

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
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1.0	PHA Information PHA Name: <u>Manchester Housing Authority</u> PHA Code: <u>CT026</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) <input checked="" type="checkbox"/> Troubled PHA Fiscal Year Beginning: (MM/YYYY): <u>10/01/2010</u>				
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>318</u> Number of HCV units: <u>504</u>				
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
					PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.				
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:				
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.				
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i>				
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 <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.				
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.				
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.				
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	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <ul style="list-style-type: none"> (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	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <ul style="list-style-type: none"> (a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) (b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) (c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) (d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) (e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) (i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)

5.1 Mission

The mission of the Housing Authority of the Town of Manchester is to provide and maintain affordable, safe and sanitary housing to income eligible individuals and families as they strive to achieve self-sufficiency and improve the quality of their lives. The Housing Authority is committed to operating in an efficient, ethical and professional manner.

5.2 Goals and Objectives

To expand the supply of assisted housing by

- Reducing public housing vacancies
- Fully utilizing housing vouchers when funding is secured
- Exploring opportunities for development of additional units and/or partnering with developers of additional units when financially feasible and in accordance with HUD guidelines

To improve the quality of assisted housing by

- Improving public housing management (PHAS score) to end the designation of a troubled authority and be designated a standard performer by 2014
- To maintain quality voucher management (SEMAP score) and be designated a high performer by 2011
- Renovate and modernize public housing units on an ongoing basis.
- Maintain quality resident supportive services to public housing residents

To increase assisted housing choices by

- Open the Section 8 wait list by 2014.
- Explore implementation of family self-sufficiency program.
- Explore conversion of tenant based vouchers to project based.
- Explore partnerships with agencies/organizations dedicated to the prevention of homelessness.

To improve community quality of life and economic vitality by

- Maintain supportive services to public housing residents
- Maintain adequate tenant screening practices
- Maintain good relations with local law enforcement to address potential security problems
- Maintain fiscally prudent practices

To promote self-sufficiency and asset development of families and individuals by

- Provide supportive services to increase independence for elderly and disabled individuals.
- Notice Housing Authority employment opportunities at main office for resident consideration.

To ensure equal opportunity and fair housing by

- Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, age, sexual orientation, and disability
- Undertake affirmative measures to provide suitable living environment in assisted housing regardless of race, color, religion, national origin, sex, familial status, age, sexual orientation, and disability

6A: PHA Plan Elements

1. Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.

No Revision

2. Financial Resources

The financial resources of the PHA for fiscal year ending September 30, 2009 include the public Housing Operating Fund of \$1,023,808; Public Housing Capital Fund of \$399,006; ARRA \$520,654; Annual Contributions for Section 8 Tenant-Based Assistance \$3,655,880; Public Housing Dwelling Rental Income \$1,201,656; interest \$352.

3. Rent Determination

No Revision

4. Operation and Management

Duties for the Occupancy Specialist in the public housing program have been reassigned so that property management responsibilities are more clearly designated and communication with the Maintenance Supervisor are more efficient.

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 Revisions

13. Violence Against Women Act (VAWA)

Revised

6.B POSTING OF PHA PLAN

Manchester Housing Authority
24 Bluefield Drive
Manchester, CT 06040

Mayfair Gardens Community Room
211 North Main Street
Manchester, CT 06042

www.manchesterha.org

9.0 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	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	1236	5	2	2	2	3	1
Income >30% but <=50% of AMI	946	5	2	2	2	3	1
Income >50% but <80% of AMI	626	4	2	1	2	3	1
Elderly	556	5	2	2	3	3	1
Families with Disabilities	NFA	NFA	NFA	NFA	NFA	NFA	NFA
Black Non-Hispanic	NFA	NFA	NFA	NFA	NFA	NFA	NFA
Hispanic	NFA	NFA	NFA	NFA	NFA	NFA	NFA
White Non-Hispanic	NFA	NFA	NFA	NFA	NFA	NFA	NFA

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

* No Information Available – NFA

9.1 Strategy for Addressing Housing Needs

Clearly funding for affordable housing is a major external barrier to increasing units.

Internally, MHA will address the issue through the following goals:

To maximize the number of affordable units available to the PHA within its current resources by:

- Utilizing effective maintenance and management practices and policies
- Reducing vacancies
- Reducing turn over time
- Using an effective tenant screening process
- Maintaining good collaboration between maintenance and occupancy staff
- Applying for funding to develop new units when feasible and funding is available
- Partnering with the Town and community resources to increase affordable housing when feasible and funding is available
- Issuing new vouchers when funding is available
- Marketing for new landlords particularly in areas outside minority and poverty concentrations
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies

To target available assistance to families with disabilities by:

- Applying for special purpose vouchers targeted for families with disabilities should they become available
- Affirmatively market to local non-profit agencies that assist families with disabilities

Conduct activities to affirmatively further fair housing by:

- Marketing the Section 8 Program to owners outside of the areas of poverty/minority concentration

10 A. Progress in Meeting PHA Goals and Objectives

Goal:

1. To expand the supply of assisted housing.

The vacancy rate for the MHA has been reduced by a reduction in turnaround time and transfers. The occupancy rate for calendar year 2008 was 95.7%, 2009 was 97.2% and as of 6/24/10 is 97.8%. Networking with area service agencies for supportive housing initiatives has been ongoing.

2. To improve the quality of assisted housing.

The designation of troubled remains due to the fiscal problems with the private property. SEMAP scores indicate the MHA has maintained its standard performer designation. The Resident Advisory Board has been utilized in the development of the annual/5 year plan and meetings with the tenants, in general, have been added for that purpose. Resident services continue to be provided to elderly & disabled residents. Capital fund money continues to be used to rehabilitate and upgrade units. Use of a video library has not been implemented and is not now prioritized.

3. To increase assisted housing choices.

The implementation of a FSS Program has not been accomplished. The goal remains. Conversion to project based vouchers was not accomplished.

4. To improve community quality of life and economic vitality.

Resident Services Coordination Program continues to provide support services. Tenant screening for criminal history has been better implemented. Credit checks continue as standard practice. Collaboration with the local police department continues. Fiscally prudent practices have improved.

5. To promote self- sufficiency and self development.

The Resident Services Coordination Program continues to promote self-sufficiency to elderly & disabled residents. Partnership with community resources has not been implemented.

6. To ensure equal opportunity and fair housing.

Undertaking of affirmative action measures to ensure access to assisted housing and to provide a suitable living environment for families living in assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability are being accomplished and are ongoing. Staff is receiving training in federal and state non-discrimination and fair housing regulations.

10 B. Significant Amendment and Substantial Deviation/Modification.

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.

Part 11f: Resident Advisory Board Comments

The RAB met and discussed expanding the number of parking spaces and improving self-sufficiency opportunities through the dissemination of information on educational and vocational programs and part-time work opportunities. The MHA has limited space to expand parking. Expansion would necessitate developing open spaces on the property to parking lots. The MHA will consider the impact of doing so. The MHA will explore the feasibility of disseminating information on employment and educational programs to residents in the public housing programs.

In addition to the meeting with the RAB, 2 meetings with the general public housing population were scheduled. During those meetings, requests for benches along the sidewalks of CT026P026-001; electrical upgrades in the basements in CT026P026-001 and 002; and improvements in the sidewalks at CT026P026-003. The MHA has revised the CFP for 2009 to include sidewalk improvements in all Federally assisted elderly & disabled housing as this is a primary safety issue. The electrical upgrades to include increased light switches and emergency pull cords will be evaluated for inclusion in a CFP grant. The issue of benches will be assessed but may not be prioritized over safety, energy and ADA compliance issues.

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 office 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.

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary

PHA Name/Number Development Number and Name	Work Statement for Year 1 FFY 2010	Locality (City/County & State)			Original 5-Year Plan		Revision No: Work Statement for Year 5 FFY 2014
		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 4 FFY 2013		
B. Physical Improvements Subtotal	Annual Statement	216,461.00	214,861.00	216,658.00		216,461.00	
C. Management Improvements		59,649.00	59,649.00	59,649.00		59,649.00	
D. PHA-Wide Non-dwelling Structures and Equipment							
E. Administration		39,766.00	39,766.00	39,766.00		39,766.00	
F. Other Fees&Costs		2,256.00	3,856.00	2,059.00		2,256.00	
G. Operations		79,532.00	79,532.00	79,532.00		79,532.00	
H. Demolition							
I. Development							
J. Capital Fund Financing -- Debt Service							
K. Total CFP Funds							
L. Total Non-CFP Funds							
M. Grand Total		397,664.00	397,664.00	397,664.00		397,664.00	

Capital Fund Program—Five-Year Action Plan

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

Part I: Summary (Continuation)

PHA Name/Number A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Locality (City/county & State)			<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
			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 214	
	CT26P026-001	Annual Statement	60,500.00	0.00	48,000.00	216,461.00	
	CT26P026-002		141,961.00	0.00	168,658.00	0.00	
	CT26P026-003		0.00	214,861.00	0.00	0.00	
	CT26P026-007		14,000.00	0.00	0.00	0.00	
	PHA-Wide		181,203.00	182,803.00	181,006.00	181,203.00	

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

Work Statement for Year 1 FFY 2010	Work Statement for Year 2011 FFY 2011			Work Statement for Year: 2012 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
	CT26P026-002 Rehab units to ADA compliance	2	119,261.00	CT26P026-003 Rehab units to ADA compliance	2	119,261.00
See Annual Statement	CT26P026-001 Upgrade water heaters	9	60,500.00	CT26P026-003 Upgrade windows	152	50,000.00
	CT26P026-007 Upgrade windows	43	14,000.00	CT26P026-003 Upgrade water heaters	76	45,600.00
	CT26P026-002 Upgrade sidewalks		22,700.00			
	Management Improvements	100%	59,649.00	Management Improvements	100%	59,649.00
	Administration	100%	39,766.00	Administration	100%	39,766.00
	Fees and Costs	100%	2,256.00	Fees and Costs	100%	3,856.00
	Operations	100%	79,532.00	Operations	100%	79,532.00
	Subtotal of Estimated Cost		\$397,664.00	Subtotal of Estimated Cost		\$397,664.00

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

Work Statement for Year 1 FFY 2010	Work Statement for Year 2013 FFY 2013			Work Statement for Year: 2014 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
	CT26P026-002 Upgrade windows	520	168,658.00	CT26P026-001 Upgrade boilers	3	24,200.00
	CT26P026-001 Upgrade boilers	6	48,000.00	CT26P026-001 Rehab. units to ADA compliance	2	119,261.00
				CT26P026-001 Upgrade doors	27	73,000.00
	Management Improvements	100%	59,649.00	Management Improvements	100%	59,649.00
	Administration	100%	39,766.00	Administration	100%	39,766.00
	Fees and Costs	100%	2,059.00	Fees and Costs	100%	2,256.00
	Operations	100%	79,532.00	Operations	100%	79,532.00
	Subtotal of Estimated Cost		\$397,664.00	Subtotal of Estimated Cost		\$ 397,664.00

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		Grant Type and Number	FFY of Grant: 2010
PHA Name: Manchester Housing Authority		Capital Fund Program Grant No: CT26P02650110	FFY of Grant Approval:
		Replacement Housing Factor Grant No:	
		Date of CFFP:	
Type of Grant		Revised Annual Statement (revision no:)	
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:)	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost ¹
		Original	Obligated
		Revised ²	Expended
1	Total non-CFF Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	79,800	
3	1408 Management Improvements	59,850	
4	1410 Administration (may not exceed 10% of line 21)	39,900	
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs	18,658	
8	1440 Site Acquisition		
9	1450 Site Improvement	40,000	
10	1460 Dwelling Structures	76,600	
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures	82,856	
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 CFF 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		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: Manchester Housing Authority	Grant Type and Number Capital Fund Program Grant No: CT26F02650110 Replacement Housing Factor Grant No: Date of CFFP:		
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	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)	379,664	
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	89,400	
Signature of Executive Director <i>[Signature]</i>		Date 7/7/10	Signature of Public Housing Director

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 CFF Grants for operations.
⁴ RHF funds shall be included here.

Westhill Gardens 1470							

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		Grant Type and Number		FFY of Grant: 2009	
PHA Name: Manchester Housing Authority		Capital Fund Program Grant No: CT26P02650109		FFY of Grant Approval:	
		Replacement Housing Factor Grant No:			
		Date of CFFP:			
Type of Grant	Summary by Development Account	Original	Total Estimated Cost Revised ²	Obligated	Total Actual Cost ¹ Expended
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies				
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/10	<input type="checkbox"/> Final Performance and Evaluation Report				
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	39,900	39,900	39,900	0
3	1408 Management Improvements	58,914	47,678	15,000	0
4	1410 Administration (may not exceed 10% of line 21)	39,900	39,900	39,900	39,900
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000	10,763	2,000	184
8	1440 Site Acquisition				
9	1450 Site Improvement	103,617	7,500	0	0
10	1460 Dwelling Structures	84,060	119,650	27,909	22,670
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	52,615	127,615	52,615	0
13	1475 Non-dwelling Equipment	0	6,000	0	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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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 CFFP 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		FFY of Grant: 2009		FFY of Grant Approval:	
PHA Name: Manchester Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P02650109 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/21/10		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)	
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹	
Line		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)	399,006	399,006	177,324	62,754
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		54,200		
Signature of Executive Director <i>Christine L. ...</i>		Date 7/14/2010		Signature of Public Housing Director	
				Date	

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

Part II: Supporting Pages		Housing Authority		Grant Type and Number		Federal FFY of Grant: 2009			
PHA Name: Manchester		Capital Fund Program Grant No: CT26P02650109		CFFP (Yes/No): no		Replacement Housing Factor Grant No:			
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		39,900	39,900	39,900	0		
PHA WIDE	Management Improvements SOFT	1408		58,914	47,678	15,000	0		
PHA WIDE	Administration Salary: Mod. Coord. Allocated salary for Exec. Director,, Chief Accountant, Bookkeeper	1410		39,900	39,900	39,900	39,900	complete	
PHA WIDE	Fees and Costs	1430		20,000	10,763	2,000	184		
CT26P026-003 Mayfair Gardens	Upgrade electrical service boxes	1450	10	70,000	0	0	0		
CT26P026-002 Westhill Gardens	Upgrade of drainage system Bldg. 43	1450		6,500	0	0	0		
CT26P026-002 Westhill gardens Annex	Upgrade of boiler room doors	1460	45	22,500	3,200	3,200	0		
CT26P026-002 Westhill Gardens Annex	Roofs on Bld. #14	1460		20,000	21,800	21,800	21,800	complete	
CT26P026-003 Mayfair Gardens	Electrical and smoke alarm upgrades	1460	76	9,560	8,534	2,039	0		
CT26P026-002 Westhill Gardens Annex	ADA compliant laundry facility	1470		52,615	52,615	52,615	0		
CT26P026-001 Westhill Gardens	sidewalks upgrades	1450		27,117	0	0	0		
CT26P026-006 Scattered sites	upgrade decks	1460		32,000	0	0	0		
PHA WIDE	snow removal equipment	1475	2	0	6,000	0	0		
CT26P026-005	basement hatchway upgrade	1460		0	1,350	0	0		

Scattered site CT26P026-002 Westhill Gardens Annex	ADA compliant unit rehab	1460	1	0	55,396	0	0
CT26P026-006 Scattered site	window upgrade	1460	32	0	9,000	0	0
CT26P026-007 Scattered site	window upgrade	1460	43	0	12,000	0	0
CT26P026-001 Westhill Gardens	office upgrade for ADA compliance and increased office space	1470		0	71,000	0	0
CT26P026-003 Mayfair Gardens	maintenance shed	1470		0	4,000	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.

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		Federal FFY of Grant: 2009						
PHA Name: Manchester Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P02650109 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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	
CT26P026-001 Westhill Gardens	Upgrade railings	1460		0	870	870	870	complete
CT26P026-003 Mayfair Gardens	sidewalks upgrades	1450		0	7,500	0	0	
CT26P026-001 Westhill Gardens	abate & upgrade halls	1460	15	0	7,500	0	0	

PHA WIDE Administration	09/14/2011	03/30/2010	09/14/2013	03/30/2010	completed
PHA WIDE Fees & Costs	09/14/2011		09/14/2013		
CT26P026-003 Upgrade electrical and smoke alarms	09/14/2011		09/14/2013		
CT26P026-002 ADA compliant laundry facility	09/14/2011	02/28/2010	09/14/2013		
CT26P026-002 Upgrade boiler room doors	09/14/2011	03/30/2010	09/14/2013		
CT26P026-002 Roofs Bld.#14	09/14/2011	10/01/2010	09/14/2013	01/31/2010	completed
CT26P026-003 Upgrade sidewalks	09/14/2011		09/14/2013		
CT26P026-001 Abate & upgrade halls	09/14/2011		09/14/2013		
CT26P026-001 Upgrade railings	09/14/2011	03/31/2010	09/14/2013	06/01/2010	completed
CT26P026-005 Upgrade basement hatchways	09/14/2011		09/14/2013		
CT26P026-002 ADA compliant unit rehab	09/14/2011		09/14/2013		
CT26P026-006 Upgrade windows	09/14/2011		09/14/2013		
CT26P026-007 Upgrade windows	09/14/2011		09/14/2013		
CT026P026-001 Office upgrade for ADA compliance and increased office space	09/14/2011		09/14/2013		

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

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		Grant Type and Number <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fund Program Grant No: CT26P02650108 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval: 2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/10		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost Revised ²	Obligated	Total Actual Cost ¹	Expended
	Original				
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	41,132	41,132	31,169	
3	1408 Management Improvements	60,000	60,000	33,562	
4	1410 Administration (may not exceed 10% of line 21)	41,132	41,132	41,132	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	4,458	6,800	3,959	
8	1440 Site Acquisition				
9	1450 Site Improvement	13,184	9,007	0	
10	1460 Dwelling Structures	115,282	128,533	93,212	
11	1465.1 Dwelling Equipment—Nonexpendable		6,417	5,320	
12	1470 Non-dwelling Structures	91,636	73,761	0	
13	1475 Non-dwelling Equipment	44,500	44,542	32,426	
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 CFFP 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		FFY of Grant: 2008	
PHA Name: HOUSING AUTHORITY OF THE TOWN OF MANCHESTER		FFY of Grant Approval: 2008	
Grant Type and Number Capital Fund Program Grant No: CT26P02650108 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/10		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 5) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Actual Cost ¹	
Line	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)	411,324	411,324
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 <i>[Signature]</i>		Signature of Public Housing Director	
Date 6-16-10		Date	

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHIF 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 II: Supporting Pages		Federal FFY of Grant: 2008						
PHA Name: HOUSING AUTHORITY OF THE TOWN OF MANCHESTER		Grant Type and Number Capital Fund Program Grant No: CT26P02650108 CFFP (Yes/No): No Replacement Housing Factor Grant No:						
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		41,132	41,132	41,132	31,169	
PHA WIDE	Management Improvements SOFT Computer upgrade	1408		60,000	60,000	60,000	33,562	
PHA WIDE	Fees & Costs	1430		4,458	6,800	6,800	3,959	
PHA WIDE	Administration	1410		41,132	41,132	41,132	41,132	100%
PHA WIDE	Parking Lot Paving	1450	multiple	13,184	9,007	9,007	0	
CT26P026-002 Westhill Gardens Annex	Roofs	1460	1 bldg.	21,800	21,800	21,800	21,800	100%
CT26P026-005 Scattered site	Roofs	1460	2 units	31,535	31,535	31,535	31,535	100%
CT26P026-002 Westhill Gardens Annex	Upgrade Fire Doors	1460	multiple bldgs.	12,070	12,916	12,916	0	
CT26P026-002 Westhill Gardens Annex	Rehab units	1460	multiple	34,687	34,687	34,687	34,687	100%
CT26P026-005 Scattered sites	Rehab units	1460	3 units	11,650	18,816	18,816	1,650	
CT26P026-006 Scattered sites	Rehab units	1460	multiple	3,540	3,540	3,540	3,540	100%
CT26P026-003 Mayfair Gardens	ADA laundry	1470		45,948	45,948	45,948	0	
CT26P026-001 Westhill Gardens	Office Renovation	1470		45,688	27,813	27,813	0	

Administration								
1430 PHA WIDE Fees and Costs	6/12/2010	6/5/2010	6/12/2012					
1460 Mayfair Gardens Electrical Upgrade	6/12/2010	6/5/2010	6/12/2012		4/30/2009			Work done ahead of schedule
1460 Westhill Gardens Roofs	6/12/2010	10/6/2009	6/12/2012		12/16/09			Work done ahead of schedule
1460 Scattered Site Roofs	6/12/2010	7/13/2009	6/12/2012		10/19/09			Work done ahead of schedule
1460 Westhill Gardens Fire Door Upgrade	6/12/2010	2/19/10	6/12/2012					
1460 Westhill Gardens Rehab Units	6/12/2010	unknown	6/12/2012		4/30/2009			Word done ahead of schedule
1460 Scattered Sites 005 Rehab Units	6/12/2010	3/16/10	6/12/2012		1/9/2009			Work done ahead of schedule
1460 Scattered Sites 006 Rehab Units	6/12/2010	unknown	6/12/2012		12/12/2008			Work done ahead of schedule
1470 Mayfair Gardens Laundry	6/12/2010	2/24/10	6/12/2012					
Westhill Gardens Office Renovation	6/12/2010	6/4/2010	6/12/2012					
1475 PHA WIDE Equipment	6/12/2010	5/13/10	6/12/2012					
1465.1 PHA WIDE	6/12/2010	unknown	6/12/2012					
1460 Mayfair Gardens Smoke Detector Upgrade	6/12/2010	3/16/2010	6/12/2012					

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

PET POLICY

1. Common Household Pets are defined as: Dogs (size limited to a maximum of 25 pounds); Cats (size limited to a maximum of 20 pounds); Birds (canaries, parakeets or love birds, limit: one cage with no more than two per cage); Fish (one tank limited to a 10-gallon capacity). Rodents and reptiles are not considered common household pets and are not allowed in the Authority's developments.
2. No tenant will be allowed more than one animal or one cage or one tank.
3. Only animals that are housebroken will be allowed.
4. A security deposit of \$300.00 may be requested for dogs or cats to cover any damage that may be caused by the pet to apartments or hallways.
5. Any damage done by a pet will be the total responsibility of the tenant at the time and the Housing Authority will be reimbursed within 30 days of billing.
6. Tenants must be able to care for pet's needs. If, after consulting the area health district and/or a local veterinarian, it is determined that adequate care is no longer possible, the owner must relinquish the right to pet ownership.
7. Any animal deemed to be potentially harmful to the health or safety of others, including attack or fight-trained dogs (ex: Pit bulls) will not be allowed. The Manchester Housing Authority will have the right to have the owner remove any animal that poses a threat to the health or safety or is a nuisance to other residents or to MHA personnel.
8. All dogs must be licensed by the Town of Manchester. Transfers from other towns or cities in Connecticut can be obtained from the Office of the Town Clerk for a small fee.
9. All dogs and cats must be inoculated against rabies. All dogs or cats must be spayed or neutered. This requirement must be met before the animal will be allowed in the development and proof must be presented by the tenant. Proof of a booster shot to keep the animal safe from disease must be submitted annually.

- 10.** Animals must be restrained at all times. Dogs will be on leashes of no more than six feet in length.
- 11.** Owner must have a signed, notarized statement from next of kin stating that the pet will be removed from the apartment in the event that the tenant is absent from the apartment or upon his/her demise.
- 12.** Periodic inspections will be made (with reasonable notice given to tenant) to insure that the apartments are well maintained and no damage is being caused.
- 13.** Cat litter should be used for cats and must be changed at least twice a week.
- 14.** Owner is responsible for animal waste. Waste will be secured in plastic bags and disposed of in garbage containers.
- 15.** All pets will be properly groomed and maintained free of infection and disease including fleas, ticks and other infestations. Any pet-related infestation will be the responsibility of the pet owner and the Housing Authority reserves the right to terminate and charge the resident.
- 16.** No unauthorized pet will be allowed in the building or on the grounds.
- 17.** If for any reason the pet is left unattended for 24 hours or more, the Manchester Housing Authority has the right to enter the apartment and transfer the pet to the proper authorities, i.e., local animal shelter or Humane Society. The tenant will hold the Manchester Housing Authority harmless in such circumstances.
- 18.** The tenant will take adequate precautions to eliminate any pet odors within the apartment and to maintain the apartment in a sanitary condition at all times.
- 19.** Animals are barred from the laundry room and the community hall.

MANCHESTER HOUSING AUTHORITY

Violence Against Women Act

The Manchester 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 MANCHESTER

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 HATM to respond appropriately to the violence while maintaining a safe environment for HATM, employees, tenants, applicants, Section participants, public housing program participants and others.

The policy will assist the HATM 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:** HATM'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). HATM 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.

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 HATM, 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, HACW, 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 HATM, 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 not 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 HATM, 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:** HATM, the owner and/or property manager shall keep all information provided to HATM under this Section confidential. HATM, 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 HATM, 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 **APPROPRIATE BASIS FOR DENIAL OF ADMISSION, ASSISTANCE OR TENANCY:**

- 4.1 HATM 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 HATM, 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 4.1 and 4.3 shall limit the authority of HATM, 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 Nothing in Section 4.1, 4.2 and 4.3 limits HATM, 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, HATM, 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 HATM, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the HATM, 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 Nothing in Section 4.1, 4.2 or 4.3 limits HATM, 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 HATM unit, receive a Section 8 Voucher and stay in Connecticut or move to another Section 8 jurisdiction.
- 5.0 **ACTIONS AGAINST A PERPETRATOR**: HATM 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 HATM 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**: HATM 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**: HATM shall develop goals, objectives, policies or programs that will serve the needs of victims: HATM 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 HATM'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 HATM 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 MANCHESTER

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 PROFESSIONAL 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 sheet 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: _____

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Manchester Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing; Section 8 HCV; Capital Fund Program

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

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

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

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

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

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

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

(1) Abide by the terms of the statement; and

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

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

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

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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

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

See attached sheets for sites of CFP projects.

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

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

Name of Authorized Official

Christine L. White

Title

Executive Director

Signature

Christine L. White

Date

7/14/10

5 year plan work sites

- Westhill Gardens (CT26P026-001)
- Westhill Gardens Annex (CT26P026-002)
- Mayfair Gardens (CT26-003)
- Scattered sites

92/94 Bissell Street; 88/90 Clinton Street;34/36 Madison Street;122/124 Maple Street;15/17 Orchard Street;64/66 Regent Street;85/87 School Street
Lisa Drive (CT26P026-007)

213/215 Bidwell Street;37/39 Florence Street;24/26 Horace Street;41/43 Lilley Street;170A/170B Spruce Street;38/40 Wilfred Road (CT26P026-006)

6,7,8,9,12,14,15,17,20,21,22,23,27,29,30,32 Lisa Drive (CT26P026-007)

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and/or Annual PHA Plan for the PHA fiscal year beginning 10/1/2010, 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.

Manchester Housing Authority

CT026

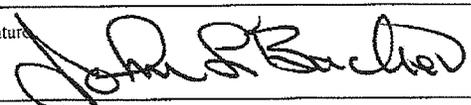
PHA Name

PHA Number/HA Code

x 5-Year PHA Plan for Fiscal Years 20¹⁰ - 20¹⁴

x Annual PHA Plan for Fiscal Years 20¹⁰ - 20¹¹

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
John S. Backer	Chairman, Board of Commissioners
Signature 	Date 7/14/10

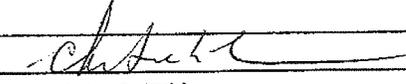
DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 01	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 and Urban Development	7. Federal Program Name/Description: Capital Fund CFDA Number, if applicable: _____	
8. Federal Action Number, if known: CT26P026501-10	9. Award Amount, if known: \$ 397,664	
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A	b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: <u>Christine L. White</u> Title: <u>Executive Director</u> Telephone No.: <u>860-643-2163</u> Date: <u>7-14-10</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**Certification of Payments
to Influence Federal Transactions**

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

Applicant Name

Manchester Housing Authority

Program/Activity Receiving Federal Grant Funding

Public Housing; Section 8 HCV; Capital Fund Program

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

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

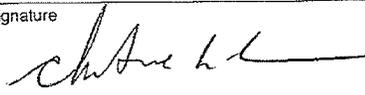
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this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

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

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

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

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

Name of Authorized Official Christine L. White	Title Executive Director
Signature 	Date (mm/dd/yyyy) 7/14/10

Civil Rights Certification

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

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

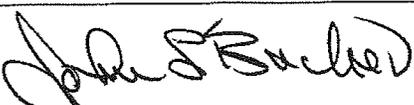
The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Manchester Housing Authority

CT026

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official	John S. Backer
Title	Chairman, Board of Commissioners
Signature	
Date	07/14/2010

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

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

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

I, Scott Shanley the General Manager certify that the Five Year and
Annual PHA Plan of the Manchester Housing Authority is consistent with the Consolidated Plan of
the Town of Manchester prepared pursuant to 24 CFR Part 91.

 7115/10
Signed / Dated by Appropriate State or Local Official