. The Knox County Housing Authority will promote and abide by the requirements of the VIOLENCE AGAINST WOMEN'S ACT (VAWA) and subsequent reauthorizations which applies for all victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation. The 2022 reauthorization provides enhanced protections and options for victims of domestic violence, dating violence, sexual assault, and stalking, as well as additional monitoring and enforcement mechanisms at the Department level.
 3. The Housing Authority will support, assist, and ensure applicable due process to victims of domestic violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual orientation to prevent them from losing their HUD-assisted housing or being denied housing assistance as a consequence of the abuse of which they were the victim.
 - a. Notification of occupancy rights under VAWA to all applicants and participants
 - b. Consideration of VAWA provisions during the application process
 - c. Application preference for victims of domestic violence, dating violence, sexual assault, or stalking
 - d. Work with in-place victim families to consider transfer options when necessary
 - e. Partner with local law enforcement agencies, legal aide, and shelters on referrals to provide information on counseling, shelter services, and legal assistance
 4. The Housing Authority maintains an emergency transfer plan and adheres to HUD requirements regarding VAWA pertaining to the public housing and housing choice voucher programs.
 - a. Policy reference:
 - i. Public Housing Admissions and Continued Occupancy Policy (ACOP)
 - ii. Housing Choice Voucher Program Administrative Plan
- iv. Connect families with area resources to increase the percentage of employed persons in assisted families
- a. Job Readiness (applications, resumes, interviewing)
 - b. Job Fairs
 - c. Furthering Education
 - d. Scholarships
 - e. Money Management
- v. Develop and maintain positive and professional public awareness of the Knox County Housing Authority to the community

1. Press releases on pertinent agency business and activities
 2. Regular communication with media outlets – interviews, commentary
 3. Speaking engagements
- vi. Professional and knowledgeable staff
1. Training in areas pertinent to compliance, operations, ethics, and performance of duty
 2. Executive Director and Assistant Director completed Executive Director Education Program through Rutgers University – 2019
 3. Training opportunities offered
 - a. Weekly include HUD guidance, online webinars
 - b. Monthly include webinars, onsite, or travel
 4. Training topics engaged by agency staff
 - a. Regulation updates
 - b. Streamlining
 - c. HOTMA
 - d. Fair Housing
 - e. Occupancy
 - f. Maintenance work standards
 - g. Systems – PIC/EIV
 - h. Financial reporting
 - i. Board governance



IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 4.0
HUD-50075 Section C.1 – Policy and Program Revisions

1. Revisions to Policies and Programs
 - a. Each listed document available at www.knoxcountyhousing.org or upon request
 - b. New/Revised Policies:
 - i. Public Housing
 1. None for FYE 2027. Will revise as necessary/required.
 - ii. Housing Choice Voucher Program
 1. Administrative Plan (Admin Plan)
 - a. EHV Program Sunset – transition for current voucher holders (preferences)
 - c. Documents posted for review at www.knoxcountyhousing.org
 - d. Public Hearing/Resident Advisory Board (RAB) held 12/17/2025
 - i. Resident Advisory Board
 1. 22 residents in attendance
 2. Minutes/comments attached to submission (ATTACHMENT 5)
 - ii. Public Hearing
 1. Zero (0) general public attendees
 2. Zero (0) general public comments received
 - iii. Policies and plan submission approved by Board of Commissioners 12/30/2025 in conjunction with certification of consistency with State Consolidated Plan (IHDA).



IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 5.0

HUD-50075 Section C.3 – Resident Advisory Board Comments

1. Resident Advisory Board Meeting

- a. 12/17/2025
 - i. Review of proposed lease/policy changes
 - ii. Review of Capital Improvements planned
- b. Minutes of the Resident Advisory Board Meeting (attached)
- c. Comments received and considered:

Comment: *General comments regarding tenant requests for future capital projects.*

- Install cameras on each floor at Blue Bell Towers

Agency Response: All tenant requests for capital improvements will be considered by priority. CCTV surveillance cameras are an ongoing, annual operational and capital expense consideration.

2. Public Hearing

- a. 12/17/2025
 - i. Review of proposed lease/policy changes
 - ii. Review of Capital Improvements planned
- b. Minutes of the Public Hearing
 - i. No general public in attendance
 - ii. No minutes/notes
- c. Comments received and considered:

NONE RECEIVED

**MINUTES OF THE SPECIAL MEETING
OF THE RESIDENT ADVISORY BOARD
OF THE KNOX COUNTY HOUSING AUTHORITY
December 17, 2025**

The meeting of the Resident Advisory Board of the Knox County Housing Authority was held at 11:30 a.m. in the Moon Towers Community Room. The following persons attended the meeting:

PRESENT: Dena Simkins, Moon Towers
 Dee Hitz, Blue Bell Tower
 Lisa Johnson, Blue Bell Tower
 Georgia Stevenson, Blue Bell Tower
 Jean Norton, Moon Towers
 Gerrie, Blue Bell Tower
 Pam Minzghor, Blue Bell Tower
 Brenda Sanchez, Blue Bell Tower
 Darrin Shugert, Blue Bell Tower
 Javona Johnson, HCV Participant
 LaMonda Rushing, Cedar Creek Place
 Christy Pendergrass, Cedar Creek Place
 Billy Polillo, Moon Towers
 Judy Cone, Moon Towers
 Schelia Ayers, Moon Towers
 Denise Basley, Moon Towers
 Joseph W., Moon Towers
 Felicia Smith, Woodland Bend

ALSO PRESENT: Derek Antoine, Executive Director
 Cheryl Lefler, Assistant Director
 Brandi Watkins, Property Manager-Moon Towers
 Lynnesha Revis, Occupancy Specialist-Moon Towers
 Ashley Larimer, Property Manager-Family Sites
 Kim Longenecker, HCV Program Manager
 Kim Brannon-Sibley, Participant Engagement Manager
 Caleb Diefendorf, Public Housing Facilities Manager
 Josh Sturgeon, Safety & Security Manager
 Bailey Jackson, Mental Health Resource Manager

The meeting opened with introductions as each attendee gave their name, where they live and their favorite Christmas movie or holiday snack.

Ms. Lefler welcomed everyone to the meeting and explained that the purpose of the meeting was to review proposed policy changes. Additionally, Capital Fund Program projects in the annual and five-year plans would be reviewed. Ms. Lefler said there would be an opportunity for comment and discussion.

Then, Mr. Antoine said that there will not be any changes to the Public Housing Dwelling Lease. There will, however, be one change to the HCV Admin Plan relative to preference points given for Emergency Housing Voucher holders. The agency personnel policy will have changes related to changes in Illinois state employment law.

Then, Ms. Lefler referenced the 2025 plan and five-year plan for the Capital Fund Program (2026-2030) for the public housing program. She highlighted the current elevator project that is underway as well as the Moon Towers Masonry Restoration Project that will be going out for bid soon. Both projects are in currently open CFP grants. The five-year plan is a comprehensive list of projects that the agency would like to complete if adequate funding is available. A draft copy of this plan was distributed to those present at the meeting.

Then, Ms. Lefler asked attendees for their input on what should be included on a "wish list" of projects (some of which are already included in the 5-year plan). The following was suggested from the group discussion:

- Install cameras on each floor at Blue Bell Tower.

The proposed policies and plans have been posted for review and comment and will be approved by the Board of Commissioners at its 12/30/2025 meeting. Then the changes will be sent to HUD with the agency's annual plan in January.

Other issues included in the discussion were the following topics and questions:

- Pets and emotional support animals;
- Calls to and response from police;
- Banned persons;
- Staffing hours at Blue Bell Tower;
- Snow plowing policy;
- Noise/music complaints; and
- Garbage outside dwelling units.

Attendees were thanked for their attendance and participation in the meeting.

Hearing no further discussion, the meeting was adjourned at 1:30 p.m.

Respectfully submitted,

Cheryl Lefler
Assistant Director



**IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 6.0
HUD-50075 Section D.1 – Capital Improvements**

1. See HUD Forms 50075.1 and 50075.2 approved by HUD for open CFP Grants (attached)
 - a. Open Annual Grants
 - i. IL01P08550123
 - ii. IL01P08550124
 - iii. IL01P08550125
 - b. Five-Year Plan
 - i. Action Plan for CY2026 through CY2030
 1. Original submission 12/30/2025 (anticipated)
 2. Approval: January 2026 (anticipated)
 3. Modifications/Revisions
 - a. None
2. This reference statement is intended to mean that the 50075.2 describes the capital improvements necessary to ensure long-term physical and social viability of the projects as prioritized in the 2014 green physical needs assessment (GPNA).
3. IL085 Five Year Action Plan 2021-2025 expires 12/31/2025.

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: FFY of Grant Approval:	
Type of Grant <div><input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (Revision No: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report</div>					
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	\$250,000.00	\$250,000.00		
3	1408 Management Improvement				
4	1410 Administration	\$100,000.00	\$100,000.00		
5	1480 General Capital Activity	\$1,164,974.00	\$1,169,740.00		
6	1492 MovingToWorkDemonstration				
7	1501 Collater Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

(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 include here

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: FFY of Grant Approval:	
Type of Grant <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (Revision No: 2) </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report </div>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	\$1,514,974.00	\$1,519,740.00		

(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 include here

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: FFY of Grant Approval:	
Type of Grant <div><input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (Revision No: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report</div>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director /S/ MGQ858 Date 02/14/2025	Signature of Public Housing Director Date
--	---

(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 include here

Part II: Supporting Pages								
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000003 - BLUE BELL TOWER	Blue Bell elevator pistons (Non-Dwelling Interior (1480)) Description : Replacement of elevator pistons at Blue Bell Tower	1480			\$22,188.98			
Not associated with any specific development	Administration (Administration (1410)) Description : COCC Administration	1410		\$100,000.00	\$100,000.00			
IL085000001 - MOON TOWERS	Operations (Operations (1406)) Description : Moon Towers Operations	1406		\$100,000.00	\$100,000.00			

(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:		Grant Type and Number				Federal FFY of Grant:		
Knox County Housing Authority		Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000002 - FAMILY HOUSING	Operations (Operations (1406)) Description : Family Sites Operations	1406		\$120,000.00	\$120,000.00			
IL085000003 - BLUE BELL TOWER	Operations (Operations (1406)) Description : Bluebell Tower Operations	1406		\$30,000.00	\$30,000.00			
IL085000001 - MOON TOWERS	A&E Services (Contract Administration (1480)) Description : Moon Towers Architect and Engineering Services	1480		\$15,000.00	\$8,750.00			

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000002 - FAMILY HOUSING	A&E Services (Contract Administration (1480)) Description : Family Sites Architect and Engineering Services	1480		\$50,000.00	\$3,500.00			
IL085000003 - BLUE BELL TOWER	A&E Services (Contract Administration (1480)) Description : Bluebell Tower Architect and Engineering Services	1480		\$10,000.00	\$8,750.00			
IL085000002 - FAMILY HOUSING	Furnaces (Dwelling Unit-Interior (1480)) Description : Furnace replacement at 190 units	1480		\$475,000.00	\$1,126,551.02			

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Fire Suppression System (Non-Dwelling Construction - Mechanical (1480)) Description : Upgrade fire suppression system at Moon Towers	1480		\$100,000.00				
IL085000003 - BLUE BELL TOWER	Fire Suppression System (Non-Dwelling Construction - Mechanical (1480)) Description : Upgrade fire suppression system at Bluebell Tower	1480		\$50,000.00				
IL085000002 - FAMILY HOUSING	Unit Exteriors (Dwelling Unit-Exterior (1480)) Description : Replace vinyl siding, clean and reseal brick veneer, tuckpointing, replace fascia, gutters and downspouts	1480		\$65,000.00				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Bathroom Renovations (Dwelling Unit-Interior (1480)) Description : Bathroom renovations at Moon Towers	1480		\$65,000.00				
IL085000003 - BLUE BELL TOWER	Bathroom Renovations (Dwelling Unit-Interior (1480)) Description : Bathroom Renovations at Bluebell Tower	1480		\$50,000.00				
IL085000002 - FAMILY HOUSING	Bathroom and Kitchen Renovations (Dwelling Unit-Interior (1480)) Description : Bathroom and Kitchen Renovations at Family Sites	1480		\$103,974.00				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000003 - BLUE BELL TOWER	Boiler Replacement (Non-Dwelling Interior (1480)) Description : Replacement of two boilers at Bluebell Tower	1480		\$60,000.00				
IL085000001 - MOON TOWERS	Generator (Non-Dwelling Interior (1480),Non-Dwelling Exterior (1480)) Description : Replacement of generator at Moon Towers	1480		\$40,000.00				
IL085000001 - MOON TOWERS	Concrete work (Non-Dwelling Site Work (1480)) Description : Concrete work at Moon Towers	1480		\$10,000.00				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000002 - FAMILY HOUSING	Concrete work (Non-Dwelling Site Work (1480)) Description : Concrete work at Family Sites	1480		\$20,000.00				
IL085000003 - BLUE BELL TOWER	Concrete work (Non-Dwelling Site Work (1480)) Description : Concrete work at Bluebell Tower	1480		\$10,000.00				
IL085000003 - BLUE BELL TOWER	Asphalt driveway (Non-Dwelling Site Work (1480)) Description : Mill, resurface, seal asphalt driveway at Bluebell Tower	1480		\$11,000.00				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550123 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Parking Lot (Dwelling Unit-Site Work (1480)) Description : Mill, resurface, seal asphalt parking lots at Moon Towers	1480		\$30,000.00				
	Total:			\$1,514,974.00	\$1,519,740.00			

(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 Financing Program					
PHA Name: Knox County Housing Authority					Federal FFY of Grant:
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 Expenditure End Date	Actual Expenditure End Date	

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: FFY of Grant Approval:	
Type of Grant <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (Revision No: 1) </div> <div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report </div>					
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	\$250,000.00	\$250,000.00		
3	1408 Management Improvement				
4	1410 Administration	\$100,000.00	\$100,000.00		
5	1480 General Capital Activity	\$1,207,030.00	\$1,207,030.00		
6	1492 MovingToWorkDemonstration				
7	1501 Collater Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

(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 include here

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: FFY of Grant Approval:	
Type of Grant <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input type="checkbox"/> Original Annual Statement </div> <div style="width: 45%;"> <input type="checkbox"/> Reserve for Disasters/Emergencies </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 5px;"> <div style="width: 45%;"> <input type="checkbox"/> Performance and Evaluation Report for Period Ending: </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Revised Annual Statement (Revision No: 1) </div> </div> <div style="display: flex; justify-content: space-between; align-items: flex-start; margin-top: 5px;"> <div style="width: 45%;"> <input type="checkbox"/> Performance and Evaluation Report for Period Ending: </div> <div style="width: 45%;"> <input type="checkbox"/> Final Performance and Evaluation Report </div> </div>					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	\$1,557,030.00	\$1,557,030.00		

(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 include here

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: 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: 1) <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
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director /S/ MGQ858 Date 02/14/2025	Signature of Public Housing Director Date
--	---

(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 include here

Part II: Supporting Pages								
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Moon Towers elevator cabs (Non-Dwelling Interior (1480)) Description : Renovations to elevator cabs at Moon Towers	1480			\$283,811.02			
IL085000001 - MOON TOWERS	Moon Towers masonry/structural work (Non-Dwelling Exterior (1480)) Description : Masonry/structural work at Moon Towers	1480		\$1,117,030.00	\$833,218.98			
Not associated with any specific development	Administration (Administration (1410)) Description : COCC Administration	1410		\$100,000.00	\$100,000.00			

(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:		Grant Type and Number				Federal FFY of Grant:		
Knox County Housing Authority		Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. CFFP(Yes/No):						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Operations (Operations (1406)) Description : Moon Towers Operations	1406		\$100,000.00	\$100,000.00			
IL085000002 - FAMILY HOUSING	Operations (Operations (1406)) Description : Family Sites Operations	1406		\$120,000.00	\$120,000.00			
IL085000003 - BLUE BELL TOWER	Operations (Operations (1406)) Description : Bluebell Tower Operations	1406		\$30,000.00	\$30,000.00			

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	A&E Services (Contract Administration (1480)) Description : Moon Towers Architect and Engineering Services	1480		\$50,000.00	\$50,000.00			
IL085000002 - FAMILY HOUSING	A&E Services (Contract Administration (1480)) Description : Family Sites Architect and Engineering Services	1480		\$15,000.00	\$15,000.00			
IL085000003 - BLUE BELL TOWER	A&E Services (Contract Administration (1480)) Description : Bluebell Tower Architect and Engineering Services	1480		\$25,000.00	\$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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550124 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
	Total:			\$1,557,030.00	\$1,557,030.00			

(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 Financing Program					
PHA Name: Knox County Housing Authority					Federal FFY of Grant:
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 Expenditure End Date	Actual Expenditure End Date	

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: 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
1	Total non-CFP Funds				
2	1406 Operations	\$393,707.75			
3	1408 Management Improvement				
4	1410 Administration	\$157,483.10			
5	1480 General Capital Activity	\$1,023,640.15			
6	1492 MovingToWorkDemonstration				
7	1501 Collater Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

(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 include here

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: 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
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	\$1,574,831.00			

(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 include here

Part I: Summary					
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: 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
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director /S/ MGQ858 Date 08/12/2025	Signature of Public Housing Director Date
--	---

(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 include here

Part II: Supporting Pages								
PHA Name: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Moon Towers Masonry/Structural work (Non-Dwelling Exterior (1480)) Description : Masonry/structural work at Moon Towers	1480		\$38,640.15				
IL085000001 - MOON TOWERS	Moon Towers generator (Non-Dwelling Construction - Mechanical (1480)) Description : Replacement of generator at Moon Towers	1480		\$60,000.00				
IL085000002 - FAMILY HOUSING	Storm Door Replacment (Dwelling Unit- Exterior (1480)) Description : Replacement of storm doors at Family Sites	1480		\$370,000.00				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000002 - FAMILY HOUSING	Mailboxes & Unit Numbers (Dwelling Unit- Exterior (1480)) Description : Replacement of mailboxes and unit numbers at Family Sites	1480		\$30,000.00				
IL085000001 - MOON TOWERS	Boiler Replacement (Non-Dwelling Construction - Mechanical (1480)) Description : Boiler replacement at Blue Bell Tower	1480		\$100,000.00				
Not associated with any specific development	Administration (Administration (1410)) Description : COCC Administration	1410		\$157,483.10				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Operations (Operations (1406)) Description : Moon Towers Operations	1406		\$165,357.26				
IL085000002 - FAMILY HOUSING	Operations (Operations (1406)) Description : Family Sites Operations	1406		\$181,105.56				
IL085000003 - BLUE BELL TOWER	Operations (Operations (1406)) Description : Bluebell Tower Operations	1406		\$47,244.93				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	A&E Services (Contract Administration (1480)) Description : Moon Towers Architect and Engineering Services	1480		\$110,000.00				
IL085000002 - FAMILY HOUSING	A&E Services (Contract Administration (1480)) Description : Family Sites Architect and Engineering Services	1480		\$50,000.00				
IL085000003 - BLUE BELL TOWER	A&E Services (Contract Administration (1480)) Description : Bluebell Tower Architect and Engineering Services	1480		\$15,000.00				

(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: Knox County Housing Authority		Grant Type and Number Capital Fund Program Grant No. IL01P08550125 Replacement Housing Factor Grant No. CFFP(Yes/No):				Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost ⁽²⁾		Status of Work
				Original	Revised ⁽¹⁾	Funds Obligated	Funds Expended	
IL085000001 - MOON TOWERS	Flooring Replacement (Non-Dwelling Interior (1480)) Description : Installation of new flooring at Moon Towers (in common areas)	1480		\$250,000.00				
	Total:			\$1,574,831.00				

(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 Financing Program					
PHA Name: Knox County Housing Authority					Federal FFY of Grant:
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 Expenditure End Date	Actual Expenditure End Date	

(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

Status: Draft

Approval Date:

Approved By:

Part I: Summary						
PHA Name : Knox County Housing Authority		Locality (City/County & State)				
PHA Number: IL085		<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revised 5-Year Plan (Revision No:)				
A.	Development Number and Name	Work Statement for Year 1 2026	Work Statement for Year 2 2027	Work Statement for Year 3 2028	Work Statement for Year 4 2029	Work Statement for Year 5 2030
	AUTHORITY-WIDE	\$157,483.00	\$157,483.00	\$157,483.00	\$157,483.00	\$157,483.00
	MOON TOWERS (IL085000001)	\$1,012,000.00	\$749,321.00	\$486,000.00	\$421,000.00	\$291,000.00
	FAMILY HOUSING (IL085000002)	\$276,000.00	\$616,000.00	\$779,321.00	\$864,321.00	\$694,321.00
	BLUE BELL TOWER (IL085000003)	\$129,348.00	\$52,027.00	\$152,027.00	\$132,027.00	\$432,027.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 1 2026				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	AUTHORITY-WIDE (NAWASD)			\$157,483.00
ID0000178	Administration(Administration (1410)-Salaries)	COCC-Administration		\$157,483.00
	MOON TOWERS (IL085000001)			\$1,012,000.00
ID0000179	Operations(Operations (1406))	Moon Towers Operations		\$161,000.00
ID0000182	Masonry Project(Dwelling Unit-Exterior (1480)-Other,Dwelling Unit-Exterior (1480)-Tuck-Pointing)	Masonry work including brick replacement, lintel work, tuckpointing		\$150,000.00
ID0000183	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E Services for Moon Towers		\$70,000.00
ID0000186	Flooring Replacement Project(Non-Dwelling Interior (1480)-Common Area Flooring,Non-Dwelling Interior (1480)-Common Area Painting,Non-Dwelling Interior (1480)-Other)	Asbestos abatement with flooring removal, flooring & base installation, and hallway painting		\$470,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 1 2026				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000187	Hot water heaters/Water softener(Non-Dwelling Construction - Mechanical (1480)-Other,Non-Dwelling Construction - Mechanical (1480)-Water Distribution,Non-Dwelling Construction - Mechanical (1480)-Hot Water Heaters)	Replace hot water heaters and water softener at Moon Towers and COCC		\$82,000.00
ID0000189	Garage heaters(Non-Dwelling Construction - Mechanical (1480)-Heating Equipment - System,Non-Dwelling Construction - Mechanical (1480)-Other)	Installation of new garage heaters at Moon Towers		\$11,000.00
ID0000192	DVR & Camera Replacement(Management Improvement (1408)-Security Improvements (not police or guard-non-physical),Management Improvement (1408)-System Improvements,Management Improvement (1408)-Other)	Replacement of DVRs and cameras at Moon Towers		\$34,000.00
ID0000195	Tree work & landscaping(Non-Dwelling Site Work (1480)-Landscape)	Tree trimming & removal and landscaping at Moon Towers		\$25,000.00
ID0000198	Site signage repair(Non-Dwelling Site Work (1480)-Signage)	Repairs to Moon Towers signs		\$9,000.00
	FAMILY HOUSING (IL085000002)			\$276,000.00
ID0000180	Operations(Operations (1406))	Family Sites Operations		\$181,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 1 2026				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000184	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E Services for Family Sites		\$20,000.00
ID0000190	Garage heaters(Non-Dwelling Construction - Mechanical (1480)-Heating Equipment - System,Non-Dwelling Construction - Mechanical (1480)-Other)	Install new garage heaters at Family Sites		\$7,000.00
ID0000193	DVR & Camera Replacement(Management Improvement (1408)-Other,Management Improvement (1408)-Security Improvements (not police or guard-non-physical),Management Improvement (1408)-System Improvements)	Replacement of DVRs and cameras at Family Sites		\$34,000.00
ID0000196	Tree work & landscaping(Non-Dwelling Site Work (1480)-Landscape)	Tree trimming & removal and landscaping at Family Sites		\$25,000.00
ID0000199	Site signage repair(Non-Dwelling Site Work (1480)-Signage)	Repairs of signs at Family Sites		\$9,000.00
	BLUE BELL TOWER (IL085000003)			\$129,348.00
ID0000181	Operations(Operations (1406))	Blue Bell Tower Operations		\$42,027.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 1 2026				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000185	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E Services for Blue Bell Tower		\$10,000.00
ID0000188	Hot water heaters, hot water tank, water softener(Non-Dwelling Construction - Mechanical (1480)-Hot Water Heaters,Non-Dwelling Construction - Mechanical (1480)-Other,Non-Dwelling Construction - Mechanical (1480)-Water Distribution)	Replacement of hot water heaters, hot water tank and water softener at Blue Bell Tower		\$60,000.00
ID0000191	Garage heaters(Non-Dwelling Construction - Mechanical (1480)-Heating Equipment - System,Non-Dwelling Construction - Mechanical (1480)-Other)	Install new garage heater at Blue Bell Tower		\$2,000.00
ID0000194	DVR & Camera Replacement(Management Improvement (1408)-Security Improvements (not police or guard-non-physical),Management Improvement (1408)-System Improvements,Management Improvement (1408)-Other)	Replacement of DVRs and cameras at Blue Bell Tower		\$7,000.00
ID0000197	Tree work & landscaping(Non-Dwelling Site Work (1480)-Landscape)	Tree trimming & removal and landscaping at Blue Bell Tower		\$8,321.00
	Subtotal of Estimated Cost			\$1,574,831.00

Work Statement for Year 2 2027

Form HUD-50075.2(4/2008)

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 2 2027				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000201	Operations(Operations (1406))	Family Sites operations		\$181,000.00
ID0000205	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Family Sites		\$60,000.00
ID0000208	Entry project(Dwelling Unit-Exterior (1480)-Exterior Doors,Dwelling Unit-Exterior (1480)-Exterior Lighting,Dwelling Unit-Exterior (1480)-Mail Facilities,Dwelling Unit-Exterior (1480)-Other)	Replacement of entry door looks, storm doors, mailboxes, unit numbers, light fixtures at Family Sites		\$350,000.00
ID0000211	Tree work & landscaping(Non-Dwelling Site Work (1480)-Landscape)	Tree trimming & removal and landscaping		\$25,000.00
	BLUE BELL TOWER (IL085000003)			\$52,027.00
ID0000202	Operations(Operations (1406))	Blue Bell Tower operations		\$42,027.00
ID0000206	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Blue Bell Tower		\$10,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 2 2027				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	AUTHORITY-WIDE (NAWASD)			\$157,483.00
ID0000203	Administration(Administration (1410)-Salaries)	COCC - Administration		\$157,483.00
	Subtotal of Estimated Cost			\$1,574,831.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 3 2028				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	MOON TOWERS (IL085000001)			\$486,000.00
ID0000212	Operations(Operations (1406))	Moon Towers operations		\$161,000.00
ID0000215	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Moon Towers		\$45,000.00
ID0000219	Concrete & parking lot project(Non-Dwelling Site Work (1480)-Asphalt - Concrete - Paving)	Site concrete work and parking lot work (mill, resurface, seal, restripe)		\$40,000.00
ID0000223	Kitchen Renovations(Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets,Dwelling Unit-Interior (1480)-Other,Dwelling Unit-Interior (1480)-Kitchen Cabinets)	Installation of new kitchen cabinets, countertops and sinks and faucets		\$240,000.00
	FAMILY HOUSING (IL085000002)			\$779,321.00
ID0000213	Operations(Operations (1406))	Family Sites operations		\$181,000.00

Form HUD-50075.2(4/2008)

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 3 2028				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000217	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Blue Bell Tower		\$10,000.00
ID0000221	Concrete & parking lot project(Non-Dwelling Site Work (1480)-Asphalt - Concrete - Paving)	Site concrete work and parking lot work (mill, resurface, seal, restripe)		\$20,000.00
ID0000225	Kitchen Renovations(Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets,Dwelling Unit-Interior (1480)-Other)	Installation of new kitchen cabinets, countertops and sinks and faucets		\$80,000.00
	AUTHORITY-WIDE (NAWASD)			\$157,483.00
ID0000226	Administration(Administration (1410)-Salaries)	COCC - Administration		\$157,483.00
	Subtotal of Estimated Cost			\$1,574,831.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 4 2029				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	AUTHORITY-WIDE (NAWASD)			\$157,483.00
ID0000227	Administration(Administration (1410)-Salaries)	COCC - Administration		\$157,483.00
	MOON TOWERS (IL085000001)			\$421,000.00
ID0000228	Operations(Operations (1406))	Moon Towers operations		\$161,000.00
ID0000231	Kitchen Renovations(Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets,Dwelling Unit-Interior (1480)-Other)	Installation of new kitchen cabinets, countertops and sinks and faucets		\$240,000.00
ID0000234	A&e Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Moon Towers		\$20,000.00
	FAMILY HOUSING (IL085000002)			\$864,321.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 4 2029				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000229	Operations(Operations (1406))	Family Sites operations		\$181,000.00
ID0000232	Kitchen Renovations(Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets,Dwelling Unit-Interior (1480)-Other,Dwelling Unit-Interior (1480)-Kitchen Cabinets)	Installation of new kitchen cabinets, countertops and sinks and faucets		\$240,000.00
ID0000235	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Family Sites		\$70,000.00
ID0000237	Unit exterior work project(Dwelling Unit-Exterior (1480)-Gutters - Downspouts,Dwelling Unit-Exterior (1480)-Siding,Dwelling Unit-Exterior (1480)-Tuck-Pointing)	Brick veneer, siding, gutters and downspouts at Family Sites		\$373,321.00
	BLUE BELL TOWER (IL085000003)			\$132,027.00
ID0000230	Operations(Operations (1406))	Blue Bell Tower operations		\$42,027.00
ID0000233	Kitchen Renovations(Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets,Dwelling Unit-Interior (1480)-Other)	Installation of new kitchen cabinets, countertops and sinks and faucets		\$80,000.00

Form HUD-50075.2(4/2008)

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 5 2030				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	MOON TOWERS (IL085000001)			\$291,000.00
ID0000238	Operations(Operations (1406))	Moon Towers operations		\$161,000.00
ID0000242	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Moon Towers		\$30,000.00
ID0000247	Trash chutes, compactors, dumpsters(Non-Dwelling Construction - Mechanical (1480)-Trash Compactor,Non-Dwelling Site Work (1480)-Dumpster and Enclosures)	Cleaning trash chutes, replacement of compactors and dumpsters		\$100,000.00
	FAMILY HOUSING (IL085000002)			\$694,321.00
ID0000239	Operations(Operations (1406))	Family Sites operations		\$181,000.00
ID0000243	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Family Sites		\$30,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 5 2030				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000246	Bathroom Renovations(Dwelling Unit-Interior (1480)-Bathroom Counters and Sinks,Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Plumbing,Dwelling Unit-Interior (1480)-Tubs and Showers)	Bathroom renovations at Family Sites		\$483,321.00
	BLUE BELL TOWER (IL085000003)			\$432,027.00
ID0000240	Operations(Operations (1406))	Blue Bell Tower operations		\$42,027.00
ID0000244	A&E Services(Contract Administration (1480)-Other Fees and Costs)	A&E services for Blue Bell Tower		\$40,000.00
ID0000245	Roof Replacement(Non-Dwelling Exterior (1480)-Roofs)	Roof replacement at Blue Bell Tower		\$300,000.00
ID0000248	Trash chutes, compactors, dumpsters(Non-Dwelling Construction - Mechanical (1480)-Trash Compactor,Non-Dwelling Site Work (1480)-Dumpster and Enclosures)	Cleaning trash chutes, replacement of compactors and dumpsters		\$50,000.00
	AUTHORITY-WIDE (NAWASD)			\$157,483.00

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 5 2030				
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0000241	Administration(Administration (1410)-Salaries)	COCC - Administration		\$157,483.00
	Subtotal of Estimated Cost			\$1,574,831.00

Form HUD-50075.2(4/2008)

Form HUD-50075.2(4/2008)

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part III: Supporting Pages - Management Needs Work Statements (s)	
Work Statement for Year 3	2028
Development Number/Name General Description of Major Work Categories	Estimated Cost
Housing Authority Wide	
Administration(Administration (1410)-Salaries)	\$157,483.00
Subtotal of Estimated Cost	\$157,483.00

Form HUD-50075.2(4/2008)

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part III: Supporting Pages - Management Needs Work Statements (s)	
Work Statement for Year 5	2030
Development Number/Name General Description of Major Work Categories	Estimated Cost
Housing Authority Wide	
Administration(Administration (1410)-Salaries)	\$157,483.00
Subtotal of Estimated Cost	\$157,483.00



**IL085 KNOX COUNTY HOUSING AUTHORITY
FY 04/01/2026 – 03/31/2027 ANNUAL PLAN SUBMISSION
ATTACHMENT 7.0
Challenged Elements**

1. At the time of submission, there have been no challenged elements.

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan or
State Consolidated Plan
(All PHAs)**

U. S Department of Housing and Urban Development

Office of Public and Indian Housing

OMB No. 2577-0226

Expires 09/30/2027

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

I, Kristin Faust, the Executive Director
Official's Name *Official's Title*

certify that the 5-Year PHA Plan for fiscal years 2026-2030 and/or Annual PHA Plan for fiscal
year 2026 of the IL085 - Knox County Housing Authority is consistent with the
PHA Name

Consolidated Plan or State Consolidated Plan including any applicable fair housing goals or strategies
to:

State of Illinois

Local Jurisdiction Name

pursuant to 24 CFR Part 91 and 24 CFR Part 903.15.

Provide a description of how the PHA Plan's contents are consistent with the Consolidated Plan or State
Consolidated Plan.

Occupancy of units to serve the maximum number of families possible within funding constraints. Working with HUD on issues surrounding the housing of veterans and the eradication of homelessness in the United States. Ensuring equal opportunity to housing and affirmatively furthering fair housing measures to increase access to assisted housing. Additionally, undertaking initiatives to bridge the technology gap for students and families through broadband infrastructure, internet access, and hardware availability.

I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct. WARNING: Anyone who knowingly submits a false claim or makes a false statement is subject to criminal and/or civil penalties, including confinement for up to 5 years, fines, and civil and administrative penalties. (18 U.S.C. §§ 287, 1001, 1010, 1012, 1014; 31 U.S.C. § 3729, 3802).

Name of Authorized Official: Kristin Faust	Title: Executive Director
Signature:	Date:

This information is collected to ensure consistency with the consolidated plan or state consolidated plan.

Public reporting burden for this information collection is estimated to average 0.16 hours per year per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Reports Management Officer, REE, Department of Housing and Urban Development, 451 7th Street, SW, Room 4176, Washington, DC 20410-5000. When providing comments, please refer to OMB Approval No. 2577-0226. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality.

Form identification: IL085 - Knox County Housing Authority form HUD-50077-SL (Form ID - 6122)
printed by Derek Antoine in HUD Secure Systems/Public Housing Portal at 12/22/2025 04:53PM EST

TENANT SELECTION AND ASSIGNMENT – PREFERENCE POINTS

The Knox County Housing Authority is a dynamic force in our community, providing high-quality affordable housing opportunities for individuals and families, while promoting self-sufficiency, empowerment, and a sense of community development. In order to ensure the clients with the most critical housing needs are served, the Knox County Housing Authority (KCHA) may establish preferences based on housing needs as determined by the Knox County Housing Authority and defined within the agency's Admissions and Continued Occupancy Policy (ACOP) and Housing Choice Voucher Administrative Plan (24 CFR § 960.206(a)(1)). These preferences will be based upon local housing needs and priorities, and will not automatically guarantee housing nor deny admission to any particular group or category of otherwise eligible applicants. Selection from the established waiting list will be objective and reasonable, be consistent with the agency's responsibility as a public body, and be in compliance with all local, state, and federal laws and regulations of pertinence. The listed preferences shall be duly adopted, be made known to applicants and current residents through proper notification, posted in all KCHA offices, and publicized through appropriate channels (newspaper, KCHA website, and other social media outlets).

Definitions detailing the qualification criteria for each preference, which are summarized below, shall be contained in the agency's ACOP and Administrative Plan, the Annual Plan, and the Five-Year Plan. At the time of initial application, applicants need only to certify they are eligible for a preference. The KCHA will verify all information that is used to establish eligibility prior to placement on the waiting list. It shall be the responsibility of the applicant to report all changes to information provided on their application in regards to family composition, income, contact information, and preference status. Preference status will be determined based on current documentation prior to admission and admission priority will be adjusted accordingly. Applicants will be selected from the waiting list in preference points ranking order. Applicants with equal preference points will be selected according to date and time of the application.

The Knox County Housing Authority has established the following preferences which will be given a cumulative total point value for each preference in which an applicant qualifies. Applicants will only be eligible for one point amount from each category.

1. Jurisdictional Preference – **32 Points**

- a. Families residing in Knox County
 - i. Applicant households with a permanent physical residence in Knox County Illinois;
- b. Families working in Knox County (24 CFR § 960.206(b)(1)(v))
 - i. The head or co-head is employed in Knox County at the time of application;
 - ii. Applicants who have been notified they are hired to work in Knox County

2. Employment/Education Preference

- a. Employment – Applicant household where the Head of Household, Spouse, or Co-Head of Household, or sole member has been continuously employed at the current minimum wage rate for the three-month (90 day) period prior to the date of the offer for a dwelling unit, and able to document the following average hours worked:
 - i. Applicants who are employed full-time (32 hours and higher per week) – **16 Points**
 - ii. Applicants who are employed part-time (20 - 31 hours per week) – **8 Points**
 - iii. Applicants who are employed part-time (19 hours and below per week) – **4 Points**
- b. Education – Applicant household where the Head of Household, Spouse, or Co-Head of Household is currently enrolled in, or a graduate in the last six months of a school of higher learning or a training program designed to prepare enrollees for the job market – **16 Points**
 - i. A student is an individual who is attending a school or training program full time
 - ii. Full-time student status will be defined by the institution in which the applicant is enrolled.
- c. Applicant household where the Head of Household, Spouse, or Co-Head of Household is 62 years of age or older or is disabled will receive the Employment/Education preference – **16 Points**
- d. Applicants who do not reside or work in Knox County will not qualify for the Employment/Education preference.

Chapter 4

APPLICATIONS, WAITING LIST AND TENANT SELECTION

INTRODUCTION

When a family wishes to receive assistance under the HCV program, the family must submit an application that provides the PHA with the information needed to determine the family's eligibility. HUD requires the PHA to place all families that apply for assistance on a waiting list. When HCV assistance becomes available, the PHA must select families from the waiting list in accordance with HUD requirements and PHA policies as stated in the administrative plan and the annual plan.

The PHA is required to adopt clear policies and procedures for accepting applications, placing families on the waiting list, and selecting families from the waiting list, and must follow these policies and procedures consistently. The actual order in which families are selected from the waiting list can be affected if a family has certain characteristics designated by HUD or the PHA that justify their selection. Examples of this are the selection of families for income targeting and the selection of families that qualify for targeted funding.

HUD regulations require that all families have an equal opportunity to apply for and receive housing assistance, and that the PHA affirmatively further fair housing goals in the administration of the program [24 CFR 982.53, HCV GB p. 4-1]. Adherence to the selection policies described in this chapter ensures that the PHA will be in compliance with all relevant fair housing requirements, as described in Chapter 2.

This chapter describes HUD and PHA policies for taking applications, managing the waiting list and selecting families for HCV assistance. The policies outlined in this chapter are organized into three sections, as follows:

Part I: The Application Process. This part provides an overview of the application process, and discusses how applicants can obtain and submit applications. It also specifies how the PHA will handle the applications it receives.

Part II: Managing the Waiting List. This part presents the policies that govern how the PHA's waiting list is structured, when it is opened and closed, and how the public is notified of the opportunity to apply for assistance. It also discusses the process the PHA will use to keep the waiting list current.

Part III: Selection for HCV Assistance. This part describes the policies that guide the PHA in selecting families for HCV assistance as such assistance becomes available. It also specifies how in-person interviews will be used to ensure that the PHA has the information needed to make a final eligibility determination.

PART I: THE APPLICATION PROCESS

4-I.A. OVERVIEW

This part describes the PHA policies for making applications available, accepting applications making preliminary determinations of eligibility, and the placement of applicants on the waiting list. This part also describes the PHA's obligation to ensure the accessibility of the application process to elderly persons, people with disabilities, and people with limited English proficiency (LEP).

4-I.B. APPLYING FOR ASSISTANCE [HCV GB, pp. 4-11 – 4-16, Notice PIH 2009-36]

Any family that wishes to receive HCV assistance must apply for admission to the program. HUD permits the PHA to determine the format and content of HCV applications, as well how such applications will be made available to interested families and how applications will be accepted by the PHA. The PHA must include Form HUD-92006, Supplement to Application for Federally Assisted Housing, as part of the PHA's application.

KCHA Policy

Depending upon the length of time that applicants may need to wait to receive assistance, the KCHA may use a one- or two-step application process.

A one-step process will be used when it is expected that a family will be selected from the waiting list within 60 days of the date of application. At application, the family must provide all of the information necessary to establish family eligibility and level of assistance.

A two-step process will be used when it is expected that a family will not be selected from the waiting list for at least 60 days from the date of application. Under the two-step application process, the KCHA initially will require families to provide only the information needed to make an initial assessment of the family's eligibility, and to determine the family's placement on the waiting list. The family will be required to provide all of the information necessary to establish family eligibility and level of assistance when the family is selected from the waiting list.

Families may obtain application forms from the KCHA's office during normal business hours. Families may also request – by telephone or by mail – that an application be mailed to them via first class mail.

Completed applications must be returned to the KCHA by mail, electronically, by fax, or submitted in person during normal business hours. Applications must be complete in order to be accepted by the KCHA for processing. If an application is incomplete, the KCHA will notify the family of the additional information required.

4-I.C. ACCESSIBILITY OF THE APPLICATION PROCESS

Elderly and Disabled Populations [24 CFR 8 and HCV GB, pp. 4-11 – 4-13]

The PHA must take steps to ensure that the application process is accessible to those people who might have difficulty complying with the normal, standard PHA application process. This could include people with disabilities, certain elderly individuals, as well as persons with limited English proficiency (LEP). The PHA must provide reasonable accommodation to the needs of individuals with disabilities. The application-taking facility and the application process must be fully accessible, or the PHA must provide an alternate approach that provides full access to the application process. Chapter 2 provides a full discussion of the PHA's policies related to providing reasonable accommodations for people with disabilities.

Limited English Proficiency

PHAs are required to take reasonable steps to ensure equal access to their programs and activities by persons with limited English proficiency [24 CFR 1]. Chapter 2 provides a full discussion on the PHA's policies related to ensuring access to people with limited English proficiency (LEP).

4-I.D. PLACEMENT ON THE WAITING LIST

The PHA must review each complete application received and make a preliminary assessment of the family's eligibility. The PHA must accept applications from families for whom the list is open unless there is good cause for not accepting the application (such as denial of assistance) for the grounds stated in the regulations [24 CFR 982.206(b)(2)]. Where the family is determined to be ineligible, the PHA must notify the family in writing [24 CFR 982.201(f)]. Where the family is not determined to be ineligible, the family will be placed on a waiting list of applicants.

No applicant has a right or entitlement to be listed on the waiting list, or to any particular position on the waiting list [24 CFR 982.202(c)].

Ineligible for Placement on the Waiting List

KCHA Policy

If the KCHA can determine from the information provided that a family is ineligible, the family will not be placed on the waiting list. Where a family is determined to be ineligible, the KCHA will send written notification of the ineligibility determination within 10 business days of receiving a complete application. The notice will specify the reasons for ineligibility and will inform the family of its right to request an informal review and explain the process for doing so (see Chapter 16).

Eligible for Placement on the Waiting List

KCHA Policy

The KCHA will send written notification of the preliminary eligibility determination within 10 business days of receiving a complete application.

Placement on the waiting list does not indicate that the family is, in fact, eligible for assistance. A final determination of eligibility will be made when the family is selected from the waiting list.

Applicants will be placed on the waiting list according to any preference(s) for which they qualify, and the date and time their complete application is received by the KCHA.

PART II: MANAGING THE WAITING LIST

4-II.A. OVERVIEW

The PHA must have policies regarding various aspects of organizing and managing the waiting list of applicant families. This includes opening the list to new applicants, closing the list to new applicants, notifying the public of waiting list openings and closings, updating waiting list information, purging the list of families that are no longer interested in or eligible for assistance, as well as conducting outreach to ensure a sufficient number of applicants.

In addition, HUD imposes requirements on how a PHA may structure its waiting list and how families must be treated if they apply for assistance from a PHA that administers more than one assisted housing program.

4-II.B. ORGANIZATION OF THE WAITING LIST [24 CFR 982.204 and 205]

The PHA's HCV waiting list must be organized in such a manner to allow the PHA to accurately identify and select families for assistance in the proper order, according to the admissions policies described in this plan.

The waiting list must contain the following information for each applicant listed:

- Applicant name;
- Family unit size;
- Date and time of application;
- Qualification for any local preference;
- Racial or ethnic designation of the head of household.

HUD requires the PHA to maintain a single waiting list for the HCV program unless it serves more than one county or municipality. Such PHAs are permitted, but not required, to maintain a separate waiting list for each county or municipality served.

KCHA Policy

The KCHA will maintain a single waiting list for the HCV program.

HUD directs that a family that applies for assistance from the HCV program must be offered the opportunity to be placed on the waiting list for any public housing, project-based voucher or moderate rehabilitation program the PHA operates if 1) the other programs' waiting lists are open, and 2) the family is qualified for the other programs.

HUD permits, but does not require, that PHAs maintain a single merged waiting list for their public housing, Section 8, and other subsidized housing programs.

A family's decision to apply for, receive, or refuse other housing assistance must not affect the family's placement on the HCV waiting list, or any preferences for which the family may qualify.

KCHA Policy

The KCHA will not merge the HCV waiting list with the waiting list for any other program the KCHA operates.

4-II.C. OPENING AND CLOSING THE WAITING LIST [24 CFR 982.206]

Closing the Waiting List

A PHA is permitted to close the waiting list if it has an adequate pool of families to use its available HCV assistance. Alternatively, the PHA may elect to continue to accept applications only from certain categories of families that meet particular preferences or funding criteria.

KCHA Policy

The KCHA will close the waiting list when the estimated waiting period for housing assistance for applicants on the list reaches 24 months for the most current applicants. Where the KCHA has particular preferences or funding criteria that require a specific category of family, the KCHA may elect to continue to accept applications from these applicants while closing the waiting list to others.

Reopening the Waiting List

If the waiting list has been closed, it cannot be reopened until the PHA publishes a notice in local newspapers of general circulation, minority media, and other suitable media outlets. The notice must comply with HUD fair housing requirements and must specify who may apply, and where and when applications will be received.

KCHA Policy

The KCHA will announce the reopening of the waiting list at least 10 business days prior to the date applications will first be accepted. If the list is only being reopened for certain categories of families, this information will be contained in the notice.

The KCHA will give public notice by publishing the relevant information in suitable media outlets including, but not limited to:

[List here newspapers/other media where notices will be published]

4-II.D. FAMILY OUTREACH [HCV GB, pp. 4-2 to 4-4]

The PHA must conduct outreach as necessary to ensure that the PHA has a sufficient number of applicants on the waiting list to use the HCV resources it has been allotted.

Because HUD requires the PHA to admit a specified percentage of extremely low-income families to the program (see Chapter 4, Part III), the PHA may need to conduct special outreach to ensure that an adequate number of such families apply for assistance [HCV GB, p. 4-20 to 4-21].

PHA outreach efforts must comply with fair housing requirements. This includes:

- Analyzing the housing market area and the populations currently being served to identify underserved populations
- Ensuring that outreach efforts are targeted to media outlets that reach eligible populations that are underrepresented in the program
- Avoiding outreach efforts that prefer or exclude people who are members of a protected class

PHA outreach efforts must be designed to inform qualified families about the availability of assistance under the program. These efforts may include, as needed, any of the following activities:

- Submitting press releases to local newspapers, including minority newspapers
- Developing informational materials and flyers to distribute to other agencies
- Providing application forms to other public and private agencies that serve the low income population
- Developing partnerships with other organizations that serve similar populations, including agencies that provide services for persons with disabilities

KCHA Policy

The KCHA will monitor the characteristics of the population being served and the characteristics of the population as a whole in the KCHA's jurisdiction. Targeted outreach efforts will be undertaken if a comparison suggests that certain populations are being underserved.

4-II.E. REPORTING CHANGES IN FAMILY CIRCUMSTANCES

KCHA Policy

While the family is on the waiting list, the family must immediately inform the KCHA of changes in contact information, including current residence, mailing address, and phone number. The changes must be submitted in writing.

4-II.F. UPDATING THE WAITING LIST [24 CFR 982.204]

HUD requires the PHA to establish policies to use when removing applicant names from the waiting list.

Purging the Waiting List

The decision to withdraw an applicant family that includes a person with disabilities from the waiting list is subject to reasonable accommodation. If the applicant did not respond to a PHA request for information or updates, and the PHA determines that the family did not respond because of the family member's disability, the PHA must reinstate the applicant family to their former position on the waiting list [24 CFR 982.204(c)(2)].

KCHA Policy

The waiting list will be updated as needed to ensure that all applicants and applicant information is current and timely.

To update the waiting list, the KCHA will send an update request via first class mail to each family on the waiting list to determine whether the family continues to be interested in, and to qualify for, the program. This update request will be sent to the last address that the KCHA has on record for the family. The update request will provide a deadline by which the family must respond and will state that failure to respond will result in the applicant's name being removed from the waiting list.

The family's response must be in writing and may be delivered in person, by mail, by email, or by fax. Responses should be postmarked or received by the KCHA not later than 15 business days from the date of the KCHA letter.

If the family fails to respond within 15 business days, the family will be removed from the waiting list without further notice.

If the notice is returned by the post office with no forwarding address, the applicant will be removed from the waiting list without further notice.

If the notice is returned by the post office with a forwarding address, the notice will be re-sent to the address indicated. The family will have 15 business days to respond from the date the letter was re-sent.

If a family is removed from the waiting list for failure to respond, the KCHA may reinstate the family if it is determined that the lack of response was due to KCHA error, or to circumstances beyond the family's control, as a result of a family member's disability, or as a direct result of status as a victim of domestic violence, dating violence, sexual assault, stalking, or human trafficking, including an adverse factor resulting from such abuse.

Removal from the Waiting List

KCHA Policy

If at any time an applicant family is on the waiting list, the KCHA determines that the family is not eligible for assistance (see Chapter 3), the family will be removed from the waiting list.

If a family is removed from the waiting list because the KCHA has determined the family is not eligible for assistance, a notice will be sent to the family's address of record as well as to any alternate address provided on the initial application. The notice will state the reasons the family was removed from the waiting list and will inform the family how to request an informal review regarding the KCHA's decision (see Chapter 16) [24 CFR 982.201(f)].

PART III: SELECTION FOR HCV ASSISTANCE

4-III.A. OVERVIEW

As vouchers become available, families on the waiting list must be selected for assistance in accordance with the policies described in this part.

The order in which families are selected from the waiting list depends on the selection method chosen by the PHA and is impacted in part by any selection preferences for which the family qualifies. The availability of targeted funding also may affect the order in which families are selected from the waiting list.

The PHA must maintain a clear record of all information required to verify that the family is selected from the waiting list according to the PHA's selection policies [24 CFR 982.204(b) and 982.207(e)].

4-III.B. SELECTION AND HCV FUNDING SOURCES

Special Admissions [24 CFR 982.203]

HUD may award funding for specifically-named families living in specified types of units (e.g., a family that is displaced by demolition of public housing; a non-purchasing family residing in a HOPE 1 or 2 projects). In these cases, the PHA may admit such families whether or not they are on the waiting list, and, if they are on the waiting list, without considering the family's position on the waiting list. These families are considered non-waiting list selections. The PHA must maintain records showing that such families were admitted with special program funding.

Targeted Funding [24 CFR 982.204(e)]

HUD may award a PHA funding for a specified category of families on the waiting list. The PHA must use this funding only to assist the families within the specified category. In order to assist families within a targeted funding category, the PHA may skip families that do not qualify within the targeted funding category. Within this category of families, the order in which such families are assisted is determined according to the policies provided in Section 4-III.C.

KCHA Policy

The KCHA does not administer targeted funding, but may do so in the future.

Regular HCV Funding

Regular HCV funding may be used to assist any eligible family on the waiting list. Families are selected from the waiting list according to the policies provided in Section 4-III.C.

4-III.C. SELECTION METHOD

PHAs must describe the method for selecting applicant families from the waiting list, including the system of admission preferences that the PHA will use [24 CFR 982.202(d)].

Selection Preferences [24 CFR 982.207; HCV p. 4-16]

PHAs are permitted to establish local preferences, and to give priority to serving families that meet those criteria. HUD specifically authorizes and places restrictions on certain types of local preferences. HUD also permits the PHA to establish other local preferences, at its discretion. Any local preferences established must be consistent with the PHA plan and the consolidated plan, and must be based on local housing needs and priorities that can be documented by generally accepted data sources.

KCHA Policy

The Knox County Housing Authority is dedicated to serving the applicants with the most critical housing needs in our community. To ensure our selection process reflects these local priorities—such as protecting victims of domestic violence and supporting families displaced by funding shortfalls—we have established specific preference categories.

Accordingly, the KCHA will use the local preferences as established in the **KCHA Tenant Selection and Assignment - Preference Points** policy.

Income Targeting Requirement [24 CFR 982.201(b)(2)]

HUD requires that extremely low-income (ELI) families make up at least 75 percent of the families admitted to the HCV program during the PHA's fiscal year. ELI families are those with annual incomes at or below the federal poverty level or 30 percent of the area median income, whichever number is higher. To ensure this requirement is met, a PHA may skip non-ELI families on the waiting list in order to select an ELI family.

Low-income families admitted to the program that are "continuously assisted" under the 1937 Housing Act [24 CFR 982.4(b)], as well as low-income or moderate-income families admitted to the program that are displaced as a result of the prepayment of the mortgage or voluntary termination of an insurance contract on eligible low-income housing, are not counted for income targeting purposes [24 CFR 982.201(b)(2)(v)].

KCHA Policy

The KCHA will monitor progress in meeting the income targeting requirement throughout the fiscal year. Extremely low-income families will be selected ahead of other eligible families on an as-needed basis to ensure the income targeting requirement is met.

Order of Selection

The PHA system of preferences may select families based on local preferences according to the date and time of application or by a random selection process (lottery) [24 CFR 982.207(c)]. If a PHA does not have enough funding to assist the family at the top of the waiting list, it is not permitted to skip down the waiting list to a family that it can afford to subsidize when there are not sufficient funds to subsidize the family at the top of the waiting list [24 CFR 982.204(d) and (e)].

KCHA Policy

Families will be selected from the waiting list based on the targeted funding or selection preference(s) for which they qualify, and in accordance with the KCHA's hierarchy of preferences, if applicable. Within each targeted funding or preference category, families will be selected on a first-come, first-served basis according to the date and time their complete application is received by the KCHA. Documentation will be maintained by the KCHA as to whether families on the list qualify for and are interested in targeted funding. If a higher placed family on the waiting list is not qualified or not interested in targeted funding, there will be a notation maintained so that the KCHA does not have to ask higher placed families each time targeted selections are made.

4-III.D. NOTIFICATION OF SELECTION

When a family has been selected from the waiting list, the PHA must notify the family [24 CFR 982.554(a)].

KCHA Policy

The KCHA will notify the family by first class mail when it is selected from the waiting list. The notice will inform the family of the following:

- Date, time, and location of the scheduled application interview, including any procedures for rescheduling the interview

- Who is required to attend the interview

- All documents that must be provided at the interview, including information about what constitutes acceptable documentation

If a notification letter is returned to the KCHA with no forwarding address, the family will be removed from the waiting list. A notice of denial (see Chapter 3) will be sent to the family's address of record, as well as to any known alternate address.

4-III.E. THE APPLICATION INTERVIEW

HUD recommends that the PHA obtain the information and documentation needed to make an eligibility determination through a face-to-face interview with a PHA representative [HCV GB, pg. 4-16]. Being invited to attend an interview does not constitute admission to the program.

Assistance cannot be provided to the family until all SSN documentation requirements are met. However, if the PHA determines that an applicant family is otherwise eligible to participate in the program, the family may retain its place on the waiting list for a period of time determined by the PHA [Notice PIH 2018-24].

Reasonable accommodation must be made for persons with disabilities who are unable to attend an interview due to their disability.

KCHA Policy

Families selected from the waiting list are required to participate in an eligibility interview.

The head of household and the spouse/cohead will be strongly encouraged to attend the interview together. However, either the head of household or the spouse/cohead may attend the interview on behalf of the family. Verification of information pertaining to adult members of the household not present at the interview will not begin until signed release forms are returned to the KCHA.

The head of household or spouse/cohead must provide acceptable documentation of legal identity. (Chapter 7 provides a discussion of proper documentation of legal identity.) If the family representative does not provide the required documentation at the time of the interview, they will be required to provide it within 10 business days.

Pending disclosure and documentation of social security numbers, the KCHA will allow the family to retain its place on the waiting list for 90 days. If not all household members have disclosed their SSNs at the next time the KCHA is issuing vouchers, the KCHA will issue a voucher to the next eligible applicant family on the waiting list.

The family must provide the information necessary to establish the family's eligibility and determine the appropriate level of assistance, and must complete required forms, provide required signatures, and submit required documentation. If any materials are missing, the KCHA will provide the family with a written list of items that must be submitted.

Any required documents or information that the family is unable to provide at the interview must be provided within 10 business days of the interview (Chapter 7 provides details about longer submission deadlines for particular items, including documentation of eligible noncitizen status). If the family is unable to obtain the information or materials within the required time frame, the family may request an extension. If the required documents and information are not provided within the required time frame (plus any extensions), the family will be sent a notice of denial (See Chapter 3).

An advocate, interpreter, or other assistant may assist the family with the application and the interview process.

Interviews will be conducted in English. For limited English proficient (LEP) applicants, the KCHA will provide translation services in accordance with the KCHA's LEP plan.

If the family is unable to attend a scheduled interview, the family should contact the KCHA in advance of the interview to schedule a new appointment. In all circumstances, if a family does not attend a scheduled interview, the KCHA will send another notification letter with a new interview appointment time. Applicants who fail to attend two scheduled interviews without KCHA approval will be denied assistance based on the family's failure to supply information needed to determine eligibility. A notice of denial will be issued in accordance with policies contained in Chapter 3.

4-III.F. COMPLETING THE APPLICATION PROCESS

The PHA must verify all information provided by the family (see Chapter 7). Based on verified information, the PHA must make a final determination of eligibility (see Chapter 3) and must confirm that the family qualified for any special admission, targeted funding admission, or selection preference that affected the order in which the family was selected from the waiting list.

KCHA Policy

If the KCHA determines that the family is ineligible, the KCHA will send written notification of the ineligibility determination within 10 business days of the determination. The notice will specify the reasons for ineligibility, and will inform the family of its right to request an informal review (Chapter 16).

If a family fails to qualify for any criteria that affected the order in which it was selected from the waiting list (e.g. targeted funding, extremely low-income), the family will be returned to its original position on the waiting list. The KCHA will notify the family in writing that it has been returned to the waiting list, and will specify the reasons for it.

If the KCHA determines that the family is eligible to receive assistance, the KCHA will invite the family to attend a briefing in accordance with the policies in Chapter 5.

3. Homeless Preference – **16 Points**

- a. Applicant households that lack a fixed, regular and adequate night-time residence;
- b. Have a primary night-time residence that is a supervised public or private shelter providing temporary accommodations;
- c. Have a primary night-time residence that is a public or private place not ordinarily used as an accommodation for human beings (lack indoor plumbing, toilet facilities, bathing facilities, adequate or safe electrical service, heat, or kitchen);
- d. Have a primary night-time residence that is a designated social service agency;
- e. Imminent Danger of Homelessness as defined by the agency's ACOP and HCV Administrative Plan.
 - i. Served with a court-ordered eviction notice
 - ii. Have been informed of a public safety condemnation of the household's home
 - iii. Foreclosure proceedings are pending on the household's home
 - iv. Have no other subsequent housing options
 - v. Lack financial resources and a support network
 - vi. Facing a sudden and significant loss of income
 - vii. **Current Emergency Housing Voucher (EHV) holders transitioning due to the end of the EHV program.**

4. Victims of Domestic Violence – **16 Points**

- a. Pursuant to the Violence Against Women Act (VAWA), this preference is available for individuals who have been victims of domestic violence, sexual assault, dating violence or stalking.
- b. To qualify for the preference, documentation must be provided that demonstrates the applicant is indeed a victim of domestic violence, sexual assault, dating violence or stalking, in accordance with the agency's ACOP and HCV Administrative Plan.

5. Veteran Preference – **12 Points**

- a. Applicant household where the Head of Household, Spouse, or Co-Head of Household is a current member of the United States Armed Forces;
- b. Applicant household where the Head of Household, Spouse, or Co-Head of Household is a veteran of the United States Armed Forces (honorable or general discharge);
- c. Applicant household where the Head of Household, Spouse, or Co-Head of Household is the surviving spouse of a veteran of the United States Armed Forces (honorable or general discharge).

6. Family Preference

- a. Family – Available to applicant households where two or more persons related by blood, marriage, adoption, or laws who will live together in the same dwelling, or two or more persons who live together and whose income and resources are available for use in meeting regular living expenses for the family – **8 Points**
- b. Secondary Disabled – A secondary member of the family household – other than the Head of Household, Spouse, or Co-Head of Household - **4 Points**
- c. Near-Elderly – Available to applicant households where the Head of Household, Spouse, or Co-Head of Household are between 50 – 61 years of age – **4 Points**

7. Displacement – **4 Points**

- a. Applicant households which, at the time they apply, can document that they have been, or will be involuntarily displaced because of:
 - i. Natural Disaster that has been so declared by a local, state, or federal government agency;
 - ii. Subject to a documented action by a local, state, or federal government entity related to code enforcement, public improvement, or development;
 - iii. Landlord action other than termination of tenancy for cause (lease violations)
 - iv. Unit inaccessibility
- b. Displacement action must have been within the previous 90 days, or involuntary displacement will occur within 90 days.

8. Excessive Rent Burden/Sub-Standard Housing Conditions – **2 Points**

- a. Applicants who must spend more than 50% of their monthly income on monthly rent/mortgage payments and basic utilities (water, sewerage, electricity, and space heating fuel); and/or
- b. Are currently residing in sub-standard housing such as housing that lacks functioning plumbing, heating or electrical systems, and/or which is structurally unsound to the extent that the housing envelope does not adequately prevent incursion by precipitation, or is in imminent danger of collapse.

