PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011

1.0 PHA Information
PHA Name: Greenwich Housing Authority PHA Code: CT019
PHA Type: ☐ Small ☐ High Performing ☒ Standard ☐ HCV (Section 8)
PHA Fiscal Year Beginning: (MM/YYYY): 01/2010

2.0 Inventory (based on ACC units at time of FY beginning in 1.0 above)
Number of PH units: 327 Number of HCV units: 325

3.0 Submission Type
☒ 5-Year and Annual Plan ☐ Annual Plan Only ☐ 5-Year Plan Only

4.0 PHA Consortia ☐ 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:

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.

6.0 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. See Attached

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. *Include statements related to these programs as applicable.* *NONE*

8.0 Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the *Capital Fund Program Annual Statement/Performance and Evaluation Report*, form HUD-50075.1, for each current and open CFP grant and CFFP financing.

8.2 Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the *Capital Fund Program Five-Year Action Plan*, 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.

8.3 Capital Fund Financing Program (CFFP).
☐ 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.

9.0 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.

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.**
10.0	**Additional Information**. Describe the following, as well as any additional information HUD has requested. (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. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

11.0	**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. (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only) (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only) (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only) (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only) (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. (g) Challenged Elements (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only) (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

5.1 Mission

The Housing Authority of the Town of Greenwich is committed to provide the opportunity to live in quality affordable housing through fiscally responsible asset management of our resources.

By developing partnerships with our residents and the larger community, we will support the improvement of their quality of life.

We intent to foster a sense of community based on mutual pride and trust.

5.2 Goals and Objectives

PHA Goal: Expand the supply of assisted housing

Objectives:
Apply for additional rental vouchers:
Leverage private or other public funds to create additional housing opportunities:
Acquire or build units or developments

PHA Goal: Improve the quality of assisted housing

Objectives:
Improve public housing management: (PHAS score) Continue to be a high performer
Improve voucher management: (SEMAP score) Be a high performer by 12/31/2010
Increase customer satisfaction:
Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)
Renovate or modernize public housing units: ongoing with capital funding
Demolish or dispose of obsolete public housing:
Provide replacement public housing:
Provide replacement vouchers:

PHA Goal: Increase assisted housing choices

Objectives:
Conduct outreach efforts to potential voucher landlords
Implement public housing site-based waiting lists:
Convert public housing to vouchers:

PHA Goal: Provide an improved living environment

Objectives:
Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
Implement public housing security improvements:

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

Objectives:

Increase the number and percentage of employed persons in assisted families:

Provide or attract supportive services to improve assistance recipients' employability:

Provide or attract supportive services to increase independence for the elderly or families with disabilities.

PHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:

Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:

Other PHA Goals and Objectives:

We have also adopted the following additional goals and objectives for the next five years.

Goal #1:

To manage the Housing Authority of the Town of Greenwich programs in an efficient and effective manner, and continue to be recognized as a high performer in PHAS and be recognized as a High Performer under SEMAP by 12/31/2010.

Objective:

The Housing Authority of the Town of Greenwich shall continue to excel in providing and training, a motivated, capable and efficient team of employees to operate as customer friendly and fiscally prudent leader in the public housing industry.

The Housing Authority of the Town of Greenwich shall continue to excel in providing services to its residents and participate in community activities.

The Housing Authority of the Town of Greenwich will continue to work with other community service providers to ensure that social services are available to all residents of the Housing Authority of the Town of Greenwich.

Goal #2:

To provide a safe and secure environment in the Housing Authority of the Town of Greenwich developments.

Objective:

The Housing Authority of the Town of Greenwich will continue to work with the Police Department and our residents to ensure safe neighborhoods with the understanding of the residents and police that safe neighborhoods are the responsibility of everyone, the resident, the police and not just the housing authority.

Goal #3:

To expand the range and quality of housing choices available to all the citizens of the Town of Greenwich, regardless of income or family characteristics.

Objective:

The Housing Authority of the Town of Greenwich will continue to work with sources other than HUD to provide additional financial resources which will seek to increase housing choices for the residents of Greenwich.

6A: PHA Plan Elements

1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait Lit Procedures.
   No Revision

2. Financial Resources
   Revised

3. Rent Determination
   No Revision

4. Operation and Management
   No Revision

5. Grievance Procedures
   No Revision

6. Designated Housing for Elderly and Disabled Families
   No Revision

7. Community Service and Self-Sufficiency
   No Revision

8. Safety and Crime Prevention
   No Revision

9. Pets
   No Revision

10. Civil Rights Certification
    No Revision

11. Fiscal Year Audit
    Revised

12. Asset Management
    No Revision

13. Violence Against Women Act (VAWA)
    No Revision

6 B. Copies Of The Plan Will Be At The Following Addresses

Greenwich Housing Authority Main Office	**249 Milbank Ave Greenwich, CT 06831**
Wilbur Peck Court	**Wilber Peck Court Greenwich, CT 06830**
Quary Knoll 1	**Quary Knoll Greenwich, CT 06830**

9. Statement of Housing Needs

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

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income <= 30% of AMI	669	5	5	4	4	3	
Income >30% but <=50% of AMI	513	5	5	4	4	3	
Income >50% but <80% of AMI	234	4	4	4	4	3	
Elderly	418	5	5	4	4	3	5
Families with Disabilities	89	4	4	4	4	4	5
White	686	4	4	4	4	4	
Black	77	4	3	4	4	4	
Hispanic	466	4	4	4	4	4	
Other							

Code 1-5: One being no impact, five being severe impact.

9.1 Strategy for Addressing Needs

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

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

Employ effective maintenance and management policies to minimize the number of public housing units off-line

Reduce turnover time for vacated public housing units

Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction

Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required

Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration

Participate in the Consolidated Plan development process to ensure coordination with broader community strategies

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

Apply for additional section 8 units should they become available

Leverage affordable housing resources in the community through the creation of mixed – finance housing

Pursue housing resources other than public housing or Section 8 tenant-based assistance

Strategy 1: Target available assistance to families at or below 50% of AMI

Employ admissions preferences aimed at families who are working

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

Affirmatively market to races/ethnicities shown to have disproportionate housing needs

10 A. Progress in Meeting PHA Goals and Objectives

The Housing Authority of the Town of Greenwich has established three goals and objectives as part of its PHA Agency Plan. The goals are stated below, along with responses indicating progress made toward achieving these goals and objectives.

Goal #1: To manage the Housing Authority of the Town of Greenwich programs in an efficient and effective manner, continue to be recognized as a high performer IN PHAS. The Housing Authority will also strive to be recognized as a high performer with regards to SEMAP by 2010.

Training opportunities have been provided to staff on an on-going basis, as well as staff meetings to brief employees on new or revised regulations and information concerning the Housing Authority.

The Housing Authority continues to work with a number of community social service providers in an effort to bring meaningful services and programs to residents.

Goal #2: To provide a safe and secure environment in the Housing Authority of the Town of Greenwich developments.

Increased security for both resident and Housing Authority employees has been a primary focus of attention. A twenty-four hour security system has been installed at some of our developments. At Agnes Morely Heights, there are security cameras at all entrances and exits. Cameras have also been installed at Wilbur Peck Court. This increased security has assisted the police in criminal investigations. Security cameras will also aid the Housing Authority in enforcement of lease provisions.

Goal #3: To expand the range and quality of housing choices available to people in the Town of Greenwich.

The Housing Authority applied for additional Housing Choice Vouchers for the Fiscal Year 2000, but was not funded. The Housing Authority was not eligible to apply in 2001 nor was it eligible to apply in 2002 or 2003 or 2004 or 2006 or 2007 or 2008 or 2009 as no funding was available. We have sent informational letters to local realtors and landlords, promoting the Section 8 program.

The Housing Authority is coordinating the development of 24 units of affordable housing within the Town of Greenwich. The Greenwich Housing Authority as the preferred developer for these 24 units. The GHA has constructed 4 condos for homeownership by low income families. All 4 units are complete and have been sold.

The Housing Authority is implementing a plan to demolish and rebuild Quarry Knoll I. The Housing Authority plans to build 36 elderly units on land currently leased to the Housing Authority by the Town of Greenwich. These units will be constructed using proceeds from the tax credit program.

10 b. Significant Amendment and Substantial Deviation/Modification.

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Housing Authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

11 a. b. c. & d:

See Attached

11 f:

No Resident Advisory Comments

11 g:

No Challenged Elements

11 h:

Capital Fund Annual Statements and Performance and Evaluation Reports Attached

11 i:

Capital Fund Program 5-Year Action Plan Attached

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 thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information
Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory
Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type
Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia
Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan
Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan**.**

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

(a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.

(b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central off ice of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

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

3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.

4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.

5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.

6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1**) development name and number; **2**) designation type; **3**) application status; **4**) date the designation was approved, submitted, or planned for submission, and; **5**) the number of units affected.

7. **Community Service and Self-Sufficiency.** A description of: (**1**) Any programs relating to services and amenities provided or offered to assisted families; (**2**) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**

8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.

10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.

11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.

12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.

13. **Violence Against Women Act (VAWA).** A description of: **1)** Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; **2)** Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and **3)** Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

(a) Hope VI or Mixed Finance Modernization or Development. **1)** A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and **2)** A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm

(b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: **(1)** A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and **(2)** A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm
Note: This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: **1)** A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; **2)** An analysis of the projects or buildings required to be converted; and **3)** A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm

(d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.

(e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

(a) To submit the initial budget for a new grant or CFFP;

(b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and

(c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

1. At the end of the program year; until the program is completed or all funds are expended;

2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and

3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

9.1 Strategy for Addressing Housing Needs. Provide a 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:** Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

(a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan**. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

(b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

(c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

(a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*

(b) Form HUD-50070, *Certification for a Drug-Free Workplace* **(PHAs receiving CFP grants only)**

(c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* **(PHAs receiving CFP grants only)**

(d) Form SF-LLL, *Disclosure of Lobbying Activities* **(PHAs receiving CFP grants only)**

(e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* **(PHAs receiving CFP grants only)**

(f) Resident Advisory Board (RAB) comments.

(g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.

(h) Form HUD-50075.1**, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (Must be attached electronically for PHAs receiving CFP grants only).** See instructions in 8.1.

(i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* **(Must be attached electronically for PHAs receiving CFP grants only).** See instructions in 8.2.

GREENWICH HOUSING AUTHORITY

Violence Against Women Act

The Greenwich Housing Authority provides or offers the following activities, services, or programs that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

The Violence against Women Act protects tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them. Generally, the law provides that criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy, or occupancy right if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse. The law also provides that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim or that violence and will not be "good cause" for termination of the assistance, tenancy, or occupancy rights of a victim of such violence.

It is the Housing Authority's plan that future/current residents of the public housing program and participants of the Housing Choice Voucher Program will be given a copy of PIH Notice 2006-42. Residents of the Public Housing complexes will be provided this notice when the lease is executed, or upon recertification while participants of the HCV Program will be apprised during their briefing session or upon recertification. The contents therein will be explained to the family members that attend these appointments.

The requirement contained in the law that precludes eviction based on domestic violence, dating violence, or stalking will be explained to new landlords and those currently involved in the program at time of recertification. During the lease period, the landlords will be advised of the VAWA requirements should tenant-eviction because of actions become a reality.

Landlords of/and new participants to the Housing Choice Voucher Program or families relocating to a different unit will be required to complete the reissued Housing Assistance Payments Contract and Tenancy Addendum that incorporated the restrictions of the Act.

Families currently residing in the Public Housing developments, as well as the HCV participants who have not submitted a Request for Tenancy Approval, will be notified of the safe-guards against eviction/termination, as well as the requirement for certification and verification.

Any family who requests relief from eviction or termination because of domestic violence, dating violence, or stalking will be required to submit the Certification Form and provide restraining orders, police reports, letters from shelters, or other such documentation as necessary to verify the request. Additionally, the Housing Authority will obtain information from the local police department as to the nature and type of police calls made to the respective address as further verification.

HOUSING AUTHORITY OF THE TOWN OF GREENWICH

VIOLENCE AGAINST WOMEN ACT POLICY

1.0 **GOALS & ACTIVITIES**: The purpose of this policy is to reduce domestic violence, dating violence, and stalking and to prevent homelessness by:

a. protecting the safety of victims;
b. creating long-term housing solutions for victims;
c. building collaborations among victim service providers; and
d. assisting HATG to respond appropriately to the violence while maintaining a safe environment for HATG, employees, tenants, applicants, Section participants, public housing program participants and others.

The policy will assist the HATG in providing rights under the Violence Against Women Act to its applicants, public housing residents, Section 8 participants and other program participants.

2.0 **MISSION STATEMENT**: HATG's policy is to comply with the 2005 VAWA pub. L 109-162; Stat.2960 signed into law on January 5, 2006 and codified at 42 U.S.C. § 1437d (1) and 1437 (d), (o) & 1 and (u). HATG shall not discriminate against an applicant, public housing resident, Section 8 program participant or other program participant on the basis of the rights or privileges provided under the VAWA.

The Policy is incorporated into HATG's "Tenant Selection and Assignment Policy" and "Section 8 Program Administrative Plan".

3.0 **CERTIFICATION AND CONFIDENTIALITY**:

3.1 **Failure to provide certification Under 3.2 and 3.3:** The person shall provide complete and accurate certifications to HATG, owner or property manager within 14 business days after the party requests in writing that the person completes the certifications. If the person does not provide a complete and accurate certification within the 14 business days, HATG, the owner or property manager may take action to deny or terminate participation or tenancy under; 42 U.S.C. § 1437 1 (5) & (6); 42 U.S.C. § 1437 (d) (c) (3); 42 U.S.C. 7 1437f (c) (9); 42 U.S.C. § 1437f (d)(1)(B) (ii) & (iii); 42 U.S.C. § 1437f (o)(7)(C) & (D); or 42 U.S.C. § 1437f (o)(20) or for other good cause.

3.2 **HUD Approved Certification**: For each incident that a person is claiming is abuse, the person shall certify to HATG, owner or property manager their victim status by completing a HUD approved certification form. The person shall certify the date, time and description of the incidents, that the incidents are bona fide incidents of actual or threatened abuses and meet the requirements of VAWA and this Policy. The person shall provide information to identify the perpetrator including, but no limited to the

name and, if known, all alias names, date of birth, address, contact information such as postal, e-mail or internet address, telephone or facsimile number or other information.

3.3 **Other Certification**: A person who is claiming victim status shall provide to HATG, an owner or manager: (a) documentation signed by the victim and an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional from whom the person has sought assistance in addressing domestic violence, dating violence or stalking or the effects of the abuse, in which the professional attests under penalty of perjury (28 U.S.C. § 1746) to the professional's belief that the incident(s) in question are bona fide incidents of abuse; or (b) a federal, state, tribal, territorial, local police or court record.

3.4 **Confidentiality**: HATG, the owner and/or property manager shall keep all information provided to HATG under this Section confidential. HATG, owner and/or property manager shall not enter the information into a shared database or provide to any related entity except to the extent that:

(a) The victim requests or consents to the disclosure in writing:
(b) The disclosure is required for:

(i) Eviction from public housing under 42 U.S.C. § 1437 I (5) & (6) (See Section 5 in this Policy)

(ii) Termination of Section 8 assistance under 42 U.S.C. § 1437f (c)(9); 42 U.S.C. § 1437f (d)(I)(B)(ii) & (iii); 42 U.S.C. & 1437f (O)(7)(C)&(D); or 42 U.S.C. & 1437f(o)(20)(See Section 4 in this Policy; or

(c) The disclosure is required by applicable law.

3.5 **Compliance Not Sufficient to Constitute Evidence of Unreasonable Act**:

The HATG, owner or manager compliance with Section 3.1,3.2 and 3.3 shall alone not be sufficient to show evidence of an unreasonable act or omission by them.

4.0 APPROPIATE BASIS FOR DENIAL OF ADMISSION, ASSISTANCE OR TENANCY:

4.1 HATG shall not deny participation or admission to a program on the basis of a person's victim status, if the person otherwise qualifies for admission of assistance.

4.2 In incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be a serious or repeated violation of the lease by the victim and shall not be good cause for denying to a victim admission to a program, terminating Section 8 assistance or occupancy rights, or eviction of a tenant.

4.3 Criminal activity directly related to domestic violence. Dating violence, or Stalking engaged in by a member of tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim of that domestic violence, dating violence or stalking.

4.4 Notwithstanding Section 4.1. 4.2 and 4.3 HATG, an owner or manager may bifurcate a lease to evict, remove or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without evicting, removing, terminating assistance to or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. 42 U.S.C. § 1437d (1)(6)(B).

4.5 Nothing in Section 4.1and 4.3 shall limit the authority of Greenwich, an owner or manager, when notified, to honor a court order addressing rights of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members when the family breaks up.

4.6 Noting in Section 4.1, 4.2 and 4.3 limits HATG, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However, HATG, owner or manager may not hold a victim to a more demanding standard.

4.7 Nothing in Section 4.1, 4.2 and 4.3 limits HATG, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the HATG, owner or manager can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.

4.8 Noting in Section 4.1, 4.2 or 4.3 limits HATG, an owner or manager's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including, but not limited to, acts of physical violence or stalking against family members or others.

4.9 A Section 8 recipient who moves out of a assisted dwelling unit to protect their health or safety and who: (a) is a victim under this policy; (b) reasonably believes he or she was imminently threatened by harm from

further violence if he or she remains in the unit; and (c) has complied with all others obligations of the Section 8 program may receive a voucher and move to another Section 8 jurisdiction.

4.10 A public housing tenant who wants a transfer to protect their health or safety and who: (a) is victim under this policy; (b) reasonably believes he or she was imminently threatened by harm from further violence if he or she remains in the units; and (3) has complied with all other obligations of the public housing income program may transfer to another HATG unit, receive a Section 8 Voucher and stay in Connecticut or move to another Section 8 jurisdiction.

5.0 **ACTIONS AGAINST A PERPETRATOR**: HATG may evict, terminate assistance, deny admission to a program or trespass a perpetrator from its property under this policy. The victim shall take action to control, or prevent the domestic violence, dating violence, or stalking. The action may include, but is not limited to: (a) obtaining and enforcing a restraining or no contact order or order for protecting against the perpetrator; (b) obtaining and enforcing a trespass against the perpetrator; (c) enforcing HATG or law enforcement's trespass of the perpetrator (d) preventing the delivery of the perpetrator's mail to the victim's unit; (e) providing identifying information listed in 3.2 and (f); and other reasonable measures.

6.0 **NOTICE TO APPLICANTS, PARTICIPANTS, TENANTS AND SECTION 8 MANAGERS AND OWNERS**: HATG shall provide notice to applicants, participants, tenants, managers and owners of their rights and obligations under Section 3.4 Confidentiality and Section 4.0 Appropriate Basis for Denial or Admission, Assistance or Tenancy.

7.0 **REPORTING REQUIREMENTS**: HATG shall include in its 5-year plan a statement of goals, objectives, policies or programs that will serve the needs of victims: HATG shall also include a description of activities, services or programs provided or offered either directly or in partnership with service providers to victims, to help victims obtain or maintain housing or to prevent the abuse or to enhance the safety of victims.

8.0 **CONFLICT AND SCOPE**: This Policy does not enlarge HATG's duty under any law, regulation or ordinance. If this Policy conflicts with the applicable law, regulation or ordinance, the law regulation or ordinance shall control. If this Policy conflicts with another HATG policy such as its Statement of Policies or Section 8 Administration Plan, this Policy will control.

9.0 **AMENDMENT:** The Executive Director may amend this policy when it is reasonable necessary to effectuate the Policy's intent, purpose or interpretation. The proposed amendment along with the rationale for the amendment shall be submitted to the Executive Director for consideration. Where reasonably necessary, the Executive Director may approve the amendment. The amendment shall be effective and incorporated on the date the Executive Director signs the amendment.

HOUSING AUTHORITY OF THE TOWN OF GREENWICH

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE OR STALKING

Certification must be made as provided in Section A and either B, or Section C below:

---

1. Date delivered to resident: _____.
2. Must complete and return form by_____ (14 business days after resident's receipt).
3. If cannot complete form by this date, contact_____ at _____.

A. **RESIDENT/APPLICANT MUST COMPLETE:**

Attach complete and sign HUD Form 50066-copy attached

B. **CERTIFICATION IS MADE BY PROVIDING POLICE REPORT OR COURT RECORD:**

1. Name of the victim of domestic violence, dating violence or stalking: _____
2. Victim address: _____
3. Head of Household on lease ,if not the victim: _____
4. Perpetrator's name, if known: _____
5. If perpetrator's name is not known, explain why: _____
6. Perpetrator's relation to victim: _____
7. Date and description of the qualifying incidents: _____

8. Certification of the violence:

Attached is a copy of a police report, temporary, or permanent restraining order, or other police or court record relating to the violence.

I hereby certify that the description of an incident, or incidents of domestic violence, dating violence or stalking set forth in the attached police report, or court record is true and correct.

Signature of resident: _____ Dated: _____

C. **IF CERTIFICATION IS BY AN EMPLOYEE, AGENT OR VOLUNTER OF A VICTIM SERVICE PROVIDER, ATTORNEY, OR MEDICAL PROFESSIONAL FROM WHOM THE VICTIM HAS SOUGHT HELP IN ADDRESSING DOMESTIC VIOLENCE, DATING VIOLENCE, OR STALKING OR ITS EFFECTS:**

The SERVICE PROVIDER OR PROFFESIONAL must complete this section:

1. Name of the victim of domestic violence, dating violence or stalking: _____
2. Victim's address: _____
3. Head of Household on lease, if not the victim:

   _____
4. Perpetrator's name. If known: _____
5. If perpetrator's name is not known, explain why:

   _____

   _____
6. Perpetrator's relation to victim: _____
7. Dates and description of the qualifying incidents:

   _____

   _____

   _____

   (Attach additional seat if necessary)
8. Certification of the violence.

   A professional who helped the victim address the violence must complete the following section:

   1. Name of person Completing this section: _____
   2. What category best describes you? ____Attorney _____Medical Professional _____Victim Service Provider
   3. Title _____ Phone# _____
   4. Agency / Business Name: _____
   5. Address: _____

I hereby certify under penalty of perjury that the foregoing is true and correct and believe that the incident(s) described above are bona fide incidents of abuse.

Signature: _____ Date Signed: _____

Attested to as true and correct:

Signature of the victim: _____ Date Signed: _____

Part I: Summary

PHA Name/Number **Greenwich Housing Authority** CT19			Locality (Greenwich/Fairfield/Connecticut)		☒**Original 5-Year Plan** ☐**Revision No:**	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY2011	Work Statement for Year 3 FFY2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	335,606	335,606	335,606	285,606
C.	Management Improvements					50,000
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other (Fees & Costs)		65,000	65,000	65,000	65,000
G.	Operations		100,000	100,000	100,000	100,000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		500,606	500,606	500,606	500,606
L.	Total Non-CFP Funds					
M.	Grand Total		500,606	500,606	500,606	500,606

Part I: Summary (Continuation)

Greenwich Housing Authority CT19			Locality (Greenwich/Fairfield/Connecticut)		☒Original 5-Year Plan ☐Revision No:	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
		Annual Statement				
1406	Operations		100,000	100,000	100,000	100,000
1408	Computer Upgrades					50,000
1430	Fees and Costs		65,000	65,000	65,000	65,000
1460	Wilbur Peck Court CT19-1		335,606	335,606	335,606	218,106
1460	Quarry Knoll CT19-2					31,500
1460	AMH CT19-3					36,000

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

Work Statement for Year 1 FFY 2009	Work Statement for Year 2 FFY 2011			Work Statement for Year:3 FFY 2012		
	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	**Wilbur Peck Court CT19-1**			**Wilbur Peck Court CT19-1**		
Annual	Heating System Upgrades	110	215,300	Kitchen Upgrades	110	335,606
Statement	Kitchen Upgrades		120,306			
	Subtotal of Estimated Cost		$ 335,606	Subtotal of Estimated Cost		$ 335,606

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

Work Statement for Year 1 FFY 2010	Work Statement for Year 3 FFY 2013			Work Statement for Year: 4 FFY 2014		
	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	**Wilbur Peck Court CT19-1**			**Wilbur Peck Court CT19-1**		
Annual	Paving / walks	110	170,000	Replace bathrooms	110	218,106
Statement	Lighting/Electrical	110	60,000			
	Replace bathrooms	110	105,606	**Quarry Knoll CT19-2**		
				Paving / walks	50	4,500
				Siding	50	4,500
				Roofs	50	4,500
				Flooring	50	4,500
				Lighting/Electrical	50	4,500
				Exhaust Fans	50	4,500
				Plumbing Upgrades	50	4,500
				AMH CT19-3		
				Windows	150	4,500
				Lighting/Electrical	150	4,500
				Alarm System	150	4,500
				Electric Heat	150	4,500
				Exhaust Fans	150	4,500
				AC Upgrade	150	4,500
				Hot water heater	150	4,500
				Plumbing upgrades	150	4,500
	Subtotal of Estimated Cost		$ 335,606	Subtotal of Estimated Cost		$ 285,606

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011		Work Statement for Year: 3 FFY 2012	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide - operations	100,000	HA Wide - operations	100,000
Annual				
Statement				
	1430 – Fees and Cost	65,000	1430 – Fees and Cost	65,000
	Subtotal of Estimated Cost	$165,000	Subtotal of Estimated Cost	$165,000

Part III: Supporting Pages – Management Needs Work Statement(s)

Work Statement for Year 1 FFY 2010	Work Statement for Year 4 FFY 2013		Work Statement for Year: 5 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA Wide - operations	100,000	HA Wide - operations	100,000
Annual				
Statement	1430 – Fees and Cost	65,000	1430 – Fees and Cost	65,000
			HA Wide - computer	50,000
	Subtotal of Estimated Cost	$165,000	Subtotal of Estimated Cost	$215,000

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: Greenwich Housing Authority **249 Milbank Avenue** **Greenwich** **CT, 06830**	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2010** **FFY of Grant Approval:**

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

Line	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]	100,000			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	65,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	335,606			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [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.

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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950110 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2010** **FFY of Grant Approval:**

Type of Grant

☒ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☐ **Revised Annual Statement (revision no:)**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	500,606			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Anthony Johnson	**Date**	**Signature of Public Housing Director**	**Date**
Anthony 2. J	11-1-09		

[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 under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Part II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950110 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]	
PHA Wide	Operations	1410		55,000				
PHA Wide	Consulting, & advertising	1430		65,000				
CT19-1 Wilbur Peck Court	Heating System Upgrades	1460	110	335,606				

[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.

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950110 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]	

[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.

form **HUD-50075.1** (4/2008)

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	
HA Wide	9/14/12		9/14/14		
CT19-1 Wilbur Peck Court	9/14/12		9/14/14		

[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.

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	

[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: Greenwich Housing Authority **249 Milbank Avenue** **Greenwich** **CT, 06830**	**Grant Type and Number** Capital Fund Program Grant No: CT26SO1950109 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:)**
☒ **Performance and Evaluation Report for Period Ending: 6/30/09** ☐ **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)	59,087		0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	70,905		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	200,000			
10	1460 Dwelling Structures	260,887		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [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.

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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26S01950109 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:)**

☒ **Performance and Evaluation Report for Period Ending: 6/30/09** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	590,879	0	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs	200,000			
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Anthony Johnson	**Date**	**Signature of Public Housing Director**	**Date**
Anthony 2. Johnson	11-1-09		

[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 under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26SO1950109 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	Administration	1410		59,087		0	0	
PHA Wide	Consulting, & advertising	1430		70,905		0	0	
CT19-1 Wilbur Peck Court	Exterior Upgrades / landscaping	1460		200,000		0	0	
CT19-1 Wilbur Peck Court	Security System	1460		200,000		0	0	
CT19-1 Wilbur Peck Court	Entry Doors	1460		60,887		0	0	

[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.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26SO1950109 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]	

[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.

form **HUD-50075.1** (4/2008)

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	
HA Wide	3/18/10		3/18/12		
CT19-1 Wilbur Peck Court	3/18/10		3/18/12		

[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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830					**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	

[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: Greenwich Housing Authority **249 Milbank Avenue** **Greenwich** **CT, 06830**	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950109 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: 6/30/09** ☐ **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)	55,000	50,000	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	65,000	65,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	380,606	385,606	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [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.

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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950109 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: 6/30/09** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	500,606	500,606	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Anthony Johnson	**Date**	**Signature of Public Housing Director**	**Date**
Anthony Z. Johnson	11-1-09		

[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 under 250 units in management may use 100% of CFP Grants for operations.
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form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950109 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	Administration	1410		55,000	50,000	0	0	
PHA Wide	Consulting, & advertising	1430		65,000	65,000	0	0	
CT19-1 Wilbur Peck Court	Roof Replacement	1460		380,606	385,606	0	0	

[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.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950109 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]	

[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.

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	
CT19-1 Wilbur Peck Court	9/14/11		9/14/13		

[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.

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	

[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: Greenwich Housing Authority **249 Milbank Avenue** **Greenwich** **CT, 06830**	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950108 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2008** **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: 6/30/09** ☐ **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]	0	45,000		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	45,000	0	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	45,000	45,000	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	291,802	130,000	0	0
10	1460 Dwelling Structures	0	175,386.56	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	85,000	71,415.44	0	0
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.

form **HUD-50075.1** (4/2008)

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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950108 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2008** **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: 6/30/09** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	466,802	466,802	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Anthony Johnson	**Date**	**Signature of Public Housing Director**	**Date**
Anthony 2. J	11-1-09		

[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.
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[4] RHF funds shall be included here.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950108 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	Administration	1410		45,000	45,000	0	0	
PHA Wide	Consulting, & advertising	1430		45,000	45,000	0	0	
PHA Wide	Trucks	1475		85,000	71,415.44	0	0	
CT19-1 Wilbur Peck Court	Parking Lot and Landscaping	1450		291,802	100,000	0	0	
CT19-2 Quarry Knoll	Sidewalk Repairs	1450		0	30,000			
CT19-1 Wilbur Peck Court	Window Replacement	1460		0	175,386.56	0	0	

[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.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950108 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]	

[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.

form **HUD-50075.1** (4/2008)

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	
HA Wide	6/13/10		6/13/12		
CT19-1 Wilbur Peck Court	6/13/10		6/13/12		
CT19-2 Quarry Knoll	6/13/10		6/13/12		

[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.

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	

[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: Greenwich Housing Authority **249 Milbank Avenue** **Greenwich** **CT, 06830**	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950107 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2007** **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: 6/30/09** ☐ **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]	0	28,629.31	0	0
3	1408 Management Improvements	25,000	25,000	25,000	
4	1410 Administration (may not exceed 10% of line 21)	45,000	25,000	25,000	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	80,000	80,000	32,251.55	0
8	1440 Site Acquisition				
9	1450 Site Improvement	49,641.00	28,750.00	28,750.00	0
10	1460 Dwelling Structures	183,569.00	156,693.69	156,693.69	156,693.69
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	55,000	95,000	95,000	425
13	1475 Non-dwelling Equipment	20,000	19,137	19,137	19,137
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.

form **HUD-50075.1** (4/2008)

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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950107 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2007** **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: 6/30/09** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	458,210	458,210	381,832.24	176,255.69
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs	50,000	11,176.29	11,176.29	11,176.29
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director Anthony Johnson	**Date**	**Signature of Public Housing Director**	**Date**
Anthony J. Johnson	11-[redacted]-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 under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950107 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	Operations	1406		0	28,629.31	0	0	
PHA Wide	Management Improvements	1408		25,000	25,000	25,000	0	
PHA Wide	Administration	1410		45,000	25,000	25,000	0	
PHA Wide	Consulting, & advertising	1430		80,000	80,000	32,251.55	0	
CT19-2 QKI	QK walks	1450		49,641	0	0	0	
CT19-1 WPC	Replace basketball court	1450		0.00	28,750.00	28,750.00	0	
CT19-3 AMH	Exterior Upgrades	1460		33,569	145,517.40	145,517.40	145,517.40	
CT19-3 AMH	Bathroom Upgrades	1470		0	95,000.00	95,000.00	425	
CT19-3 AMH	Security system upgrades	1460		20,000	11,176.29	11,176.29	11,176.29	
CT19-3 AMH	Finance Office furniture	1475		20,000	19,137.00	19,137.00	19,137.00	
CT19-3 AMH	Finance office upgrades	1470		25,000	0	0	0	
CT19-1 WPC	Laundry Upgrades	1470		30,000	0	0	0	
CT19-1 WPC	Security Cameras	1460		30,000	0	0	0	
CT19-1 WPC	Stair Repair	1460		65,000	0	0	0	
CT19-1 WPC	Balcony Repair	1460		35,000	0	0	0	

[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.

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

Part II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950107 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]	

[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.

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

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	
HA Wide	9/12/09		9/12/11		
CT19-1 WPC	9/12/09		9/12/11		
CT19-2 QK	9/12/09		9/12/11		
CT19-3 AMH	9/12/09		9/12/11		

[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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830					**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	

[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: Greenwich Housing Authority **249 Milbank Avenue** **Greenwich** **CT. 06830**	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950106 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2006** **FFY of Grant Approval:**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:5)**
☒ **Performance and Evaluation Report for Period Ending: 6/30/09** ☐ **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)	35,000	35,000	35,000	2,006.03
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	130,000	75,910.33	75,910.33	25,442.23
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	181,506	235,369.46	235,369.46	164,279.46
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	121,567	121,793.21	121,793.21	47,678.21
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.

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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950106 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2006** **FFY of Grant Approval:**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 5)**

☒ **Performance and Evaluation Report for Period Ending: 6/30/09** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	468,073	468,073	468,073	239,405.93
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs	0	27,926.65	27,926.65	27,926.65
25	Amount of line 20 Related to Energy Conservation Measures	27,610	27,610	27,610	27,610

Signature of Executive Director Anthony Johnson	**Date**	**Signature of Public Housing Director**	**Date**
Anthony 2. [illegible]	11-1-09		

[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 under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950106 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2006**

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	Administration	1410		35,000	35,000	35,000	2,006.03	
PHA Wide	Consulting, & advertising	1430		130,000	75,910.33	75,910.33	25,442.23	
CT19-3 AMH	Re-pointing	1460		65,239.76	95,582.60	95,582.60	60,492.60	
CT19-1 WPC	Exterior Upgrades	1460		110,089.38	106,000.00	106,000.00	67,500.00	
CT19-1 WPC	Balconies	1460		6,176.86	6,176.86	6,176.86	6,176.86	
CT19-3 AMH	Security system upgrades	1470		0	27,926.65	27,926.65	27,926.65	
CT19-3 AMH	Community Room Replace single pane windows with Thermo pane	1460		27,610.00	27,610.00	27,610.00	27,610.00	
CT19-1 WPC	Laundry room upgrades	1470		22,375.00	21,356.56	21,356.56	21,356.56	
CT19-3 AMH	Finance office upgrades	1470		71,582.00	72,510.00	72,510.00	895.00	

[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.

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 II: Supporting Pages

PHA Name: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT, 06830	**Grant Type and Number** Capital Fund Program Grant No: CT26PO1950106 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2006**

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]	

[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.

form **HUD-50075.1** (4/2008)

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: Greenwich Housing Authority
249 Milbank Avenue
Greenwich
CT, 06830

Federal FFY of Grant: 2006

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	
HA Wide	7/17/08	6/30/08	7/17/10		
CT19-3 AMH	7/17/08	6/30/08	7/17/10		
CT19-1 WPC	7/17/08	6/30/08	7/17/10		

[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: Greenwich Housing Authority 249 Milbank Avenue Greenwich CT. 06830					**Federal FFY of Grant: 2006**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Greenwich Housing Authority

Program/Activity Receiving Federal Grant Funding

PHA Agency Plan/Capital Fund

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 Federalagency 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.)

Wilbur Peck Court Greenwich, CT 06830 Fairfield County	Quarry Knoll I Greenwich, CT 06830 Fairfield County	Agnes Morley Greenwich, CT 06830 Fairfield County

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.
(18U.S.C.1001,1010,1012; 31U.S.C.3729,3802)

Name ofAuthorized Official	Title
Anthony Johnson	Executive Director
Signature X Anthony 2. Johnson	Date 10 - 30 - 2009

form HUD-50070 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1 &.3

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 Town of Greenwich

Program/Activity Receiving Federal Grant Funding

PHA Agency Plan/Capital Fund

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. (18U.S.C.1001,1010,1012; 31U.S.C.3729,3802)

Name ofAuthorized Official	Title
Anthony Johnson	Executive Director
Signature	Date (mm/dd/yyyy)
Anthony 2. Johnson	10-30-2009

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handboooks 7417.1, 7475.13, 7485.1, & 7485.3

DISCLOSURE OF LOBBYING ACTIVITIES

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

(See reverse for public **burden disclosure.**)

Approved by OMB
0348-0046

1. Type of Federal Action:
[b] a. contract
b. grant
c. cooperative agreement
d. loan
e. loan guarantee
f. loan insurance

2. Status of Federal Action:
[a] a. bid/offer/application
b. initial award
c. post-award

3. Report Type:
[a] a. initial filing
b. material change
For Material Change Only:
year _____ quarter _____
date of last report _____

4. Name and Address of Reporting Entity:
☐ Prime ☐ Subawardee
Tier _____ *if known:*

Housing Authority of the Town of Greenwich
249 Milbank Road
Greenwich, CT 06836

Congressional District, *if known:*

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. Department of Housing & Urban Development

7. Federal Program Name/Description:

CFDA Number, *if applicable:* _____

8. Federal Action Number, *if known:*

9. Award Amount, *if known:*
$

10. **a. Name and Address of Lobbying Registrant**
(if individual, last name, first name, MI):

NAHRO
630 Eye Street NW
Washington, DC 20001

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 $1 0,000 and not more than $100,000 for each such failure.

Signature: Anthony 2. John
Print Name: Anthony Johnson
Title: Executive Director
Telephone No.: (203) 869-1138 Date: 10. 30. 2009

Federal Use Only:

Authorized for Local Reproduction
Standard Form LLL (Rev. 7-97)

PHA Certifications of Compliance with PHA Plans and Related Regulations	U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

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 X *5-Year and/or* X *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.

Greenwich Housing Authority
PHA Name

CT019
PHA Number/HA Code

X 5-Year PHA Plan for Fiscal Years 20 10 - 20 14

X Annual PHA Plan for Fiscal Years 20 10 - 20 10

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
Jonathan D. DuBois	Chairman
Signature	Date