

A 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	MB No. 2577-0226 expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Housing Authority of the City of New Britain</u> PHA Code: <u>CT005</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2010</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>804</u> Number of HCV units: <u>801</u>					
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
					PH	HCV
	PHA 1:					
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The Housing Authority of the City of New Britain is a public agency committed to improving both the social as well as the material well being of its residents. Our mission is to provide decent, safe and sanitary housing to all eligible residents of the City of New Britain. We believe our residents should be a part of the surrounding community. This includes participating in employment, homeownership, education and social activities. Furthermore, we will strive to be our community's affordable housing of choice.					
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. The NBHA is seeking vouchers for our non-elderly disabled population. We have applied for additional capital fund dollars to assist in improving our properties and providing more assessable mobility units and hearing and vision impaired units which will assist the authority in the goals we set in the last 5 year plan. We have updated our policies to attract employed persons; written and implemented a Section 3 Plan to employ persons in our public housing; Catholic Charities is running a program for our Spanish speaking elderly /disabled residents. We are updating our security cameras at our high-rise developments.					

PHA Plan Update

- (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:
 (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.

**Main Administrative Office, 16 Armistice St., New Britain,
 NBHA local office at 12 Dobek, New Britain
 and Department of Municipal Development, City Hall, New Britain**

6.0 (a) PLAN ELEMENTS – REVISED

**HOUSING AUTHORITY OF THE CITY OF NEW BRITAIN
 16 ARMISTICE STREET * NEW BRITAIN, CT 06053**

MAINTENANCE SERVICE CHARGES

DESCRIPTION	COST	DESCRIPTION	COST
STORM DOORS		SHADES	
Plexi Insert-storm doors	40.00	17" x 36"	10.00
Storm door kit	15.00	37" x 43"	10.00
New screen insert w/ frame	25.00	44" x 54"	10.00
New storm door	160.00	57" x 68"	15.00
New screen insert only	15.00	86 1/2"	34.00
Kick plate	25.00		
		FLUSH TANKS	
WINDOWS		Toilet bowl	100.00
6 1/2" x 19 1/2" glass insulated	70.00	Toilet tank	100.00
19 1/2" x 35" Insulted glass	80.00	Toilet seat	15.00
		Tank cover	25.00
REFRIGERATOR		Complete toilet	200.00
Glass crisper – refrigerator	25.00	Clog: after unclogging, a foreign object found in toilet, sink or tub is the Resident responsible	25.00
Punctured refrigerator – cannot repair	366.00		
		LOCKS	
STOVES		Change locks	75.00
	235.00	Passage locks	15.00
MISC. CHARGES		Open door for resident lockout	15.00
Medicine cabinet	25.00	Open door-overtime hours	40.00
Trash on lawn	25.00		
Smoke alarm	15.00	HEATING	
Light	15.00	Thermostat - broken by resident	25.00
Interior door	50.00	Gas shut-off for Non-payment	15.00
Exterior door	445.00		
Illegal parking on grass	25.00		
Damage to grounds by vehicle	50.00		
Automotive repair-by resident	50.00		
Return calls due to no entry	25.00		
Because of dogs, etc.	25.00		
Floors damage by residents	50.00		
Light fixture	60.00		
Smoke alarm cage	36.00		
Air Conditioner	45.00/mo. Per A/C unit		
Seasonal Excess Electricity	45.00/mo.		

Revised: 4/20/2005

Reviewed: 5/2007 & 6/2008 Revised 4/2009

6.0 (a) PLAN ELEMENTS – REVISED

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Local Preferences [24 CFR 960.206]

A preference does not guarantee admission to the program. Preferences are used to establish the order of placement on the waiting list. Every applicant must meet the NBHA’s selection criteria as defined in this policy. [24 CFR 960.206(a)].

The NBHA will use the following local preferences:

First: **PREFERENCE FOR** Community Mental Health- Next Step Program

Second: **PREFERENCE FOR WORKING FAMILIES:**

In order to bring higher income families into public housing, the NBHA has a preference for “working” families, where the head, spouse, co head, or sole member is employed at least 20 hours per week. As required by HUD, families where the head, spouse, co head, or sole member is a person age 62 or older, or is a person with disabilities will also be given the benefit of the working preference [24 CFR 960.206(b)(2)].

Third: **PREFERENCE FOR THOSE WHO ARE INVOLUNTARILY DISPLACED OR HOMELESS:** The NBHA has a preference for admission for persons who are involuntarily displaced or homeless. [24 CFR 960.206(b) (5)]. Families are considered involuntarily displaced if they are or have been required to vacate housing as a result of (i) a disaster that has caused the unit to be uninhabitable; (ii) government action; (iii) action by the housing owner which is beyond the applicant’s ability to control.

Fourth: **PREFERENCE FOR VETERANS:** The NBHA has a preference for veterans. Proper documentation must be provided.

6.0 (a) PLAN ELEMENTS – REVISED

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NBHA has reviewed and updated its Dwelling Lease.

6.0 (a) PLAN ELEMENTS – REVISED

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1. **Eligibility, Selection, and Admissions Policies, including Deconcentration and Wait List Procedures.** [24 CFR Part 903.7 9 (c)]

A. **Public Housing:**

(a) **Eligibility:**

The NBHA verifies eligibility for admission to public housing prior to being offered a unit utilizing non-income (screening) factors such as:

- Criminal or Drug-related activity
- Rental history – to include information regarding disturbance of neighbors, destruction of property, or living or housekeeping habits at prior residences which may adversely affect the health, safety, or welfare of other residents.
- Information from personal references
- Evictions from Public Housing, Indian Housing, Section 23 or any Section 8 Programs.
- Monies owed to other housing Authorities

The NBHA obtains criminal history records from the First Advantage and the New Britain Police Department for both town and state records.

(b) **Selection:**

The NBHA will select and house residents in accordance with the following priorities and preferences, in order listed:

1. Preference for Next-Step Program participants
2. Preference for Working Families
3. Preference for Persons, who are involuntarily displaced or Homeless
4. Preference for Veterans
5. Date and Time of Application

(c) **Admissions Policy:**

Income targeting:

The NBHA may select an extremely low income family (ELI) over a non-ELI family on the waiting list to achieve the 40% admission requirement of extremely low-income families.

6.0 (a) PLAN ELEMENTS – REVISED

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(d) **De-Concentration:**

Admission and Continued Occupancy policies are revised to include the NBHA policy of promoting economic de-concentration of its housing developments by offering low-income families, selected in accordance with applicable preferences and priorities, units in developments where family incomes are highest. Families with higher incomes will be offered units in developments with the lowest average family income.

(e) **Wait-List Procedures:**

The NBHA maintains a central waiting list for all of its developments. The waiting list is maintained in a computerized system and updated annually to keep only interested applicants on file ensuring that the waiting list is current.

The wait list is sub-divided by the following:

- Unit type (Family/Elderly)
- Bedroom Size
- Accessible and adaptable units

B. **Section 8 Program:**

(a) **Eligibility:**

The NBHA verifies eligibility for admission to Section 8 Programs prior to being offered rental assistance utilizing non-income (screening) factors such as:

- Criminal or Drug-related activity
- Evictions from Public Housing, Indian Housing, section 23 or any Section 8 Program
- Monies owed to other housing Authorities

The NBHA obtains criminal history records from the First Advantage and the New Britain Police Department for both town and state records.

(b) **Selection:**

The NBHA will select and house residents in accordance with the following priorities and preferences, in order listed below:

Local preferences:

1. Residency Preference
2. Public Housing Residents who need to move for medical or physical needs of family
3. Homeless Families
4. Single Applicants Elderly/Disabled
5. Date and time of application
(These are updated for FY2010-in annual plan)

(c) **Admissions Policy:**

Income Targeting:

Seventy-five percent (75%) of all new admissions shall be families whose income is below thirty percent (30%) of the area median income. The other twenty-five percent (25%) of admissions will have incomes up to eighty percent (80%) of area median income.

(d) **De-concentration:**

The NBHA objective is to encourage families to move into a broader range of neighborhoods through the provisions of affordable housing. The NBHA provides the following information to Section 8 participants/applicants/landlords.

- Advise families what areas they can lease a unit with tenant based assistance
- Provide a listing service to landlords when they have a vacant unit available for lease
- Use of maps showing areas outside of poverty or minority areas of concentration in which can be listed
- Contact with landlords
- 59% of all NBHA Section 8 families with children reside in low poverty census track in the NBHA's principal operation area at the end of 2008.

(e) **Wait List Procedures:**

The NBHA maintains separate waiting list for the following programs:

- Housing Choice Voucher Program
- Special Admissions of funds are awarded by HUD to targeted families (this is updated for the 2010 annual plan)

The waiting list is maintained in a computerized system and updated annually to keep only interested applicants on file ensuring that the waiting list is current.

2. **Financial Resources:**
 [24 CFR Part 903.7 9 (b)]

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2007 grants)		
a) Public Housing Operating Fund	3,975,850.00	
b) Public Housing Capital Fund	1,387,971.00	
	1,761,628.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	4,918,120.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self- Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	2,201,888.00	Offset Operating Expenses
4. Other income (list below)		
Nextel Towers	23,012.00	Offset Operating Expenses
Youghiogheny Communications	21,600.00	Expenses
Headstart Program Rentals	12,600.00	Offset Operating Expenses
4. Non-federal sources (list below)		
Total resources	14,302,699.00	

3.1. **Rent Determination Policies:** [24 CFR Part 903.7 9 (d)]

A. **Public Housing:**

(i) **Income Based Rent Policies:**

a. **Use of discretionary policies**

The NBHA employs discretionary policies for determining income based rent.

b. **Minimum Rent**

The NBHA has established a minimum rent of fifty (\$50.00) dollars

(ii) **Discretionary minimum rent hardship exemption policy:**

The minimum rent requirement may be waived due to certain financial hardships. The request for minimum rent hardship must be made in writing to the NBHA prior to the rent becoming delinquent. The NBHA will verify whether the hardship claimed is temporary or long term. Payment of the minimum is suspended immediately for ninety dates when a hardship is requested on one following conditions:

- a. The family has lost eligibility or is awaiting an eligibility determination to receive federal, state or local assistance, including a family having a non-citizen household member lawfully admitted for permanent residence and who entitled to public benefits but for Title VI of the Personal Responsibility and Work Opportunity Act of 1996
- b. The family income has decreased due to changed circumstances such as loss of employment.
- c. The family would be evicted as a result of imposing the minimum rent requirement
- d. There has been a death in the family; or
- e. There are other hardship situations by the NBHA on a case-by-case basis, i.e. alimony and child support

(iii) **Rent Re-determination:**

Between income re-examinations or at any time the family experiences an income increase, or decrease.

(iv) **Flat Rents:**

The NBHA has set market-based flat rents determined by using Section 8 Fair Market Rent (FMR).

3.2. **Section 8 Tenant-Based Assistance:**

(a) **Payment Standards:**

- The NBHA has set its payment standards to 97% of FMR.
- The payment standards are re-evaluated annually.

(b) **Minimum Rent:**

- The minimum rent has been set at fifty (\$50.00) dollars
- The NBHA has adopted discretionary minimum rent hardship exemption policies

4. **Operations and Management:** [24 CFR part 903.79(e)]

The NBHA is responsible for the maintenance of 804 dwelling units and all non-dwelling facilities and grounds. The NBHA uses both a centralized and decentralized system to provide maintenance services. Maintenance calls are taken at one centralized location and disbursed to appropriate locations. Property Managers/Director of Operations inspects work completed by Maintenance staff. Maintenance tasks include vacancy work orders, work orders generated by resident and by inspection of vacated units and annual inspections, lawn care and routine maintenance.

The following manuals are utilized as they establish rules, standards and the policies of the NBHA that govern maintenance:

- Admissions & Continued occupancy Policy
- Operations and Maintenance Plan

The NBHA has provided training on Pest Management Control to Property Managers, Director of Operations and all Maintenance Staff. Due to the density of the apartments under management and the history of local pest problems, emphasis will be placed on the control of cockroaches, bed bugs, rodents and termites. The NBHA use its Operations and Maintenance Plan to govern pest eradication.

5. **PHA Grievance Procedures:** [24 CFR Part 903.7 9 (f)]

A. **Public Housing:**

The NBHA has established written grievance procedures that adhere to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing. Residents and applicants must submit a request in writing to the office to initiate the grievance.

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

The NBHA has established informal review procedures for applicants to the Section 8 Tenant-Based Assistance Program and informal hearing procedures for families assisted by the Section 8 Tenant-Based Assistance Program as found in 24 CFR 982. Applicants or assisted families must contact the NBHA Section 8 Program to initiate the informal review and informal hearing processes.

6. **Designated Housing for Elderly and Disabled Families:** [24 CFR Part 903.7 9 (i)]

The NBHA is reviewing this process and does plan on applying for designation on several of our buildings for occupancy by elderly and disabled families. The buildings have not been determined to date.

7. **Community Service and Self-Sufficiency:** [24 CFR Part 903.7 9 (l)]

A. **NBHA Coordination with the Welfare (TANF) Agency:**

The NBHA maintains a good relationship with local TANF Agency. Coordination efforts between agencies provide:

- Client referrals
- Information sharing regarding mutual clients (for rent determinations and otherwise)

B. **Service and Programs offered to residents and participants:**

The NBHA will employ to enhance the economic and social self-sufficiency of assisted families in the following areas:

- Public housing admission policies
- Section 8 admissions policies
- Activities targeted to at-risk youth, or seniors
- Preference for working families

The NBHA has a written Section 3 Plan, the Property Managers maintain lists of residents and any skills they may have. Contractors are encouraged to hire NBHA residents should they need additional labor on their jobs.

8. **Safety and Crime Prevention:** [24 CFR Part 903.7 9 (m)]

The NBHA has observed lower-level crime, vandalism and/or graffiti throughout the developments. It has taken measures to educate the residents to empower them to take action through the local police department.

Through compiling resident, employee and police reports the NBHA determines what actions must be taken to ensure the safety of all residents. The following actions are taken in order to address the different needs:

- Installing camera's at front entrance of high-rises
- Meetings with local community police officer for discussions on safety

9. **Pets:** [24 CFR Part 903.7 9 (n)]

The New Britain Housing Authority has a pet policy for families and for elderly/disabled. The policy complies with state and federal regulations concerning the rights of residents to maintain pets in their respective dwelling units. The policy has a required pet deposit.

10. **Civil Rights Certifications:** [24 CFR Part 903.7 9 (o)]

At least annually the NBHA examines its programs to identify any impediments to fair housing choices within the programs administered. The City of New Britain's Consolidated Plan is reviewed annually to assure that our annual plan is consistent with the City's plan. Based on our program, examination and review of the City's Consolidated Plan, NBHA has recognized the lack of affordable mobility units as well as lack of hearing and vision impaired units for applicants. The Authority recently applied for ARRA competitive capital funds to convert four (4) of our units at Oval Grove to mobile accessible units, while four (4) other units would be converted to hearing and vision impaired units.

The Authority has bilingual staff that provides oral and written information in Spanish. We also have material translated in Polish as we have a large Polish speaking population in our elderly/disabled units.

The NBHA recently updated our Reasonable Accommodation Policy and forms for program participants to ensure fair housing goals are addressed consistently.

Additional Information:

A “Significant Amendment” or “Substantial Deviation/Modification” of the NBHA Annual or Five-Year Plan is defined as follows:

- Any modification or revision of the NBHA goals and objectives;
- Any change in admission policies or organization of the wait list;
- Any change to rent and/or charges;
- Additional of non-emergency work items not included in the current Annual or Five-Year Plan;
- Any change in the use of replacement reserve fund under the Capital Fund;
- Any change with regard to demolition or disposition;
- Any change with regard to designation, homeownership programs or conversion activities.

Note: Changes that are adopted in order to comply with revisions to HUD regulatory requirements will not be considered a significant amendment or substantial deviation/modification.

11. **Fiscal Year Audit:** [24 CFR Part 903.79 (p)]

The NBHA is required to have an audit conducted under section 5(h) (2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437 c(h)) The most recent audit completed was submitted to HUD without findings.

12. **Asset Management:** [24 CFR Part 903.79 (q)]

The NBHA continues to analyze its current public housing units in order to seek out other investment endeavors to maintain decent and affordable housing. Property Managers will continue to inspect their properties and recommend modernization projects to improve their properties. The NBHA is preparing specifications to seek consultants to assist the authority in redeveloping the Mount Pleasant Family Development.

13. **Violence Against Women Act:**

1. The Prudence Crandall Center in New Britain offers services to victims of domestic violence, shelter for women and children. Counseling for men is also provided.
2. NBHA will not terminate a public housing lease or Section 8 Program assistance to victims of actual or threatened domestic violence, dating violence or stalking. Housing Assistance will not be denied to an applicant if the applicant or immediate member of the applicant’s family is the victim of domestic violence, dating violence or stalking.
3. Resident meetings at time include programs on domestic violence. New Residents to our programs receive information concerning the NBHA’s policy on domestic violence, dating violence and stalking.

7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable. HOPE VI: The NBHA will apply for Hope VI funds, when made available, possibly not until 201 as preparations need to be made to apply. Plans are to demolish either 188 or 252 units located in MT. Pleasant which may also include Bond St elderly units. Other sources of funds will be considered such as CDGB, Housing Tax Credit, or HOME funds. Further, we will also work to apply for 202 funds for a vacant piece of property the authority received from HUD. We will also apply for conversion funds as a backup in case we do not receive HOPE VI funds.</i></p>
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>

9.0 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

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

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ability	Size	Location
Income <= 30% of AMI	27.4%	5	4	4	N/A	4	N/A
Income >30% but <=50% of AMI	60.5%	4	3	3	N/A	4	N/A
Income >50% but <80% of AMI	12.1%	3	2	2	N/A	3	N/A
Elderly	15.3%	5	4	3	N/A	N/A	N/A
Families with Disabilities	11%	5	4	3	5	N/A	N/A
Race/Ethnicity (White)	68.3%	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Black)	11.7%	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Asian Pacific)	3.6%	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Native American)	.3%	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Other)	16.1%	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Hispanic- any Race)	30.5%	N/A	N/A	N/A	N/A	N/A	N/A

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

- Other sources: (list and indicate year of information) CERC Town Profile, 2008

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

.Housing Needs of Families on the Waiting List

Waiting list type: (select one)

Section 8 tenant-based assistance

	# of families	% of total families	Annual Turnover
Waiting list total	106		10%
Extremely low income <=30% AMI	101	95.3	
Very low income (>30% but <=50% AMI)	5	4.7	
Low income (>50% but <80% AMI)	0	0	
Families with children	60	56.6	
Elderly families	26	24.5	
Families with Disabilities	17	16	
Race/ethnicity – White	88	83.0	
Race/ethnicity – Black	18	17.0	
Race/ethnicity- Hispanic	83	78.3	

Characteristics by Bedroom Size (Public Housing Only)

1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Is the waiting list closed (select one)? No Yes

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? 74

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list** Waiting list type:

Public Housing

	# of families	% of total families	Annual Turnover
Waiting list total	287		25%
Extremely low income <=30% AMI	272	94.8	
Very low income (>30% but <=50% AMI)	15	5.2	
Low income (>50% but <80% AMI)	0	0	
Families with children	199	69.6	
Elderly families	8	2.8	
Families with Disabilities	21	7.34	
Race/ethnicity – White	251	87.8	
Race/ethnicity -Black	33	11.5	
Race/ethnicity American Indian/ Alaska Native	1	.3	
Race/Ethnicity Multi Racial	1	.4	
Race/Ethnicity Hispanic (any race)	229	80.1	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	0	0	
1 BR	76	26.6	
2 BR	116	40.6	
3 BR	85	29.7	
4 BR	9	3.1	
5 BR	0	0	
5+ BR	0	0	

Is the waiting list closed (select one)? No Yes

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No
 Yes

Waiting list type: (select one)

- Section 8 tenant-based assistance
- Public Housing (Elderly)
- Combined Section 8 and Public Housing
- Public Housing Site-Based or sub-jurisdictional waiting list (optional)

If used, identify which development/sub jurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	63		20%
Extremely low income <=30% AMI	63	100	
Very low income (>30% but <=50% AMI)	0	0	
Low income (>50% but <80% AMI)	0	0	
Families with children	2	3.2	
Elderly families	23	36.5	
Families with Disabilities	31	49.2	
Race/ethnicity – White	55	87.3	
Race/ethnicity - Black	7	11.1	
Race/ethnicity- Hispanic (any race)	42	66.67	
Race/ethnicity – Asian	1	1.6	
Characteristics by Bedroom Size (Public Housing Only)			
0BR	0	0	
1 BR	63	100	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

Is the waiting list closed (select one)? No Yes

HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)?

Does the PHA expect to reopen the list in the PHA Plan year? No Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed?
No Yes

9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.**

- NBHA is on the Mayor's taskforce to end homelessness in New Britain
- NBHA continues to seek other housing opportunities for the residents of New Britain
- **NBHA has adopted policies to support and encourage work**
- **NBHA will apply for special purpose vouchers targeted for non-elderly families with disabilities**
- **NBHA will continue to carry out needed modification to public housing based on Section 504.**
- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- Apply for additional section 8 units should they become available
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- **Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**
- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations

10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The NBHA has started holding meetings in planning the redevelopment of MT Pleasant and plan to seek a consultant to assist the PHA in this process. We have improved on rent collections, improved our SEMAP scores and PHAS scores. We have out reached to our community partners in seeking support to provide job training and education to our residents. We have outreached to landlords and now on a quarterly basis send out a landlord newsletter. The NBHA is also under an MOA with HUD and we are just about completed all items on the MOA of 2009.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p>
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11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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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 5-Year and Annual PHA Plans. 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 and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 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. 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 Act 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 there under 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

11f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations

**Resident Advisory Board Meeting
Annual Plan
03/17/2009**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Lucille Attenello, Ribicoff, Lillian Rodriguez, Graham Building, Rosa Arroyo, Bond Street, Helen Zielinski, Bond Street, Loo Pacacha, NBHA, Attorney, Mary Royce, Executive Director, NBHA, Evelyn Rodriguez, Property Manager, Betty Evans, Property Manager

The following was discussed:

Everyone was introduced to one another, prior to beginning the process.

The NBHA Lease was discussed:

Page IV Term:
Page 2

Page 3, the air conditioners time period (duration April to September 30)

A monthly charge will be assessed for each air conditioner in the unit; during the period of April to September 30 of each year

Payment is the responsibility of tenant

**Resident Advisory Board Meeting
Annual Plan
03/31/2009**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Lucille Attenello, Ribicoff, Evelyn Rodriguez, Property Manager, and Betty Evans, Property Manager

The following was discussed:

Maintenance Fee Schedule to ensure it reflects the air conditioner charges

The Authority was going to research other authorities regarding rental

Chapter 7 Changes

Page 2 of 26 to read 7-I.B. Overview of Verification Requirements

The NBHA will verify information through the five(5) methods of verification acceptable (new) but not limited to

Page 5 of 26 Primary Documents we added birth certificate and social security card

Page 7 of 26 we removed age 6 or older in the first sentence for social security

Page 8 of 26 Absence of Adult Member we added family must provide evidence satisfactory to the NBHA

Page 9 of 26 Foster Children we added the word leave

Page 9 of 26 Was going to add scholarship information, too vague

Page 14 of 26 7.III.F. Net Income from rental property, we limited the statement to read The family provide;

2nd paragraph We included the following for the sentence to read: If schedule E was not prepared, the NBHA will require the family members involved in the rental of property to provide the self-certification on income and expenses for the year and may request documentation to support the statement including but not limited to:

Page 19 of 26 Eligible Child, needs to be updated, researching

**Resident Advisory Board Meeting
Annual Plan
04/28/2009**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Lucille Attenello, Ribicoff, Loo Pacacha, NBHA, Attorney, Evelyn Rodriguez, Property Manager, and Betty Evans, Property Manager

The following was discussed:

PIH 2001-27 (HA) the implementation of Public Law 106-504 regarding the eligibility of Citizens of the Freely Associated States for federally assisted housing

Authority Attorney review to ensure the current ACOP had the same language necessary as it applied to Chapter 7

Chapter 7 changes

Page 7 or 26; 7-II.B. Social Security Numbers [24 CFR 5.216 and HCV, p. 5-12]

All bullets were removed to have the sentence read; The PHA may also accept other documents as evidence if SSN is provided on the document

**Resident Advisory Board Meeting
Annual Plan
05/12/2009**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Loo Pacacha, NBHA, Attorney, Evelyn Rodriguez, Property Manager, and Betty Evans, Property Manager

The following was discussed:

Referred to PIH, Social Security, Maintenance Charges

No additional changes to chapter 7

Chapter 8

Page 2 of 10 Orientation Agenda: we removed the following language

Changed the topics to read, NBHA Grievance Procedures and Maintenance Charges

Page 3 of 10 8.I.D Modification to the lease, we put { } to the first sentence

Page 4 of 10 8.I. E. Security Deposits, last sentence will read, Subject to applicable laws, interest earned on Security Deposit may be refunded to the tenant annually on the move-in anniversary date and after vacating the unit.

Page 5 of 10 First paragraph, 2nd sentence, we remove the word total to read, tenant rent

Chapter 9

Page 3 of 10 1st paragraph, 2nd sentence we added, reported by the Family if at request

Page 7 of 10 2nd paragraph, 2nd sentence unit for more than 15 days

Chapter 10

No changes

**Resident Advisory Board Meeting
Annual Plan
06/23/09**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Loo Pacacha, NBHA, Attorney, Evelyn Rodriguez, Property Manager, Betty Evans, Property Manager, and Mary Brody, System Analyst

The following was discussed:

We debated the Social Security rule for illegal aliens, and pro rata, social security language according to 24 CFR Parts 5, 92, and 908

We also reviewed Chapter 7 again to ensure all language is included in ACOP

**Resident Advisory Board Meeting
Annual Plan
07/07/2009**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, , Loo Pacacha, NBHA, Attorney, and Betty Evans, Property Manager

The following was discussed:

Chapter 13

Page 1 of 16 Termination of Tenants, 2nd sentence, must was removed from the sentence, it now reads, gives less than a 30 days' notice

Page 2 of 16 add the word or on the 2nd line of first sentence between security number or joins the family

Page 4 of 16 Added a bullet to include gun information from the current lease

Page 4 of 16 added language to the 3rd bullet at the top of the page to read Discovery, after admission, of any inaccurate facts or omission of information that would have made the resident ineligible for housing or constitute fraud

We also discussed Bond Street and a/c charges and trying to figure out cost for the 08-09 calendar year for electricity use to hopefully, come up with a better dollar amount for a/c use per season

**Resident Advisory Board Meeting
Annual Plan
07/21/2009**

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Loo Pacacha, NBHA, Attorney, and Betty Evans, Property Manager

The following was discussed:

Chapter 14

No changes

Chapter 15

No changes

Resident Advisory Board Meeting
SECTION 8 Annual Plan
07/21/2009

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, Ethel Fuller, Vice President, Oval Grove Resident Council, Joanne White, Section 8 Supervisor, Loo Pacacha, NBHA, Attorney and Betty Evans, Property Manager

The following was discussed:

Chapter 1

No changes

Chapter 2

Page 2 of 12 we change the Authority name to NBHA throughout the paragraph as needed

Page 3 of 12 change spacing in the first paragraph

Page 5 of 12 Joint Custody of Children: 2nd paragraph, the sentence reads the NBHA will require a Copy of the court ordered custody agreement of families who stay.

ANNUAL AND FIVE-YEAR PLAN FISCAL YEAR 2010

PUBLIC HEARING Minutes

OCTOBER 13, 2009 @ 3:00 p.m.

The meeting was opened by the Executive Director, Mary E. Royce at 3:05 p.m., there being no one present during the public hearing, Ms. Royce noted the following;

The following policies were completely reviewed and revised to meet Local, State and Federal mandates:

- **Admissions and Continued Occupancy (ACOP)**
 - Chapter 4 – Local Preferences
 - Chapter 6 - page 3 joint custody requirements revised to “51%”
 - Chapter 7
 - 7-I.B. addition of verification examples
 - 7-I.D. addition of “Social Security card” to “Primary Documents”
 - 7-II.A. “Employer ID Card” and “Health and Human Services ID” removed
 - 7-II.B. “age 6 or older” removed to comply with regulations amendment to examples of accepted SSN verification
 - 7-II.C. evidence “satisfactory to NBHA” added to **Absence of Adult Member**
 - 7-III.F. “...but not limited to” added to documentation examples
 - Exhibit 7-1: examples of “Assets” added
 - Chapter 8
 - 8-I.B. Reorganized Agenda items (nothing added or deleted)
 - 8-I.E. Language regarding payment of security deposit interest revised

Chapter 9

- 9-I-C. Clarification of language regarding recerification of information provided by family
- 9-III.B. Visitor time changed to “15” days to agree with Chapter 3 and Lease

Chapter 13

- 13-I-A. Language changed regarding intent to vacate
- 13-II.D. Removed reference to “6 years of age”
- 13-III.A. Added reference to possession of illegal unregistered firearms Added reference to fraud

Modification of *Schedule of Legal Charges*” increasing “Sept 3 Entry Fee” to \$175.00 to coincide with Superior Court increase.

- **Section 8 Administrative Plan**
 - Minor grammatical changes throughout
 - Local Preferences

The following policies were reviewed and changes were made to meet current requirements:

- Cell phone Policy (to delete the language “or pager” from the policy)
- Capitalization Policy (To include a depreciation schedules in the policy)
- Confidentiality of SS Numbers Policy & Procedures (T insert the phase “18 and older” in the 2nd paragraph of the policy)
- Record Retention Policy (To include the retention of resident EIV reports for the duration of the residents’ tenancy, plus 3-years from the end of participation date in compliance as recommended by the Health and Human Services (HHS))
- Maintenance Service Charges to Tenants (To include air conditioner charges of \$45.00 per air conditioner during the summer months)

The following policies were added to the Policies & Procedures Manuals.

- Travel Expense Reimbursement Policy (As requested by HUD MOA)
- Fraud Policy (To prevent, detect and report fraud in the administration of its public housing programs as issued by HUD’s Office of Inspector General)

Ms. Royce adjourned the meeting at 3:15 p.m.

Mary E. Royce, Executive Director

Date:

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: Housing Authority of the City of New Britain Page 2 of 2

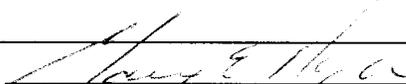
DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: ^{4c}	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U.S. Dept. of Housing & Urban Dev.	7. Federal Program Name/Description: CFDA Number, if applicable: _____	
8. Federal Action Number, if known: N/A	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>Mary E. Royce</u> Title: <u>Executive Director</u> Telephone No.: <u>860/225-3534 x 202</u> Date: <u>10/14/2009</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

Civil Rights CertificationU.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011**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 Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) 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, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of the City of
New Britain

PHA Name

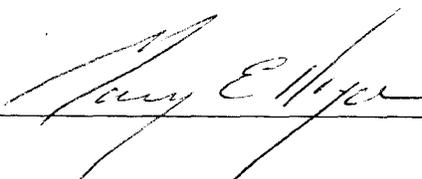
CT-005

PHA Number/HA Code

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

Name of Authorized Official
Mary E. RoyceTitle
Executive Director

Signature



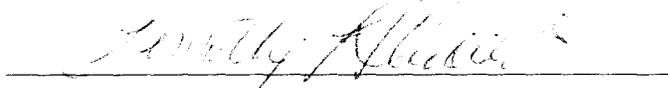
Date 12-7-09

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

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

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

I, Timothy T. Stewart the Mayor-City of New Britain certify that the Five Year and
Annual PHA Plan of the Housing Authority of the City of New Britain is consistent with the Consolidated Plan of
City of New Britain prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ___ 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 2010, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

HOUSING AUTHORITY OF THE CITY OF NEW BRITAIN
 PHA Name

CT-005
 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20__ - 20__

Annual PHA Plan for Fiscal Years 2010 - 2016

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

Name of Authorized Official	Title
MICHAEL A. CARRIER, ESQ.	CHAIRMAN
Signature	Date
	10/14/09

Part I: Summary					
PHA Name: New Britain Housing Authority	Grant Type and Number Capital Fund Program Grant No: CT26P00550110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2010 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 (may not exceed 20% of line 21) ³	137,929.00			
3	1408 Management Improvements	41,321.00			
4	1410 Administration (may not exceed 10% of line 21)	137,929.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	88,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	275,000.00			
10	1460 Dwelling Structures	600,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	35,000.00			
13	1475 Non-dwelling Equipment	62,377.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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

Part I: Summary

PHA Name: New Britain Housing Authority	Grant Type and Number: Capital Fund Program Grant No. C-26-09550110 Replacement Housing Factor Grant No. Date of CFFP:	FY of Grant: 2010 FY of Grant Approval:
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Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision of:)

Performance and Evaluation Report for Period Ending:
 Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18	1501 Utilization of Debt Service paid by the PHA				
18.0	1501 Utilization of Debt Service paid via System of Direct Payment				
19	1502 Contingency (may not exceed 5% of line 20)				
20	Amount of Annual Grant (sum of Lines 18 - 19)	1,387,971.00			
21	Amount of line 20 Related to LIHTC Activities				
22	Amount of line 20 Related to Section 501 Activities	600,000.00			
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	Date	Signature of Public Housing Director	Date
<i>Mary E. Joyce</i>	10-14-09		

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 over 250 units in management may use a 35% of CFF Grant for repair, etc.
⁴ RIF funds must be included here.

Part II: Supporting Pages								
PHA Name: New Britain Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P00550110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
CT502 OVAL GROVE A.	ADA CONVERSION	1460	4	400,000.00				
B.	APT CONVERSION TO FLATS	1460	4	200,000.00				
CT 503 KNAPP VILLAGE A.	RESURFACE PARKING LOTS	1450	3	150,000.00				
B.	REPAIR SIDEWALKS	1450		100,000.00				
CT 504 KENNEDY APTS	REPAIR SIDEWALKS	1450		25,000.00				
CT 507 GRAHAM APTS A.	REPLACE PATIO DOORS AND RAILINGS	1470	8	35,000.00				
B.	REPLACE COMMON AREA HEATERS	1475	27	18,000.00				
CT 509 D'AMATO APTS	REPLACE EMERGENCY FIRE PANEL	1475	1	44,377.00				
	SUBTOTAL			972,377.00				
	TOTAL			1,379,292.00				

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: New Britain Housing Authority				Federal FFY of Grant: 2010	
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	
CT502 OVAL GROVE A.	2012		2014		
B.	2012		2014		
CT 503 KNAPP VILLAGE A.	2012		2014		
B.	2012		2014		
CT 504 KENNEDY APTS	2012		2014		
CT 507 GRAHAM APTS A.	2012		2014		
B.	2012		2014		
CT 509 D'AMATO APTS.	2012		2014		

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.

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

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

Part I: Summary		
PHA Name: New Britain Housing Authority	Grant Type and Number Capital Fund Program Grant No: CT26P00550109 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:1)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	137,929.00	137,929.00		
3	1408 Management Improvements	25,000.00	18,047.00		
4	1410 Administration (may not exceed 10% of line 21)	137,929.00	137,929.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	88,000.00	88,000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	526,257.00	401,256.00		
11	1465.1 Dwelling Equipment—Nonexpendable	180,000.00	180,000.00		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	291,120.00	291,120.00		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary

PIA Name: New Britain Housing Authority	Grant Type and Number Capital Fund Program Grant No. C126P0033025 Replacement Housing Factor and Date of OHP	FY of Grant: 2009 FY of Grant Approval:
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Type of Grant

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 1)

Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18	1997 Collateralization or Debt Service paid by HUD/DA				
19	1999 Collateralization or Debt Service paid by System of Direct Payment				
20	Amount of Actual Grant (sum of lines 2-19)	1,387,971.00	1,379,292.00		
21	Amount of line 20 Related to OHP Activities	100,000.00	171,756.00		
22	Amount of line 20 Related to Section 864 Activities				
23	Amount of line 20 Related to Security - Self Help				
24	Amount of line 20 Related to Security - Other Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	Date	Signature of Public Housing Director	Date
<i>Mary E. Hoyle</i>	10/14/09		

¹ This to be completed on the Performance and Evaluation Report.
² This to be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 PHAs with fewer than 250 units of management may use 100% of CTF Grants for direct costs.
³ OHP funds shall be included here.

Part II: Supporting Pages								
PHA Name: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P00550109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE								
	DIRECTOR OF OPERATIONS	1410		39,000.00				
	CLERK OF THE WORKS	1410		64,000.00				
	EXECUTIVE ASSISTANT	1410		34,929.00				
	OPERATIONS	1406		137,929.00				
	MANAGEMENT IMPROVEMENTS	1408		18,047.00				
	ARCHITECT/ ENGINEER	1430		88,000.00				
	SUBTOTAL			381,905.00				

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: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P00550109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
CT 5-1	A. ADA CONVERSION	1460	4	233257.00	0			Move to CFP2010
Mount Pleasant	B. Lead Paint Removal	1460	252	50,000.00	85,878.00			IN DESIGN
CT 5-2	A. Lead Paint Removal	1460	160	50,000.00	85,878.00			IN DESIGN
Oval Grove	B. Site Lighting	1450	28bldg	0	125,000.00			in design
CT 5-3	A. Electrical Upgrades	1465.1	60	180,000.00	180,000.00			
Knapp Village								
CT 5-4	A. Paint and Carpet Common Areas	1460	1	40,000.00	49,125.00			in construction
Kennedy Apt								
CT-5	A. Paint and Carpet Common Areas	1460	1	60,000.00	69,125.00			in construction
Ribicoff Apt								
CT-7	A. Paint and Carpet Common Areas	1460	1	60,000.00	69,125.00			in construction
Graham Apt								
CT-9	A. Paint and Carpet Common Areas	1460	1	33,000.00	42,126.00			In construction
D'Amato	B. Elevator Upgrades	1475	2	291,120.00	291,120.00			IN DESIGN
	SUBTOTAL			997,377.00	997,377.00			
	TOTAL			1,379,282	1,379,282			

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: New Britain Housing Authority					Federal FFY of Grant: 2009
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	
CT5-1	A.	2011		2013	
	B.	2011		2013	
CT 5-2	A.	2011		2013	
CT 5-3	A.	2011		2013	
CT 5-4	A.	2011		2013	
CT 5-5	A.	2011		2013	
CT 5-7	A.	2011		2013	
CT5-9	A.	2011		2013	
	B.	2011		2013	

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 III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: New Britain Housing Authority					Federal FFY of Grant: 2009
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	
CT 5-1 B.	2011		2013		
CT5-2 A.	2011		2013		
B.	2011		2013		
CT5-3 A.	2011		2013		
CT 5-4 A.	2011		2013		
CT-5 A.	2011		2013		
CT-7 A.	2011		2013		
CT-9 A.	2011		2013		

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: New Britain Housing Authority	Grant Type and Number Capital Fund Program Grant No: CT26S00550109 Replacement Housing Factor Grant No: Date of CFFP: 3/18/2009	FFY of Grant: 2009 FFY of Grant Approval:

Type of Grant
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:2)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	134,000.00	134,000.00	134,000.00	2285.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	124,492.00	124492.00	124492.00	88346.00
8	1440 Site Acquisition				
9	1450 Site Improvement	0	250,800.00	0	0
10	1460 Dwelling Structures	552,336.00	552,336.00	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	950,800.00	700,000	624,440.00	0
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary	
PIA Name: New Britain Housing Authority	Grant Type and Number: Capital Fund Program Grant No.: 1769-05501-09 Replaces Grant Financing Factor Grant No.: Date of CFP: 3/18/09
FFY of Grant: 2009 FFY of Grant Approval:	

Type of Grant:
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (performance)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised*	Obligated	Expended
18a	20 - Contract for Janitor Service paid by the PUA				
18b	3000 - Contract for Janitor Service paid Via System of Direct Payment				
19	1502 - Contingency (may be revised 2% of line 20)				
20	Amount of Annual Funding (sum of lines 2 - 19)	1,761,628.00	1,510,828.00	748,932.00	88,346.00
21	Amount of line 20 Related to HF Activities				
22	Amount of line 20 Related to Section 304 Activities				
23	Amount of line 20 Related to Section 306 Costs				
24	Amount of line 20 Related to Section 309 Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director:	Date:	Signature of Public Housing Director:	Date:
<i>Ray E. Joyce</i>	10/14/09		

* To be completed for the performance and evaluation report
 * To be completed by the Performance and Evaluation Report or a Revised Annual Statement
 * PIA's with a 10% set-aside for management costs use 10% of CFP Grant for operations.
 * HUD funds will be included here.

Part II: Supporting Pages								
PHA Name: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26S00550109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
CT 5-2 A.	Window Replacement	1460	160	552,336.00	552336.00	0		
Oval Grove	Site Lighting Replacement	1450		0	250,800.00	0		
CT 5-3 A.	Replace Heating System	1465	11	200,000.00	221000.00	221,000		
Knapp Village								
CT 5-4 A.	Replace Heating System	1465	2	590,000.00	343900.00	343900.00		
Kennedy Apt								
B.	Refurbish Fire Pumps	1465	1	25,000.00	25000.00	0		
C.	Replace Roof Exhaust Units	1465		22,000.00	19814.00	19814.00		
CT-5 Ribicoff Apt	Refurbish Fire Pumps	1465	1	25,000.00	25000.00	0		
B.	Replace Roof Exhaust Units	1465		33,000.00	19813.00	19813.00		
CT-7 Graham Apt	Refurbish Fire Pumps	1465	1	25,000.00	25000.00	0		
B.	Replace Roof Exhaust Units	1465		30,800.00	19813.00	19813.00		
	SUBTOTAL			1,503,136.00	1,503,136.00	624,440.00	0	
	TOTAL			1,761,628.00	1,761,628.00	748,932.00	90,631.00	

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

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

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: New Britain Housing Authority					Federal FFY of Grant: 2009
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	
CT5-2 A.	3/18/2010		3/18/2012		
CT5-3 A.	3/18/2010		3/18/2012		
CT5-4 A.	3/18/2010		3/18/2012		
B.	3/18/2010		3/18/2012		
C.	3/18/2009		3/18/2012		
CT5-5 A.	3/18/2010		3/18/2012		
B.	3/18/2010		3/18/2012		
CT5-7 A.	3/18/2010		3/18/2012		
B.	3/18/2010		3/18/2012		
CT5-9 A.	3/18/2010		3/18/2012		

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

Part I: Summary						
PHA Name: New Britain Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P00550108, Rev 2 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2008 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) ³	134,531.00	138,797.00	138,797.00	138,797.00	
3	1408 Management Improvements	25,000.00	0			
4	1410 Administration (may not exceed 10% of line 21)	134,531.00	138,797.00	138,797.00	138,797.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	88,000.00	185,739.00	88,000.00	46,003.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	95,000.00	20,000.00			
10	1460 Dwelling Structures	329,000.00	711,378.00	49,000.00		
11	1465.1 Dwelling Equipment—Nonexpendable	55,000.00	35,668.00	25,668.00		
12	1470 Non-dwelling Structures	60,000.00	124,560.00	124,560.00		
13	1475 Non-dwelling Equipment	51,000.00	33,032.00	33,032.00		
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities ⁴	0				

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary

PHA Name: New Britain Housing Authority	Grant Type and Number: Capital Fund Program Grant No. 2009P00050108 Rev. 2 Replacement Housing Factor Grant No. Date of OIG:	FY of Grant: 2008 FY of Grant Approval:
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Type of Grant

Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: 2)

Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
18a	150 Collaborative Case Management paid by the PHA				
18b	6000 Collaborative Case Management via System of Care Program				
19	10% Contingency (only on revised 8/1/09 L.A.C. '09)				
20	Amount of Annual Grant - sum of lines 2-19	1,345,319.00	1,387,971.00	597,854.00	323,597.00
21	Amount of line 20 Related to LBP Activities		180,378.00		
22	Amount of line 20 Related to Section 594 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director	Date	Signature of Public Housing Director	Date
<i>[Signature]</i>	10/14/09		

This report shall be the Performance and Evaluation Report.
 It is to be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 * E, I, As with other LBP related to management by cap 100% of CIP funds for operations.
 * RIT funds shall be included here.

Part II: Supporting Pages								
PHA Name: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P00550108 Rev. 2 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE								
	DIRECTOR OF OPERATIONS	1410		37,000.00	39,000.00	39,000.00	27,212.00	
	CLERK OF THE WORKS	1410		62,000.00	64,000.00	64,000.00	64,000.00	
	EXECUTIVE ASSISTANT	1410		35,531.00	35,797.00	35,797.00	18,664.00	
	OPERATIONS	1406		134,531.00	138,797.00	138,797.00	138,797.00	
	MANAGEMENT IMPROVEMENTS	1408		25,000.00	0	0	0	
	ARCHITECT/ ENGINEER	1430		88,000.00	88,000.00	88,000.00	46,003.00	
	preliminary revitalization fees/costs	1430		0	97,739.00	0	0	
	SUBTOTAL			382,062.00	463,333.00	365,594.00	323,597.00	

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: New Britain Housing Authority			736,377.00			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
CT 5-1 A.	ADA Unit Conversions	1465.1	3	195,000.00	----			Moved to CFP 2010
Mount B.	Landscaping and Tree Removal	1450		100,000.00	----			Moved to CFP 2010
Pleasant C.	Replace Closet Doors	1460	252	250,000.00	0			moved
	D. Lead Paint Removal	1460	252	95,189.00	183,189.			In Design
CT 5-2 A.	Kitchen Rehab	1460	160	136,000.00	49,000.00	49,000.00		In construction
Oval Grove B.	Flue Pipe Replacement	1465.1	160	144,257.00	-----			Moved to CFP 2007
	C. Replace Closet Doors	1460	160		250,000.00			In BID Phase
	D. Site Lighting Improvements	1450	28 blds		20,000.00			In Design
	E. Rehab Playground & Playscape	1470	1	60,000.00		124,560.00		In Design
	F. Lead Paint Removal	1460	1	95,188.00	183,189.00			In Design
CT 5-3 A.	Electrical Upgrades	1465.1	60	180,000.00	----			Moved to CFP 2009
Knapp B.	Install Doorbells	1465.1	60		10,000.00			In Design
Village C.	Replace Closet Doors	1460	60		46,000.00			In Design
CT 5-4 A.	Paint and Carpet Common Areas	1460	6 th Flr	40,000.00	----			Moved to CFP 2009
Kennedy Apt B	Replace Security Camera and Intercom	1465	1	15,000.00	8,556.00	8,556.00		In construction
	C. Replace Mailboxes	1475	70	17,000.00	11,000.00	11,000.00		In construction
CT 5-5 A.	Paint and Carpet Common Areas	1460	9 th Flr	60,000.00	----			Moved to CFP 2009
Ribicoff Apt B.	Replace Security Camera and Intercom	1465	1	15,000.00	8,556.00	8,556.00		In construction
	C. Replace Mailboxes	1475	104	17,000.00	11,000.00	11,000.00		In construction
	SUBTOTAL			865,257.00	905,050.00	212,672.00		

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: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P00550108 Rev. 2 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
CT 5-7 A.	Paint and Carpet Common Areas		1460	9 th Flr	60,000.00	----			Moved to CFP 2009
Graham Apt B.	Replace Security Camera and Intercom		1465	1	15,000.00	8,556.00	8,556.00		In construction
	C. Replace Mailboxes		1475		17,000.00	11,032.00	11,032.00		In construction
	D. Addition of New Parking Lot		1450	12 Spaces	75,000	0			Work deleted-to cost prohibitive
CT 5-9 D'Amato Apt A.	Paint and Carpet Common Areas		1460	5 th Flr	33,000.00	0			Moved to CFP 2009
	SUBTOTAL				200,000.00	19,588.00	19,588.00		
	Total				1,345,319.00	1,387,971.00	597,854.00	323,597.00	

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: New Britain Housing Authority					Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
CT 5-1	A.	2010	----	2012	----	Moved to CFP 2009
	B.	2010	----	2012	----	Moved to CFP 2009
	C.		2010		2012	
	D.		2010		2012	
CT 5-2	A.	2010	----	2012	----	Moved to CFP 2007
	B.	2010	----	2012	----	Moved to CFP 2007
	C.		2010		2012	
	D.		2010		2012	
	E.		2010		2012	
	F.		2010		2012	
CT 5-3	A.	2010	----	2012	----	Moved to CFP 2009
	B.		2010		2012	
	C.		2010		2012	
CT 5-4	A.	2010	----	2012	----	Moved to CFP 2009
	B.	2010	2010	2012	2012	
	C.		2010		2012	

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

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: New Britain Housing Authority					Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
CT 5-5	A.	2010	----	2012	----	Moved to CFP 2009
	B.	2010	2010	2012	2012	
	C.		2010		2012	
CT 5-7	A.	2010	----	2012	----	Moved to CFP 2009
	B.	2010	2010	2012	2012	
	C.		2010		2012	
CT 5-9	A.	2010	----	2012	----	Moved to CFP 2009

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: New Britain Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P00550107 Rev. 3 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2007 FFY of Grant Approval:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) ³	134,531.00	141,766.00	141,766.00	141,766.00	
3	1408 Management Improvements	25,000.00	0	0		
4	1410 Administration (may not exceed 10% of line 21)	134,531.00	141,766.00	141,766.00	141,766.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	88,000.00	40,000.00	40,000.00	40,000.00	
8	1440 Site Acquisition					
9	1450 Site Improvement	30,000.00				
10	1460 Dwelling Structures	41,757.00,	1,027,481.00	1,050,575.00	220,126.00	
11	1465.1 Dwelling Equipment—Nonexpendable	18,557.00	66,651.00	66,651.00	66,651.00	
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities ⁴					

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part I: Summary

PIHA Name: New Britain Housing Authority	Grant Type and Number: Capital Fund Program Grant No: C17C200750167 Rev. 3 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2007 FFY of Grant Approval:
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Type of Grant:
 Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision # 3)
 Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1531 Collateralization or Debt Service paid by the PIHA				
18ba	9939 Collateralization or Debt Service paid Via System of Direct Payment				
19	1512 Contingency (may not exceed 5% of line 20)				
20	Amount of Initial Budget (as of lines 7-19)	1,345,319.00	1,417,664.00	1,417,664.00	610,309.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Staff Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director <i>Ray E. Joyce</i>	Date <i>10/14/09</i>	Signature of Public Housing Director	Date
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¹ Line completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PIHAs with a risk 200 or higher in a management plan may use 100% of CFFP Grants for operations.
⁴ RIF funds shall be included here.

Part II: Supporting Pages								
PHA Name: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P00550107 Rev. 3 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE								
	DIRECTOR OF OPERATIONS	1410		37,000.00	40,000.00	40,000.00	40,000.00	
	CLERK OF THE WORKS	1410		62,000.00	62,000.00	62000.00	48,495.36	
	EXECUTIVE ASSISTANT	1410		35,531.00	39766.00	39766.00	39,766.00	
	OPERATIONS	1406		134,531.00	141,766.00	141,766.00	141,766.00	
	MANAGEMENT IMPROVEMENTS	1408		25,000.00	0	0		
	ARCHITECT/ ENGINEER	1430		88,000.00	40,000.00	40,000.00	40,000.00	
	SUBTOTAL			382,062.00	323,532.00			

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: New Britain Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P00550107 Rev. 3 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds ,Obligated ²	Funds Expended ²	
CT 5-1 A.	Exterior Meter Box Repairs	1475.1	24	50,000.00	----			Moved to CFP 2008
B.	ADA Unit Conversions	1460	2	131,757.00	----			Moved to CFP 2008
CT 5-2 A.	Site Lighting Improvements	1450	28 bld	30,000.00				Moved to CFP 2008
B.	Heating System Upgrade(2006-2007 CFP)	1465	160	18,557.00	66,651.00	66,651.00	66,651.00	Under Contract
C.	Kitchen Replacement	1460	160	768,575	745,481.00	793,380.00		Under Contract/some moved to CFP2008
D.	Rehab Playground and Playscape	1470	1	70,000.00	-----			Moved to CFP 2008
CT 5-3 A.	Install Doorbells	1460	60	20,000.00	----			Moved to CFP 2008
B.	Replace Closet Doors	1460	60	50,000.00	-----			Moved to CFP 2008
C.	Kitchen Upgrades	1460	60		282,000.00	282,000.00	220,126.00	Under Contract
CT 5-4 A.	Replace Mailboxes	1465	70	10,500.00	----			Moved to CFP 2008
B.	Install New Phone Intercom	1475	1	20,000.00	-----			Moved to CFP 2008
CT 5-5 A.	Replace Mailboxes	1465	70	10,500.00	----			Moved to CFP 2008
B.	Install New Phone Intercom	1475	1	20,000.00	-----			Moved to CFP 2008
CT 5-7 A.	Replace Mailboxes	1465	70	10,500.00	----			Moved to CFP 2008
B.	Install New Phone Intercom	1475	1	20,000.00	-----			Moved to CFP 2008

CT 5-9 A.	Replace Unit Flooring and Paint	1460	58	170,000.00	----			Moved to CFP 2009
B.	Elevator Upgrades	1475	2	150,000.00	-----			Moved to CFP 2009
	SUBTOTAL			938,452.00	1,094,132.00	1,069,132.00	286,777.002	
	TOTAL			1,345,319.00	1,417,664.00			

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: New Britain Housing Authority					Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT 5-1	A.	9/2009	-----	9/2011	----
	B.	9/2009	-----	9/2011	----
CT 5-2	A.	9/2009	9/2009	9/2011	9/2011
	B.	9/2009	9/2009	9/2011	9/2011
	C.	9/2009	-----	9/2011	----
	D.	9/2009	-----	9/2011	----
CT 5-3	A.	9/2009	-----	9/2011	----
	B.	9/2009	-----	9/2011	----
	C.		09/2009		09/2011
CT 5-4	A.	9/2009	-----	9/2011	----
	B.	9/2009	-----	9/2011	----
CT 5-5	A.	9/2009	-----	9/2011	----
	B.	9/2009	-----	9/2011	----
CT 5-7	A.	9/2009	-----	9/2011	----
	B.	9/2009	-----	9/2011	----
CT 5-9	A.	9/2009	-----	9/2011	----
	B.	9/2009	-----	9/2011	----

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

Certification of Payments to Influence Federal Transactions

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

Applicant Name

HOUSING AUTHORITY OF THE CITY OF NEW BRITAIN

Program/Activity Receiving Federal Grant Funding

ANNUAL AND FIVE-YEAR PHA PLAN - FY2010

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

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

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

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

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

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

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

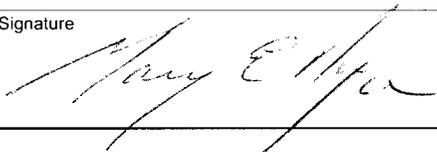
Name of Authorized Official

Mary E. Royce

Title

Executive Director

Signature



Date (mm/dd/yyyy)

10/14/2009

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Housing Authority of the City of New Britain

Program/Activity Receiving Federal Grant Funding

Annual and Five-year PHA Plan FY2010

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

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

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

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

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

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

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

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

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

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

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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

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

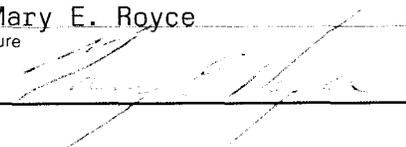
CT005000101 AMP 500
Bond St, 118 Bond Street, Knapp Village, 80 Pike St, Kennedy Apts. 300 East Main St
Ribicoff Apts. 67 Martin Luther King Dr., Graham Apts. 107 Martin Luther King Dr.
D'Amato Apts. 40 Chestnut Street, ALL LOCATED IN NEW BRITAIN, CT

CT005000001 AMP 501 Mount Pleasant, 16 Armistice Street, New Britain, CT 06 053
CT005000002 AMP 502 Oval Grove, 12 Dobek Road, New Britain, CT 06053

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

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

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

Name of Authorized Official	Title
Mary E. Royce	Executive Director
Signature	Date
	10/14/2009

X

Part I: Summary						
PHA Name/Number New Britain Housing Auth.		New Britain, Connecticut			<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year 2 FFY <u>2011</u>	Work Statement for Year 3 FFY <u>2012</u>	Work Statement for Year 4 FFY <u>2013</u>	Work Statement for Year 5 FFY <u>2014</u>
	CT501 MT PLEASANT CT502 OVAL GROVE CT503 KNAPP VILLAGE CT504 KENNEDY APTS CT505 RIBICOFF APTS CT507 GRAHAM APTS CT509 D'AMATO APTS					
B.	Physical Improvements Subtotal	Annual Statement	972,377.00	972,377.00	972,377.00	972,377.00
C.	Management Improvements		43057.00	43057.00	43,057.00	43,057.00
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		137,929.00	137,929.00	137,929.00	137,929.00
F.	Fees and Cost		88,000.00	88,000.00	88,000.00	88,000.00
G.	Operations		137,929.00	137,929.00	137,929.00	137,929.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		1,379,292.00	1,379,292.00	1,379,292.00	1,379,292.00
L.	Total Non-CFP Funds					
M.	Grand Total					

Part II: Supporting Pages – Physical Needs Work Statement(s)						
Work Statement for Year 1 FFY <u>2010</u>	Work Statement for Year <u>2</u> FFY <u>2011</u>			Work Statement for Year: <u>3</u> FFY <u>2012</u>		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	CT 503 KNAPP VILLAGE/ SIGHT LIGHTING UPGRADE		30,000.00	CT 501 MT PLEASANT/ ADA CONVERSIONS	9	900,000.00
Annual	BATHROOM UPGRADES	60	156,000.00			
Statement						
	CT 504 KENNEDY APTS/ BRICK REPOINTING		80,000.00	CT 505 RIBICOFF APTS/ RESURFACE BALCONIES	8	54,377.00
	REPLACE ASBESTOS BATHROOM FLOOR	70	120,000.00			
	CT 505 RIBICOFF APTS/ REHAB COMPLETE BATHROOM	104	270,400.00	CT 507 GRAHAM APTS/ REPLACE COMMON AREA HEATERS	27	18,000.00
	REPLACE COMMON AREA HEATERS	36	18,000.00			
	BRICK REPOINTING		200,000.00			
	CT 509 D'AMATO APTS/ INSTALL ADA PATIO DOOR	1	20,000.00			
	REPLACE GARAGE DOORS	2	25,000.00			
	REPLACE AIR HANDLING UNITS	2	52,977			
	Subtotal of Estimated Cost		\$972,377.00	Subtotal of Estimated Cost		\$972,377.00

