

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Weymouth Housing Authority</u> PHA Code: <u>MA045</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/01/2010</u>					
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>70</u> Number of HCV units: <u>225</u>					
<b>3.0</b>	<b>Submission Type</b> <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
<b>4.0</b>	<b>PHA Consortia</b> <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:					
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.					
<b>5.1</b>	<p><b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:</p> <p>The Weymouth Housing Authority's mission is: to provide affordable, decent, safe and sanitary housing through the maintenance of our existing housing units and the development of new housing units; to adopt appropriate management policies and procedures to insure efficient and responsive operations; to support residents in their efforts to achieve self-sufficiency; to promote resident participation and active involvement of the residents in their community and to honor public commitments in a fiscally and ethically responsible manner.</p>					
<b>5.2</b>	<p><b>Goals and Objectives.</b> 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.</p> <p>Apply for additional rental vouchers:  Reduce public housing vacancies:  Leverage private or other public funds to create additional housing opportunities:  Acquire or build units or developments  Improve public housing management: (PHAS score) 10%  Improve voucher management: (SEMAP score) 10%  Increase customer satisfaction:  Concentrate on efforts to improve specific management functions:  Section 8 Administration  Renovate or modernize public housing units  Update computer software and hardware  Project base vouchers to assist in financing new affordable housing opportunities</p>					

6.0	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: The housing authority will continue to offer flat rents but the flat rents will be set at the fair market rents established for the jurisdiction by HUD. Flat rents will be : 1 bdrm \$1098 2 bdrm \$1289 3 bdrm \$1542</p> <p>(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, MA 02188</p> <p>The Weymouth Housing Authority complies with the Violence Against Women Act and Section of 603 of that Act requires that act requires the WHA to list any services , activities of programs provided that helps child or adult victims of domestic violence. The Weymouth Housing Authority works with the local police department domestic violence division and distributes to all tenants the Violence Against Women Act pamphlet applicable to Public housing and Section 8 programs. We also work with DOVE (Domestic Violence Ended) and the Dianne DeVanna Center to make all public housing and Section 8 participants aware of the programs available to them.</p> <p>The Weymouth Housing Authority plans to utilize five (5) Project Based Vouchers to assist in the development of a 20 unit affordable housing development in S. Weymouth, Massachusetts. The street address of the proposed development is 576 Pond Street,Weymouth, MA 02891.</p> <p>The project basing of units has been referenced in previous 5 year plans and is consistent with both the WHA's 5 year plan and the Town of Weymouth's Consolidated plan.</p>
7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Provitigrams, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p>
8.3	<p><b>Capital Fund Financing Program (CFFP).</b>  <input checked="" 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.  <b>The housing authority will investigate the use of leverage financing to complete the siding project at its Pleasantville family development</b></p>

**Housing Needs.** Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.  
There are presently 91,309 families on the centralized Section 8 wait list

**Public Housing**

<b>Weymouth Local Applicants Waiting List Total</b>	<b>560</b>	
Extremely Low Income >30% AMI	240	42.86%
Very Low Income >30% but <=50% AMI	52	9.29%
Low Income >50% but < 80% AMI	3	0.54%
Families w/ Children	224	40.00%
Elderly Families	36	6.43%
Families w/ Disabilities	220	39.29%
White	124	22.14%
Black	17	3.04%
Asian	9	1.61%
American Indian	2	0.36%
Pacific Islander	0	0.00%
Hispanic	171	30.54%

**Section 8**

<b>Items</b>	<b># of Families</b>	<b>%of Total Families</b>
<b>Waiting List Total</b>	<b>91309</b>	
Extremely Low Income >30% AMI	87925	96.29%
Very Low Income >30% but <=50% AMI	3668	4.02%
Low Income >50% but < 80% AMI	206	0.23%
Families w/ Children	32856	35.98%
Elderly Families	5219	5.72%
Families w/ Disabilities	29826	32.66%
White	39659	43.43%
Black	16935	18.55%
Asian	2679	2.93%
American Indian	1536	1.68%
Pacific Islander	305	0.33%
Hispanic	33962	37.19%

9.0

9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) <b>Progress in Meeting Mission and Goals.</b> Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>The Weymouth Housing Authority has made progress in meeting its mission statement by continuing to improve its properties, ie, site &amp; drainage improvements at its Pleasantville development, siding 4 buildings at the development, increase efficiency with its operations, continuing to modernize its maintenance equipment and continuing to update policies and procedures. The authority also was successful in acquiring 66 enhanced vouchers for the Tammy Brooke Family Development that kept those units affordable for families of low wealth.</p> <p>(b) <b>Significant Amendment and Substantial Deviation/Modification.</b> Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>A. Substantial Deviation from the 5-year Plan: Substantial Significant Amendment or Modification to the Annual Plan:</b>  The WHA defines substantial and significant amendment or modification as any change in policy that significantly alters the Authority's stated mission and the persons the Authority serves. This would include admissions preferences, demolition or disposition activities and conversion programs. Discretionary or administrative amendments consistent with the Authority's overall mission and basic objectives will not be considered substantial deviations or significant modifications.</p>

11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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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				
PHA Name: Weymouth Housing Authority		Capital Fund Program Grant No: MA06P04550110 Replacement Housing Factor Grant No: Date of CFFP: 03/31/2010				
Type of Grant		FFY of Grant: 2010				
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFF Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$19,277.00				
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	\$9,638.00				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$10,000.00				
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment—Nonexpendable	\$3,1807.00				
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	\$25,663.00				
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
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)	\$96,385.00				
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

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

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

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

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

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

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

<b>Part I: Summary</b>			
PHA Name: Weymouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04550110 Replacement Housing Factor Grant No: Date of CFFP: 03/31/2010	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: / / ) <input type="checkbox"/> Final Performance and Evaluation Report	
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account		Total Estimated Cost	
Signature of Executive Director <i>Richard Moxley</i>		Original Date 3/31/2010	Revised <sup>2</sup> Date
		Total Actual Cost <sup>1</sup>	Expended
		Obligated	Date
Signature of Public Housing Director			









**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2001

<b>Part I: Summary</b>					
PHA Name/Number Weymouth Housing Authority MA045		Locality (City/County & State) Weymouth, MA			
Development Number and Name	Work Statement for Year 1 FFY 2010	Original 5-Year Plan			Revision No: 1
		Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B. Physical Improvements Subtotal	Annual Statement	\$43,448.00	\$67,470.00	\$67,470.00	\$41,807.00
C. Management Improvements		\$10,000.00	\$10,000.00	\$10,000.00	\$10,000.00
D. PHA-Wide Non-dwelling Structures and Equipment		\$24,022.00			\$25,663.00
E. Administration		\$9,638.00	\$9,638.00	\$9,638.00	\$9,638.00
F. Other					
G. Operations		\$9,277.00	\$9,277.00	\$9,277.00	\$9,277.00
H. Demolition					
I. Development					
J. Capital Fund Financing—Debt Service					
K. Total CFP Funds		\$96,385.00	\$96,385.00	\$96,385.00	\$96,385.00
L. Total Non-CFP Funds					
M. Grand Total		\$96,385.00	\$96,385.00	\$96,385.00	\$96,385.00

**Capital Fund Program—Five-Year Action Plan**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 4/30/2001

**Part I: Summary (Continuation)**

PHA Name/Number Weymouth Housing Authority MA045		Locality (City/county & State) Weymouth, MA		<input type="checkbox"/> Original 5-Year Plan	<input checked="" type="checkbox"/> Revision No: 1	
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY_2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
		Annual Statement				
	45-2	Siding	Siding		siding	windows
		Playground equip			A & E	
	45-1					
	PHA	administration	administration	Administration	Administration	administration
		Computer upgrade	A & E	Operations	Training	training
		Operations	Operations	Operations	Operations	Office upgrade
						Operations









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

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

**Part I: Summary**

PHA Name: **Weymouth Housing Authority**

Grant Type and Number  
 Capital Fund Program Grant No: MA06P04550106 Replacement Housing Factor Grant No:  
 Date of CFFP: \_\_\_\_\_

FY of Grant:  
 2006  
 FY of Grant Approval:  
 2006

Type of Grant  
 Original Annual Statement  
 Reserve for Disasters/Emergencies  
 Performance and Evaluation Report for Period Ending: 03/31/2010  
 Revised Annual Statement (revision no: )  
 Final Performance and Evaluation Report

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$11,822		\$11,822		\$11,822	
3	1408 Management Improvements	\$14,458		\$14,458		\$14,458	
4	1410 Administration (may not exceed 10% of line 21)	\$260		\$260		\$260	
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	\$44,166		\$44,166		\$44,166	
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	\$20,000		\$20,000		\$20,000	
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						
18a	1501 Collateralization or Debt Service paid by the PHA						
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)	\$90,706		\$90,706		\$90,706	
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security – Soft Costs						
24	Amount of line 20 Related to Security – Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						

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

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

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

Part I: Summary

PHA Name: Weymouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04550106 Date of CFPP: _____		Replacement Housing Factor Grant No:		FY of Grant: 2006 FY of Grant Approval: 2006	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2008 <input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director		Date		Signature of Public Housing Director		Date	
<i>Frank C. Thomas</i>		<i>06/10/2010</i>					









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

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

Part I: Summary

PHA Name: <b>Weymouth Housing Authority</b>	Grant Type and Number Capital Fund Program Grant No: MA06P04550107	Replacement Housing Factor Grant No:	FY of Grant: 2007
	Date of CFP:		FY of Grant Approval: 2007

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$9,322	\$9,322	\$9,322	\$9,322	\$8,322	\$8,322
3	1408 Management Improvements	\$18,644	\$18,644	\$18,644	\$18,644	\$18,644	\$18,644
4	1410 Administration (may not exceed 10% of line 21)	\$129	0	0	0	0	0
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000
8	1440 Site Acquisition						
9	1450 Site Improvement	\$23,143	\$23,143	\$23,143	\$23,143	\$2,360	\$2,360
10	1460 Dwelling Structures	\$25,976	\$25,976	\$25,976	\$25,976	\$25,976	\$25,976
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	\$6,133	\$6,133	\$6,133	\$6,133	\$2,5599	\$2,5599
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						
18a	1501 Collateralization or Debt Service paid by the PHA						
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$93,218	\$93,218	\$93,218	\$93,218	\$81,830	\$81,830
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.  
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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

Part I: Summary

PHA Name: Weymouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04550106 Date of CFFP: _____		Replacement Housing Factor Grant No:		FY of Grant: 2007	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		FY of Grant Approval: 2007	
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director		Date		Signature of Public Housing Director		Date	
<i>Frank Stumaly</i>		<i>6/19/2010</i>					









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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

Part I: Summary

PHA Name:  
 Weymouth Housing Authority

Grant Type and Number  
 Capital Fund Program Grant No: MA06P04550108 Replacement Housing Factor Grant No:  
 Date of CFFP: \_\_\_\_\_

FFY of Grant:  
 2008  
 FFY of Grant Approval:  
 2008

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
				Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>			\$9,706	\$9,706	\$9,706	\$9,706
3	1408 Management Improvements			\$12,937	\$12,937	\$12,937	\$12,937
4	1410 Administration (may not exceed 10% of line 21)			0			
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs			\$10,000	\$10,000	\$10,000	\$3,566
8	1440 Site Acquisition						
9	1450 Site Improvement			\$5,409	\$5,409	\$5,409	\$5,409
10	1460 Dwelling Structures			\$54,314	\$54,314	\$54,314	\$54,314
11	1465.1 Dwelling Equipment—Nonependable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment			\$3,214	3,214	\$3,214	\$3,214
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						
18a	1501 Collateralization or Debt Service paid by the PHA						
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 - 19)			\$95,580	\$95,580	\$95,580	\$80,523
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						

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

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

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

Part I: Summary

PHA Name: Weymouth Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA06P04550108 Date of CFPP: _____		Replacement Housing Factor Grant No:		FY of Grant: 2008	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies		Performance and Evaluation Report for Period Ending: 03/31/2010		Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		FY of Grant Approval: 2008	
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director <i>Rachel C. Stumwell</i>		Date 6/10/2010	Signature of Public Housing Director		Date		









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

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

**Part I: Summary**

PHA Name: **Weymouth Housing Authority**

Grant Type and Number  
 Capital Fund Program Grant No: MA06P04550109 Replacement Housing Factor Grant No:  
 Date of CFFP: \_\_\_\_\_

FFY of Grant:  
 2009  
 FFY of Grant Approval:  
 2009

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	\$9,638		\$9,638	\$9,638	
3	1408 Management Improvements	0	\$11,000	\$11,000		
4	1410 Administration (may not exceed 10% of line 21)		0	0		
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$11,000	0	0		
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	\$65,186	\$65,186	\$42,593	\$42,593	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	\$10,561	\$10,561			
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
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)	\$96,385	\$96,385	\$52,231	\$2,731	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

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

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

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

Part I: Summary

PHA Name: Weymouth Housing Authority		Grant Type and Number Capital Fund Program Grant No.: MA06FP04550109 Date of CRFP: _____		Replacement Housing Factor Grant No:		FFY of Grant: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report		FFY of Grant Approval: 2009	
Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director <i>Frank Connors</i>		Date 6/19/2012	Signature of Public Housing Director				









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

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

Part I: Summary

PHA Name:  
 Weymouth Housing Authority

Grant Type and Number  
 Capital Fund Program Grant No: MA06S04550109 Replacement Housing Factor Grant No:  
 Date of CFP: \_\_\_\_\_

FFY of Grant:  
 2009  
 FFY of Grant Approval:  
 2009

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	Reserve for Disasters/Emergencies <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		\$21,000		\$9,490	
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		\$170,300		\$170,300	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
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)		\$191,300		191,300	\$179,790
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

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



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

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

<b>Part I: Summary</b>		Grant Type and Number Capital Fund Program Grant No: MA06S04550109 Replacement Housing Factor Grant No:		FFY of Grant: 2009	
PHA Name: Weymouth Housing Authority		Date of CFFP: _____		FFY of Grant Approval: 2009	
Type of Grant	<input type="checkbox"/> Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: )		Total Actual Cost <sup>1</sup>	
<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	<input type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost	Revised <sup>2</sup>	Obligated
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010	Summary by Development Account	Signature of Public Housing Director	Date	Date	Expended
Signature of Executive Director <i>Ronald O'Rourke</i>		Date 6/10/2010			





