



9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>
9.1	<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) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</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>

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](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.

## ATTACHMENT 1

### **5.1 Mission**

The Housing Authority of the City of New Britain is a public agency committed to improving both the social as well as the material well being of its residents. Our mission is to provide decent, safe and sanitary housing to all eligible residents of the City of New Britain. We believe our residents should be a part of the surrounding community. This includes participating in employment, homeownership, education and social activities. Furthermore, we will strive to be our community's affordable housing of choice.

### **5.2 Goals and Objectives for 2011 through 2015**

Goal One: Maintain at least a Standard performer designation

Objective: To reach high performer designation in 5 years

Goal Two: Provide a safe and secure environment in our public housing developments.

Objective: Apply for funding for security cameras for NBHA properties through capital funding or other funding that may become available.

Goal Three: Continue to apply for housing choice vouchers to offer our participants a range and quality of housing choices.

Objectives: The authority shall strive to maintain a utilization rate of 95% in the Housing Choice Voucher program.

Goal Four: The authority will strive to offer our residents and other low-income family's education and job opportunities.

Objective: Continue to work with local agencies, schools, colleges and technical schools to improve job potential of our residents.

Goal Five: To work with IMC Consultants to develop a long term strategic plan to revitalize the aging and deteriorating physical stock.

Objective: To apply for HOPE VI and similar grants that will assist in the redevelopment of the NBHA properties.

## **5.2 Progress on Meeting Goals and Objectives from previous 5-Year plan**

The NBHA has applied for non-elderly disabled Housing Choice Vouchers.

The NBHA is a High Performer of its Section 8 Housing Choice Voucher program.

The NBHA has improved its management, financial and vacant turnaround scores.

Our capital plan this year calls for creating additional handicapped units for the physically disabled population and to create additional units for the hearing and vision impaired.

We have updated our Section 3 plan and hired residents and low-income persons to work at the NBHA. We have encouraged contractors working on our property to offer positions to Section 3 persons. Notices were sent to NBHA residents and local agencies (for Section 3 low income persons) explaining the Section 3 program and request those interested in work to apply to the authority.

The NBHA continues to employ residents whenever we have employment openings.

Cameras have been installed at entrances of our elderly/disabled high-rise developments.

## **6.0 PHA Plan Update**

### **a) updated:**

Public Housing lease revised, Updated financial resources, updated housing needs and waiting list for both Public Housing and Section 8 Housing Choice Voucher Program, updated safety and crime prevention statement.

### **b) Where 5 Year and Annual Plan may be viewed:**

Main Administrative Offices, 16 Armistice St., New Britain, CT

NBHA offices at 12 Dobek St., New Britain, CT

And Department of Municipal Development, City Hall, New Britain, CT

**Planned elements revised**

2. **Financial Resources:**

[24 CFR Part 903.7 9 (b)]

<b>Financial Resources:</b>		
<b>Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2011 grants)</b>		
a) Public Housing Operating Fund	3,406,749.00	
b) Public Housing Capital Fund	1,374,653.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	5,986,500.00	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-Sufficiency Grants		
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
<b>Sec.8 FSS program-Coordinator</b>	68,000.00	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		

**Financial Resources:  
Planned Sources and Uses**

<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>3. Public Housing Dwelling Rental Income</b>	32,249,748.00	Offset Operating Expenses
<b>4. Other income (list below)</b>		
Nextel Towers	23,012.00	Offset Operating Expenses
Youghiogheny Communications	21,600.00	
<b>Headstart Program Rentals</b>	5,568.00	Offset Operating Expenses
<b>4. Non-federal sources (list below)</b>		
<b>Total resources</b>	13,135,830.00	

## **7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Program, 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>

The NBHA is in development of a comprehensive long term strategic plan for the Authority's initiative to revitalize all of its aging and deteriorating physical housing stock.

While these planning and strategic approach efforts are in their initial stages, it is clear HOPE VI, Choice Neighborhoods, Mixed Finance, and other sources of development funding will be essential to any of the Authority's efforts to revitalize its existing stock.

The NBHA will be seeking funding from HUD and all other State and Federal sources under which the proposed development/redevelopment/revitalization initiatives might qualify under current statutory, or regulatory requirements. The NBHA will be redeveloping and pursuing one or more of the above identified funding sources for revitalization of its Mount Pleasant/ Bond Street Development, the Oval Grove Development, and the Corbin West housing site as well as other development/redevelopment initiatives that will emerge from the current planning process.

It is the intention of the NBHA to pursue HOPE VI and/or Choice Neighborhoods and other funding for the above identified initiative in response to the pending program specific Notification of Funding Availability (NOFA) for 2010 and for future NOFAs promulgated by HUD and others.

### **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 HUDs website at:  
[http://www.hud.gov/offices/pih/centers/sac/demo\\_dispo/index.cfm](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.

Because of the age, physical condition, property configuration, and other factors of the NBHA inventory, some level of demolition, including complete demolition, may be required to be undertaken in the NBHA owned public housing developments whether family or elderly in its occupancy characteristics.

These may include the Mount Pleasant development, the Bond Street development or the Oval Grove development. The NBHA recognizes the need and requirement for prior HUD approval of all demolition and will seek appropriate approvals.

Given the initial preliminary timetables being developed in conjunction with the large revitalization plan and strategic approach, the NBHA anticipates the initiation of demolition to commence during 2011, or 2012, and will continue through completion of revitalization efforts into 2014 or 2015 with timetables being directed largely by the availability of program funding and the success of the NBHA in securing highly competitive funding.

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;

Note: The NBHA is not currently required to convert any of its units to tenant-based assistance nor does it contemplate such conversions in the short or long term.

2. An analysis of the projects, or buildings required to be converted; and N/A

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 HUDs website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfn>

N/A

d. **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

The NBHA will, as an element of any HOPE VI or Choice Neighborhoods application for funding, be proposing the use of up to 100 Project Based Vouchers for the proposed redevelopment initiative being undertaken. Specific development, funding applications and related HUD document submissions for approval will be developed prior to determining a more refined number for each development effort. Project Based Vouchers are proposed for Corbin Heights (60 unit senior building), and for redevelopment of portions of the Oval Grove and/or MT. Pleasant properties based upon attainment of approvals and additional funding sources. The use of the PBV is consistent with the NBHA's plan and strategy to provide our residents with quality, safe and affordable housing integrated into economically, socially and environmentally sustainable communities.

## **8.0 Capital Fund Improvements**

### **8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report**

**See Attached CT005A04**

2007 (50107) Capital Fund Performance and Evaluation Report – Closed out May 2010

2008 (50108) Capital Fund Performance and Evaluation Report – Revision 3

2009 (50109) Capital Fund performance and Evaluation Report – Revision 2

2009 (50109 Stimulus) Capital Fund Performance and Evaluation report – Revision 3

2010 (50110) Capital Fund Annual Statement – Revision 1

2011 (5011) Estimated 2011 Capital Fund Budget- Annual Statement

See attached CT005A06

### **8.2 Capital Fund Program Five year Action Plan**

2011 through 2015 Capital Fund 5 Year Action Plan (CT26), See Attached CT005A05

### **8.3 Capital Fund program Financing program (CFFP)**

The NBHA does not propose to use any of its CFP/RHF funds to repay debt incurred to finance capital improvements.



**9.0 Statement of Housing Needs** [24 CFR Part 903.7 9 (a)]

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

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

<b>Housing Needs of Families in the Jurisdiction by Family Type</b>							
Family Type	Overall	Afford-ability	Supply	Quality	Access-ability	Size	Location
Income <= 30% of AMI	4715	5	4	4	N/A	4	N/A
Income >30% but <=50% of AMI	3411	4	3	3	N/A	4	N/A
Income >50% but <80% of AMI	3823	3	2	2	N/A	3	N/A
Elderly	2621	5	4	3	N/A	N/A	N/A
Families with Disabilities	3026	5	4	3	5	N/A	N/A
Race/Ethnicity (White)	9140	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Black)	1727	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Asian Pacific)	459	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Native American)	58	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Other)	4974	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity (Hispanic- any Race)	4559	N/A	N/A	N/A	N/A	N/A	N/A

9.0

9.1	<b>B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists</b>		
<b>Housing Needs of Families on the Waiting List- Section 8 Wait List</b>			
	# of families	% of total families	Annual Turnover
Waiting list total	91		8%
Extremely low income <=30% AMI	86	94.5	
Very low income (>30% but <=50% AMI)	5	5	
Low income (>50% but <80% AMI)	0	0	
Families with children	52	57.1	
Elderly families	25	24.5	
Families with Disabilities	14	15.4	
Race/ethnicity – White	75	82.4	
Race/ethnicity –Black	16	17.58	
Race/ethnicity- Hispanic	70	76.9	

--	--	--	--

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

**HOW LONG HAS IT BEEN CLOSED (# OF MONTHS)? 86**

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

Does the PHA permit specific categories of families onto the waiting list, even if generally closed?  No  
 Yes –FUP vouchers for non-elderly disabled families

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

Public Housing

	# of families	% of total families	Annual Turnover
Waiting list total	289		25%
Extremely low income <=30% AMI	272	94.1	
Very low income (>30% but <=50% AMI)	15	5.2	
Low income (>50% but <80% AMI)	2	.07	
Families with children	195	67.5	
Elderly families	9	3.1	
Families with	16	5.5	

Disabilities			
Race/ethnicity – White	253	87.8	
Race/ethnicity -Black	31	10.7	
Race/ethnicity American Indian/ Alaska Native	1	.3	
Race/Ethnicity Multi Racial	3	.01	
Race/Ethnicity Hispanic (any race)	236	81.7	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	0	0	
1 BR	80	27.7	
2 BR	120	41.5	
3 BR	84	29.1	
4 BR	5	1.7	
5 BR	0	0	
5+ BR	0	0	

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

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

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

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

We are keeping the list open to assist families needing affordable housing

Waiting list type: (select one)

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

If used, identify which development/sub jurisdiction:

	# of families	% of total families	Annual Turnover
Waiting list total	60		20%
Extremely low income <=30% AMI	57	95%	
Very low income (>30% but <=50% AMI)	2	03	
Low income (>50% but <80% AMI)	0	0	
Families with children	1	.01	
Elderly families	25	41.7	

Families with Disabilities	25	41.7	
Race/ethnicity – White	55	91.7	
Race/ethnicity -Black	5	8.3	
Race/ethnicity- Hispanic (any race)	43	71.7	
Race/ethnicity – Asian	0	0	
Characteristics by Bedroom Size (Public Housing Only)			
OBR	0	0	
1 BR	60	100	
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			

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

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

Does the PHA expect to reopen the list in the PHA Plan year?  No  Yes list not closed

Does the PHA permit specific categories of families onto the waiting list, even if generally closed?

No  Yes

## 9.1 Strategy for Addressing Housing Needs

- NBHA is on the Mayor’s taskforce to end homelessness in New Britain
- NBHA has adopted policies to support and encourage work
- Continue to work with local agencies to provide housing and services to Sec. 8 and public housing residents
- NBHA has applied for special purpose vouchers targeted for non-elderly families with disabilities
- Work with local veteran administration to find housing for veterans’ with Section 8 vouchers
- NBHA will continue to carry out needed modifications to public housing based on Section 504
- NBHA shall continue to apply for additional section 8 vouchers as they become available
- Pursue housing resources other than public housing or section 8 tenant –based assistance
- Continue to support those residents who can to seek homeownership opportunities

## 10.0 Additional Information

### a) Progress in meeting Mission and Goals

1. The NBHA has improved both in its management, maintenance and financial scores.
2. The NBHA has applied for an Emergency Grant for Security and Safety to purchase cameras for our family and elderly developments
3. The NBHA is maintaining an average utilization rate of 97% for the Section 8 Housing Choice voucher Program
4. The NBHA has a written agreement with Goodwin College to provide some of our residents with a free education, we assist with books.
5. The NBHA hired consultants IMC to assist in developing a long term strategic plan to revitalize its aging and deteriorating stock, a number of grants have been and will be applied for to assist in this process.

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

- Any modification or revision of the NBHA goals and objectives;
- Any change in admission policies or organization of the wait list;
- Any change to rent and/or charges;
- Additional non-emergency work items not included in the current Annual or Five-Year plan;

- Any change in the use of replacement reserve fund under the capital Fund;
- Any change with regard to demolition or disposition;
- Any change with regard to designation, homeownership programs or conversion activities.

#### **11.0 Required Submission for HUD Field Office Review**

11 (f) The NBHA reviewed the comments and recommendations of the resident advisory board. The board recommendations were well thought out and discussed. The recommendations will approve the work of the authority.

(g) The NBHA has no challenges to the recommendations and /or statements made by the advisory board.

See Attached CT005A02

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

**VIOLENCE AGAINST WOMEN ACT POLICY**

1.0 **PURPOSE:** 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 NBHA to respond appropriately to the violence while maintaining a safe environment for NBHA, employees, tenants, applicants, Section 8 participants, public housing program participants and others.

The Policy will assist the NBHA 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:** NBHA'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). NBHA 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.

This Policy is incorporated into NBHA's "Statement of Policies Governing Admissions to Continuing Occupancy of Low Rent Housing" and "Section 8 Program Administrative Plan".

3.0 **DEFINITIONS:** The definitions in this Section apply only to this Policy:

3.1: **Confidentiality:** All information provided to the NBHA about resident(s) of domestic violence, dating violence, stalking involving tenant or a member of the household will be held by NBHA in confidence and not shared without tenants consent, except that this information may be disclosed in an eviction proceeding or otherwise as necessary to meet the requirements of law.

3.2: **Dating Violence:** Violence committed by a person (a) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (b) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the



Resident Advisory Board Meeting

Annual Plan

01/26/2010

Participants: Lilliemay Ellison, NBHA, Joanne White, Housing Choice Voucher Section 8 Program Supervisor and Loo Pacacha, Attorney for the Authority

The following was discussed: Section 8 Administration Plan

Chapter 11

Reviewed:

Page IV Term:

No changes

Resident Advisory Board Meeting

Annual Plan

02/09/2010

Participants: Lilliemay Ellison, NBHA, Joanne White, Section 8 Housing Choice Voucher Program Supervisor and Betty Evans, Property Manager

The following was discussed: Section 8 Administration Plan

Chapter 7

Reviewed:

Discussed the Care for Kids program, what would be considered reasonable childcare cost

Discussed licensed care verse unlicensed care for children

Discussed getting Care for Kids information from the website to develop a baseline

Chapter 11

Okay

Resident Advisory Board Meeting

Annual Plan

02/23/2010

Participants: Phil Mireles, Tenant Interviewer, NBHA, Joanne White, Section 8 Housing Choice Voucher Program Supervisor and Betty Evans, Property Manager

The following was discussed:

Jorge Mireles, Section 8 inspector wanted the following language put in the policy

All Family units

1. Install smoke detectors on every level outside apartment door at front & rear common hall, install smoke detectors in the attic & basement.
2. For any form of heating unit or water heater in the unit that vents exhaust , install a carbon monoxide detector
3. Exterior lights must be enclosed or be equipped with exterior grade bulbs, (no open sockets)
4. No combustibles stored in basement, including equipment with combustibles

It was decided to schedule a meeting with the City of New Britain Fire Marshalls Office to discuss the changes and review the current local requirements for homeowners

A meeting was scheduled for 3/23/2010

Resident Advisory Board Meeting

Annual Plan

03/23/2010

Participants: Joanne White, Section 8 Housing Choice Voucher Program Supervisor, Betty Evans, Property Manager, Phil Mireles, Tenant Interviewer/Inspector and Tom Ronalter, Acting Fire Marshal, Isabel Cortes, Tenant Interviewer, Section 8 Program

The following was discussed: New Britain Code as it applied to homeowners throughout the city

1. We reviewed state code for fire doors, which stated that every building with 6 or more units required annual inspection
2. The City inspect 1800 a year
3. Smoke detectors could be battery operated or hardwired with battery back-up
4. Kitchen modifications for properties with 3 units
  - a. Option 1        Nothing at all
  - b. Option 2        Automatic fire detection system
  - c. Option 3        Sprinkler selected certain areas
  - d. Option 4        Approved full coverage
5. Fire doors are applicable for new constructions
6. Apartment max 3 locks (must be three hand motions)
7. Fire escape, does allow one exit
8. 3<sup>rd</sup> floor- not excepted, a ladder for exit
9. Lack of two exits, a landlord can correct down the road, travel distance if it has a ladder, it does not pass
10. Means of egress
  - a. Door, should be a stairway
  - b. Stairs to stairway
  - c. Guards on landing, no barriers on landing

d. Windows means of egress, exiting an approved opening

Carbon Monoxide is required for new one and two family homes (new construction)

Reference Code

72152 – release

712593-712594 exit door

Apt. egress: shall be permitted not more than 48 inches from floor

712593 permitted to have 2 additional motions, hand movements for locks

Open discussion regarding Chapter 7 and child care deductions

HUD.Gov was researched to see if there was a standard, we found information regarding the Child Care Deduction and fee analysis of Child Care Facilities in Connecticut to ensure fairness

Areas reviewed:

1. Child care identified
2. Who is able to do what, because of childcare
3. Identify the child care providers (get receipts)
4. 3<sup>rd</sup> Sheet requirement (Summary Sheet/approval and denial form)
5. Calculations
6. Fees must be reasonable

Also worked on a Foreclosure/tenants form for 4/06/2010

Resident Advisory Board Meeting

Annual Plan

04/06/2010

Participants: Loo Pacacha, NBHA Counsel, Joanne White, Section 8 Housing Choice Voucher Program Supervisor and Betty Evans, Property Manager

The following was discussed: Chapter 8 of Section 8 Administration Plan

The Authority will incorporate new information regarding smoke detectors in based upon regulations.

Referred to Chapter 8, 4-5, reasonable accommodations, no changes

Created language for Chapter 16 D. Tenants in Foreclosure

This was ensure the participants on Section is not harmed through the foreclosure process

## Resident Advisory Board Meeting

Annual Plan

04/20/2010

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, , Loo Pacacha, NBHA, Attorney, and Betty Evans, Property Manager, Evelyn Rodriguez, Property Manager, Juan Verdue, HRA

The following was discussed:

The lease was modified, we removed the first sentence on page 9 of 19 (2), also page 11 of 19, (14) added the language dwelling unit on or off the property

Change the number sign-word Efectivo

1. Worked on the Lease Highlights draft
2. Discussed the No Smoking Policy in Public Housing, it was tabled until pending notification from HUD
3. Sexual Offenders: Put a new number one, new forms attached to policy

## Resident Advisory Board Meeting

Annual Plan

04/27/2010

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, , Loo Pacacha, NBHA, Attorney, and Betty Evans, Property Manager, Evelyn Rodriguez, Property Manager, Axel Gonzalez, Director of Operations, Nellie Rivera, resident of Kennedy Building, Elaine LaValle, resident of the Kennedy Building, several tenants from Mount Pleasant, Juan Verdue, HRA

The following was discussed: Lease Highlights

Lease Highlights were created to condense the 19 page lease down to a few pages. The most important information such as but not limited to:

1. Annual Recertification'
2. Utilities (air conditioner charges)
3. Occupancy
4. Special notice for the tenant who have their own stoves , refrigerators and storage in Oval Grove basement areas
5. Special note regarding renters insurance

IPM: A presentation regarding bug control and what an IPM plan should consist of, Attorney Loo Pacacha, distributed information she had research regarding an IPM plan.

A&A Pest Control has been working with other Authority's regarding IPM

We will discuss IPM at next meeting

## Resident Advisory Board Meeting

Annual Plan

05/11/2010

Participants: Jean Burby, President, Senior Coalition, Ribicoff Building, , Loo Pacacha, NBHA, Attorney, and Betty Evans, Property Manager, Evelyn Rodriguez, Property Manager, A&A Pest Control , Axel Gonzalez, Director of Operations, Nellie Rivera, resident of Kennedy Building, Elaine LaValle, resident of the Kennedy Building, several tenants from Mount Pleasant, Juan Verdue, HRA, Lisa Woodbury, Oval Grove, Real Dubois, D'Amato, Maria Nunez, Mount Pleasant

The following was discussed: Lease Highlights

IMP:

1. Non chemical method of treatment for bugs, rodents and vermin
2. Corrective plan to address the problem
3. Sanitation issues; public schools
4. No pesticide application of liquid with prior notification
5. Team work, no magic wand, IPM, three parts: HA, Residents and effective pest control

### Recommendation

Pest Control

1. Question regarding chemicals( a resident stated he ended up in the hospital once from D'Amato and twice from the Kennedy, especially in elevators) concerned about usage of chemicals
2. Answer: Scheduling is critically important, anyone having medical condition that may require help, need to address it at the time of notification to avoid situations such as that
3. Put up signs with the product name, Answer: The Authority does that currently upon request, photo, MSDS( Material Safety Data Sheet)
4. The possible cost of IPM initially, could total 150,000
5. The whole goal is to fade out, and fade in a better quality of life.
6. Mice; apartment information gathering, system of mice is not stupid, their inconsistent, leaving their calling card
7. Education for the residents

8. Possible to meet with the State of Connecticut DEP to review the plan created, should they say its okay, then were are okay
9. Bed bug discussion, used furniture, used mattresses
10. Started discussion for the air conditioner units, will address at next meeting

## Resident Advisory Board Meeting

Annual Plan

05/25/2010

Attendees:      Jean Burby, Ribicoff Building                      Nellie Rivera, Kennedy Building  
                      Eleanor Cararini, D'Amato Building                 Frank Smith, D'Amato Building  
                      Adorm Cwelecki, D'Amato Building                     Elaine LaValle, Kennedy Building  
                      Real Dubois, D'Amato Building                         Zofia Turko, D'Amato Building  
                      Carmen Diaz, 130 Bond Street                         Evangelista Velezquez, Bond Street  
                      Carmen Centeno, D'Amato Building                    Ann Branca, D'Amato Building  
                      Lisa Woodbury, Oval Grove                              Loo Pacacha, Attorney, NBHA  
                      Evelyn Rodriguez, Property Manager                 Juan Verdue, HRA  
                      Alton Brooks, HRA Board Member

### Discussion : No smoking policy

1. Ribicoff Building resident, stated no to smoking in hallways, or common area, but allow individuals to smoke in their units.
2. Mr. Smith pointed out that individual are effected by 3<sup>rd</sup> hand smoke
3. 99% of the people are smokers in public housing, a number objected to that statement
4. They wanted to know whether or not programs will be available to help individuals with quitting smoking
5. NY City has a program
6. Strong recommendation: Addictive services
7. Strong recommendation: To start now informing the residents that we are creating a no smoking policy
8. We also discussed electronic cigarettes
9. Regular schedule meeting for next year, we will discuss this topic further, table for now, we need to do a lot of work

### Outline:

1. Phase In
2. Recommendation from tenants (no smoking policy)
3. Smoking Cessation program

4. Possible to designate areas
5. Phase in year one, year two, year three
6. Training on Stop Smoking
7. Invite more people to the table
8. Complete a survey: a. Is there a smoker in your house, b. Have you tried to stop smoking, c. Are you willing to stop smoking, line for opinion
9. Juan Verdue stated is it possible to designate housing for smoking

Policy to designate some places, want to create their own rules, 5 yrs

Air Conditioner Debate: individual were giving copies of other developments who charge air conditioner costs.

We discussed CL&P, School House one and two annual cost, we discussed putting the cost at 25.00 for a 5,000 btu and 40 for 12,000 btu

Resident who have to pay for electricity felt the cost was to low because they would have electric bills costing greater each month.

We also discussed the season, when it begins for the year.

We also discussed proper storage, covering and sleeves for the A/C

Resident Advisory Board Meeting

Annual Plan

06/01/2010

Attendees: Frank Smith, D'Amato Building, Betty Evans, Property Manager, Juan Verdue, HRA, Loo Pacacha, Attorney, NBHA, Axel Gonzalez, Director of Operations, Real Dubois, D'Amato Building

The following was discussed:

Committee no longer had to debate the air conditioner fee, the Executive Office decided on a \$25.00 monthly fee

Lease: Reviewed changes to lease on page 3, Section VII, first paragraph

Air Conditioners: A monthly charge will be assessed for each air conditioner registered in the unit for development provided with electricity by NBHA. Failure to register will result in a charge based on 12 month usage.

Page 11 of 19 of the lease

XC (1) Not to assign the Lease or sublease possession of the dwelling unit or any part thereof, or permit the use of the premises for any purpose other than as a private dwelling solely for the Residents and family members appearing on the lease. This does not exclude visitors from occupying the premises for a reasonable length of time; however, Residents must notify the Authority of all overnight visitors. Visitors may not occupy the premises for more than fifteen days within the twelve month period without the advance written consent of the Authority. Visitor status shall be assumed if the person claiming such status maintains a separate domicile.

(2) Not to provide accommodation for boarders or lodgers. Not to allow persons not in the household to use the premises as their mailing address

XC (14) Shall not engage in criminal activity in the dwelling unit or on or off the premises, and shall

At letter was received from Elaine LaValle;

Resident Advisory Board Meeting

Annual Plan

06/15/2010

Attendees: Frank Smith, D'Amato Building, Betty Evans, Property Manager, Juan Verdue, HRA, Loo Pacacha, Attorney, NBHA, Phil Mireles, Tenant Interviewer

The following items were tabled until January 2011

1. Integrated Pest Management
2. No Smoking Policy
  
1. Visitors must be registered with the Authority according to the policy
2. Signage- Subject to towing after 12:00 a.m.-5:00 a.m.
3. Chapter 4 of the ACOP was discussed, no changes needed at this time
4. We reviewed the hardship exemption in chapter 6

Resident Advisory Board Meeting

Annual Plan

06/22/2010

Attendees: Lou Saraceno, Accounting Manager, Betty Evans, Property Manager, Juan Verdue, HRA, Loo Pacacha, Attorney, NBHA, Evelyn Rodriguez, Property Manager

**Last Meeting**

All information regarding family hardship remains the same, it is out of HUD regulation

Resident Advisory Board Meeting

Annual Plan

08/17/2010

Participants: Loo Pacacha, Attorney for the Authority and Betty Evans, Housing Asset Manager

The following was discussed: Reasonable Accommodation Plan and Chapter 2 of the ACOP

Chapter 2 Reviewed: Page IV Term:

Added language to chapter 2 or 7, added an

2-II.I Reasonable accommodation wait list, which states as required, the NBHA will maintain a separate wait list for reasonable accommodation requests that have been granted but cannot be immediately implemented

The wait list will be organized by date of granting reasonable accommodation.

See the Housing Authority of the City of New Britain Reasonable Accommodation Policy, Book 2

<b>Part I: Summary</b>					
<b>PHA Name: New Britain Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550110 Replacement Housing Factor Grant No: Date of CFFP:	<b>FFY of Grant: 2010</b> <b>FFY of Grant Approval:</b>			
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no:1 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <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>	137,929.00	137,465.00		
3	1408 Management Improvements	41,321.00	39,346.00		
4	1410 Administration (may not exceed 10% of line 21)	137,929.00	137,465.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	88,000.00	88,000.00		
8	1440 Site Acquisition				
9	1450 Site Improvement	275,000.00	275,000.00		
10	1460 Dwelling Structures	600,000.00	600,000.00		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	35,000.00	35,000.00		
13	1475 Non-dwelling Equipment	62,377.00	62,377.00		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<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  
 OMB No. 2507-0225  
 Expires 4/30/2011

Part E: Summary

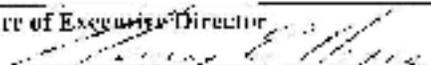
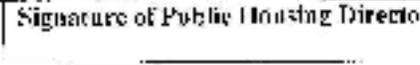
PIA Name:  
 New York's  
 Housing Authority

Grant Type and Number  
 Capital Fund Program Factor No. 12540250110  
 Replacement Housing Factor Grant No.  
 Date of CLEA

FFY of Grant: 2010  
 FFY of Grant Approval:

Type of Grant

- Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (Revision # \_\_\_\_\_)
- Performance and Evaluation Report for Period Ending \_\_\_\_\_       Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	15% Capitalization or Debt Service, paid by the PHA				
18b	90% Capitalization or Debt Service, paid Via System of Direct Payment				
19	15% Contingency (may not exceed 3% of line 19)				
20	Amount of Annual Grant (sum of lines 2 - 19)	1,387,971.00			
21	Amount of line 20 Related to 15% Activities				
22	Amount of line 20 Related to Section 504 Activities	(600,000.00)			
23	Amount of line 20 Related to Security - Section 504				
24	Amount of line 20 Related to Security - Section 504				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
		10/14/09			

<sup>1</sup> To be complete 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> The width and/or 250 units of management may use 100% of CFP Grants for operations.  
<sup>4</sup> RIF Funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2010</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA WIDE								
	DIRECTOR OF OPERATIONS	1410		39,000.00				
	CLERK OF THE WORKS	1410		64,000.00				
	EXECUTIVE ASSISTANT	1410		34,465.00				
	OPERATIONS	1406		137,465.00				
	MANAGEMENT IMPROVEMENTS	1408		39,346.00				
	ARCHITECT/ ENGINEER	1430		88,000.00				
	SUBTOTAL			402,276.00				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550110 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2010</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
CT502 OVAL GROVE A.	ADA CONVERSION	1460	4	400,000.00				
B.	APT CONVERSION TO FLATS	1460	4	200,000.00				
CT 503 KNAPP VILLAGE A.	RESURFACE PARKING LOTS	1450	3	150,000.00				
B.	REPAIR SIDEWALKS	1450		100,000.00				
CT 504 KENNEDY APTS	REPAIR SIDEWALKS	1450		25,000.00				
CT 507 GRAHAM APTS A.	REPLACE PATIO DOORS AND RAILINGS	1470	8	35,000.00				
B.	REPLACE COMMON AREA HEATERS	1475	27	18,000.00				
CT 509 D'AMATO APTS	REPLACE EMERGENCY FIRE PANEL	1475	1	44,377.00				
	SUBTOTAL			972,377.00				
	TOTAL			1,374,653.00				

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: New Britain Housing Authority					<b>Federal FFY of Grant: 2010</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT502 OVAL GROVE A.	2012		2014		
B.	2012		2014		
CT 503 KNAPP VILLAGE A.	2012		2014		
B.	2012		2014		
CT 504 KENNEDY APTS	2012		2014		
CT 507 GRAHAM APTS A.	2012		2014		
B.	2012		2014		
CT 509 D'AMATO APTS.	2012		2014		

<sup>1</sup> 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.



<b>Part I: Summary</b>						
<b>PHA Name:</b> New Britain Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550109 , Revision #2 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant:</b> 2009 <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <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>	137,929.00	137,929.00	137,929.00	137,929.00	
3	1408 Management Improvements	18,047.00	18,047.00	18,047.00		
4	1410 Administration (may not exceed 10% of line 21)	137,929.00	137,929.00	137,929.00	137,929.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	88,000.00	88,000.00	88,000.00		
8	1440 Site Acquisition					
9	1450 Site Improvement	125,000.00				
10	1460 Dwelling Structures	401,257.00	690,387.00	229,489.00	206,540.00	
11	1465.1 Dwelling Equipment—Nonexpendable	180,010.00	180,000.00			
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	291,120.00	127,000.00			
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

<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  
 OPIH No. 2577-0226  
 Expires 4/30/2011

**Part I: Summary**

PHA Name: <b>New Heights</b>	Grant Type and Number: Capital Fund Program Grant No. U26P0050109 REV2	FY of Grant: 2009
Housing Authority:	Replacement Housing Project Grant No. Date of CEI:	FY of Grant Approval:

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised <sup>1</sup>	Allocated	Expended
1Aa	1st 1000 Rehabilitation Data System paid by PHA				
1Bba	2000 Collaboration on Debt Service paid Via System of Direct Payment				
10	100 Contingency (to be not exceed 6% of line 20)				
20	Amount of annual financial costs of lines 2 - 19	1,379,292.00	1,379,292.00	611,394.00	482,398.00
21	Amount of line 20 allocated to IHP Activities	171,756.00			
22	Amount of line 20 Reserve for Section 504 Activities				
23	Amount of line 20 allocated to Security - Soft Costs				
24	Amount of line 20 allocated to Security - Hard Costs				
25	Amount of line 20 Reserve for Energy Conservation Measures				

Signature of Recipient Director: *[Signature]* Date: *5-25-10*      Signature of Public Housing Director: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup> To be completed in 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 HUD's or LPH's funds for equipment.  
<sup>4</sup> RIF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550109 , Revision #2 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA WIDE								
	DIRECTOR OF OPERATIONS	1410		39,000.00	39,000.00	39,000.00	39,000.00	
	CLERK OF THE WORKS	1410		64,000.00	64,000.00	64,000.00	64,000.00	
	EXECUTIVE ASSISTANT	1410		34,929.00	34,929.00	34,929.00	34,929.00	
	OPERATIONS	1406		137,929.00	137,929.00	137,929.00	137,929.00	
	MANAGEMENT IMPROVEMENTS	1408		18,047.00	18,047.00	18,047.00		
	ARCHITECT/ ENGINEER	1430		88,000.00	88,000.00	88,000.00		
	SUBTOTAL			381,905.00	381,905.00	381,905.00	275,858.00	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550109, Revision #2 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
CT 5-1 Mt Pleasant								
A.	Lead Paint Removal	1460	252	85,878.00	-----0----			Moved to Cap Fund 2008
CT 5-2 Oval Grove	Lead Paint Removal	1460	160	85,878.00	-----0-----			Moved to Cap Fund 2008
A.								
B.	Site Lighting	1450	28bldg	125,000.00	-----0-----			Moved o ARRA Grant
C.	Replace Interior Doors	1460	160		460,898.00			Moved from 2008
CT 5-3	Electrical Upgrades	1465.1	60	180,010.00	180,000.00			In Design
A.								
Knapp Village								
CT 5-4	Paint and Carpet Common Areas	1460	1	49,125.00	57,372.25	57,372.25	51,635.00	Under Contract
A.								
Kennedy Apt								
CT-5	Paint and Carpet Common Areas	1460	1	69,125.00	57,372.25	57,372.25	51,635.00	Under Contract
A.								
Ribicoff Apt								
CT-7	Paint and Carpet Common Areas	1460	1	69,125.00	57,372.25	57,372.25	51,635.00	Under Contract
A.								
Graham Apt								
CT-9	Paint and Carpet Common Areas	1460	1	42,126.00	57,372.25	57,372.25	51,635.00	Under Contract
A.								

D'Amato								
B.	Elevator Upgrades	1475	2	291,120.00	127,000.00			Being Awarded
	<b>SUBTOTAL</b>			997,387.00	997,387.00	229,489.00	206,540.00	
	<b>TOTAL</b>			1,379,292	1,379,292.00	611,394.00	482,398.00	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>						
PHA Name: New Britain Housing Authority					<b>Federal FFY of Grant: 2009</b>	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
CT5-1 A.	2011	2011`	2013	2013	Moved to 2008	
CT 5-2 A.	2011	2011	2013	2013	Moved to 2008	
B.	2011	2011	2013	2013	Moved to ARRA Grant	
C	2011	2011	2013	2013	Moved from 2008	
CT 5-3 A.	2011	2011	2013	2011	In Design	
CT 5-4 A.	2011	2010	2013	2010	Under Contract	
CT 5-5 A.	2011	2010	2013	2010	Under Contract	
CT5-7 A.	2011	2010	2013	2010	Under Contract	
CT 5-9 A.	2011	2010	2013	2010	Under Contract	
B	2011	2010	2013	2010	Being Awarded	

<sup>1</sup> 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.

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: New Britain Housing Authority					<b>Federal FFY of Grant: 2009</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT 5-1 B.	2011		2013		
CT5-2 A.	2011		2013		
B.	2011		2013		
CT5-3 A.	2011		2013		
CT 5-4 A.	2011		2013		
CT-5 A.	2011		2013		
CT-7 A.	2011		2013		
CT-9 A.	2011		2013		

<sup>1</sup> 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.

<b>Part I: Summary</b>		
<b>PHA Name: New Britain Housing Authority</b>	<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26S00500109 Replacement Housing Factor Grant No: Date of CFFP: 3/18/2009	<b>FFY of Grant: 2009</b> <b>FFY of Grant Approval:</b>

**Type of Grant**  
 Original Annual Statement       Reserve for Disasters/Emergencies       Revised Annual Statement (revision no:4 )  
 Performance and Evaluation Report for Period Ending:       Final Performance and Evaluation Report

Line	Summary by Development Account	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)	134,000.00	134,000.00	134,000.00	134,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	219,788.00	187,091.00	187,091.00	137,000.00
8	1440 Site Acquisition				
9	1450 Site Improvement	189,500.00	192,539.00	192,539.00	173,285.00
10	1460 Dwelling Structures	528,000.00	528,000.00	528,000.00	427,050.00
11	1465.1 Dwelling Equipment—Nonexpendable	690,340.00	719,998.00	719,998.00	608,149.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<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.

**Part I: Summary**  
 PHA Name: **New Britain Housing Authority**  
 Grant Type and Number: **Capital Fund Program Grant No: CT25700500-06 Replacement Housing Factor No: Date of CFFP: 2/18/09**  
 FFY of Grant: **2009**  
 FFY of Grant Approval:

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised <sup>1</sup>	Obligated	Expended
101	150 Capitalization of Debt Service paid by the PHA				
106	300 Capitalization of Debt Service paid via Section 8 Direct Payment				
19	1502 Contingency (may not exceed 3% of line 20)				
20	Amount of Annual Grant (Sum of lines 10-19)	1,761,528.00	1,510,828.00	748,932.00	88,316.00
21	Amount of line 20 Related to 80 Activities				
22	Amount of line 20 Related to Section 8 <sup>1</sup> 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 Housing Management Measures				

Signature of Executive Director: \_\_\_\_\_ Date: 10/20/09  
 Signature of Public Housing Director: \_\_\_\_\_ Date: \_\_\_\_\_

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed in the Performance and Evaluation Report for a Revised Annual Statement.  
<sup>3</sup> PHAs with under 25% units in management may use 100% of CFFP Grants for operations.  
<sup>4</sup> To be filled in by the applicant only.



<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26S00550109 CFFP (Yes/ No): Replacement Housing Factor Grant No:			<b>Federal FFY of Grant: 2009</b>		
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 <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
CT 5-2 A.	Window Replacement	1460	160	528,000.00	528,000.00	528,000.00	427,000.00	
Oval Grove	Site Lighting Replacement	1450		189,500.00	192,539.00	192,539.00	173,285.00	
CT 5-3 A.	Replace Heating System	1465	11	221,000.00	221,000.00	221,000.00	176,999.00	
Knapp Village								
CT 5-4 A. Kennedy Apt	Replace Heating System	1465	2	343,900.00	355,466.00	355,466.00	355,466.00	
B.	Refurbish Fire Pumps	1465	1	22,000.00	28,031.00	28,031.00	25,228.00	
C.	Replace Roof Exhaust Units	1465		19,814.00	19814.00	19,814.00	0	
CT-5 Ribicoff Apt	A. Refurbish Fire Pumps	1465	1	22,000.00	28,031.00	28,031.00	25,228.00	
B.	Replace Roof Exhaust Units	1465		19,813.00	19813.00	19,813.00	0	
CT-7 A. Graham Apt	Refurbish Fire Pumps	1465	1	22000.00	28,031.00	28,031.00	25,228.00	
B.	Replace Roof Exhaust Units	1465		19,813.00	19,813.00	19,813.00	0	
	SUBTOTAL			1,407,840.00	1,440,537.00	1,440,537.00	1,208,484.00	
	TOTAL			1,761,628.00	1,761,628.00	1,761,628.00	1,479,484.00	

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

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

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

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>					
PHA Name: New Britain Housing Authority					<b>Federal FFY of Grant: 2009</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT5-2 A.	3/18/2010		3/18/2012		
CT5-3 A.	3/18/2010		3/18/2012		
CT5-4 A.	3/18/2010		3/18/2012		
B.	3/18/2010		3/18/2012		
C.	3/18/2009		3/18/2012		
CT5-5 A.	3/18/2010		3/18/2012		
B.	3/18/2010		3/18/2012		
CT5-7 A.	3/18/2010		3/18/2012		
B.	3/18/2010		3/18/2012		
CT5-9 A.	3/18/2010		3/18/2012		

<sup>1</sup> 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.



<b>Part I: Summary</b>						
<b>PHA Name: New Britain Housing Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No:CT26P00550108, REVISION # 3 Replacement Housing Factor Grant No: Date of CFFP:			<b>FFY of Grant: 2008</b> <b>FFY of Grant Approval:</b>	
<b>Type of Grant</b> <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3 ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <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>	138,797.00	138,797.00	138,797.00	138,797.00	
3	1408 Management Improvements	-----0-----	0			
4	1410 Administration (may not exceed 10% of line 21)	138,797.00	138,797.00	138,797.00	138,797.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	185,739.00	229,782.56	229,782.56	94,787.41	
8	1440 Site Acquisition					
9	1450 Site Improvement	20,000.00	-----0-----			
10	1460 Dwelling Structures	711,378.00	418,653.60	369,273.60	63,695.60	
11	1465.1 Dwelling Equipment—Nonexpendable	35,668.00	35,668.00	25,668.00	23,101.20	
12	1470 Non-dwelling Structures	124,560.00	143,240.84	143,240.84	110,054.36	
13	1475 Non-dwelling Equipment	33,032.00	283,032.00	33,032.00	32,366.24	
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					

<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  
 OMB No. 2517-0046  
 Expires 4/30/2011

Part I. Summary

PHA Name: New Britain Housing Authority	Grant Type and Number: Capital Fund Program Grant No. CT06PD03501CR REV 3 Replacement Housing Factor Grant No. Date of CFSP:	FY of Grant: 2008 FY of Grant Approved:
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Type of Grant:  
 Original Annual Statement     Request for Disasters/Emergencies     Revised Annual Statement (revisions to:  
 Performance and Evaluation Report for Period Ending:     Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised	Obligated	Expended
18a	19010000 - Utilities or Life Services paid by the PHA				
18b	90000000 - Other Utilities and Gas System of Direct Account				
19	10020000 - Emergency Care (not included in 20)				
20	Amount of Annual Grant (sum of lines 18-19)	1,387,971.00	1,387,971.00	1,078,591.00	601,598.81
21	Amount of line 20 Related to BP Activities	190,378.00	305,578.00		
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Facility - Staff Costs				
24	Amount of line 20 Related to Security - Guard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

Signature of Executive Director: *Tracy E. Hoke*    Date: *5-25-10*    Signature of Public Housing Director: \_\_\_\_\_    Date: \_\_\_\_\_

<sup>1</sup> To be completed for the Performance and Evaluation Report.  
<sup>2</sup> To be completed for the Performance and Evaluation Report in a Revised Annual Statement.  
<sup>3</sup> PHAs with under 250 units in management may use the HUD or U.S. Grants transactions.  
<sup>4</sup> RIF funds shall be included here.

<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority			Grant Type and Number CT26P00550108, Revision #3 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA WIDE								
	DIRECTOR OF OPERATIONS	1410		39,000.00	39,000.00	39,000.00	39,000.00	
	CLERK OF THE WORKS	1410		64,000.00	64,000.00	64,000.00	64,000.00	
	EXECUTIVE ASSISTANT	1410		35,797.00	35,797.00	35,797.00	35,797.00	
	OPERATIONS	1406		138,797.00	138,797.00	138,797.00	138,797.00	
	ARCHITECT/ ENGINEER	1430		88,000.00	132,043.56	132,043.56	94,787.41	
	preliminary revitalization fees/costs	1430		97,739.00	97,739.00	97,739.00	0	
	SUBTOTAL			463,333.00	507,376.56	507,376.56	372,381.41	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report.

<b>Part II: Supporting Pages</b>								
PHA Name: New Britain Housing Authority				Federal FFY of Grant: 2008				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
CT 5-1 Mt Pleasant A.	Lead Paint Removal	1460	252	183,189.00	152,789.00	152,789.00		Under Contract
CT 502 Oval Grove								
A.	Kitchen Rehab	1460	160	49,000.00	63,695.60	63,695.60	63,695.60	Complete
B.	Replace Closet Doors	1460	160	250,000.00	-----0-----			Moved to 2009
C.	Site Lighting Improvements	1450	28 blds	20,000.00	-----0-----			Moved to ARRA Grant
D.	Rehab Playground & Playscape	1470	1	124,560.00	143,240.84	143,240.84	110,054.37	In Construction
E.	Lead Paint Removal	1460	1	183,189.00	152,789.00	152,789.00		Under Contract
CT 5-3 Knapp Village								
B.	Install Doorbells	1465.1	60	10,000.00	10,000.00			Under Contract
C.	Replace Closet Doors	1460	60	46,000.00	49,380.00			Under Contract
CT 5-4 Kennedy Apts								
B.	Replace Security Camera and Intercom	1465	1	8,556.00	8,556.00	8,556.00	7,700.40	Complete
C.	Replace Mailboxes	1475	70	11,000.00	11,000.00	11,000.00	10,788.75	Complete
CT 5-5 Ribicoff Apts								
B.	Replace Security Camera and Intercom	1465	1	8,556.00	8,556.00	8,556.00	7,700.40	Complete
C.	Replace Mailboxes	1475	104	11,000.00	11,000.00	11,000.00	10,788.75	Complete
	SUBTOTAL			905,050.00	611,006.44	551,626.44	210,728.26	

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

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

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

<b>Part II: Supporting Pages</b>									
PHA Name: New Britain Housing Authority			<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P00550108, Revision #3 CFFP (Yes/ No): Replacement Housing Factor Grant No:				<b>Federal FFY of Grant: 2008</b>		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
CT 5-7 Graham Apts									
Graham Apt B.	Replace Security Camera and Intercom		1465	1	8,556.00	8,556.00	8,556.00	7,700.40	Complete
C..	Replace Mailboxes		1475		11,032.00	11,032.00	11,032.00	10,788.74	Complete
CT 5-9 D'Amato Apt									
B	Elevator Upgrades		1475	2	-----0-----	250,0000			Being Awarded
	SUBTOTAL				19,588.00	269,588.00	19,588.00	18,489.14	
	Total				1,387,971.00	1,387,971.00	1,078,591.00	601,598.81	

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

<sup>2</sup> To be completed for the Performance and Evaluation Report

<b>Part III: Implementation Schedule for Capital Fund Financing Program</b>						
PHA Name: New Britain Housing Authority						<b>Federal FFY of Grant: 2008</b>
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
CT 5-1 A.	2010	2010	2012	2012	Under Contract	
CT 5-2 A.	2010	2010	2012	2012	Complete	
B.					Moved to 2009	
C.					Moved to ARRA Grant	
D.	2010	2010	2012	2012	In Construction	
E.	2010	2010	2012	2012	Under Contract	
		2010		2012		
CT 5-3						
B.	2010	2010	2012	2012	Being Awarded	
C.	2010	2010	2012	2012	Being Awarded	
CT 5-4						
B.	2010	2010	2012	2012	Complete	
C.	2010	2010	2010	2012	Complete	

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**

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

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

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

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/Number <b>New Britain Housing Auth.</b>		New Britain, Connecticut			<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b>	<input type="checkbox"/> <b>Revision No:</b>
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2011</u>	Work Statement for Year 2 FFY <u>2012</u>	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 4 FFY <u>2014</u>	Work Statement for Year 5 FFY <u>2015</u>
	CT501 MT PLEASANT CT502 OVAL GROVE CT503 KNAPP VILLAGE CT504 KENNEDY APTS CT505 RIBICOFF APTS CT507 GRAHAM APTS CT509 D'AMATO APTS					
B.	Physical Improvements Subtotal	Annual Statement	972,377.00	972,377.00	972,377.00	972,377.00
C.	Management Improvements		39,346.00	39,346.00	39,346.00	39,346.00
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		137,465.00	137,465.00	137,465.00	137,465.00
F.	Fees and Cost		88,000.00	88,000.00	88,000.00	88,000.00
G.	Operations		137,465.00	137,465.00	137,465.00	137,465.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		1,374,653.00	1,374,653.00	1,374,653.00	1,374,653.00
L.	Total Non-CFP Funds					
M.	Grand Total					







<b>Part I: Summary</b>					
<b>PHA Name:</b> New Britain Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: Date of CFFP: CT26P00550111		Replacement Housing Factor Grant No:	
				<b>FFY of Grant:</b> 2011	
				<b>FFY of Grant Approval:</b>	
<b>Type of Grant</b>					
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:					
Line	Summary by Development Account	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>	\$137,465.00			
3	1408 Management Improvements	\$14,346.00			
4	1410 Administration (may not exceed 10% of line 21)	\$137,465.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$88,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$30,000.00			
10	1460 Dwelling Structures	\$546,400.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	\$300,000.00			
13	1475 Non-dwelling Equipment	\$120,977.00			
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)	\$1,374,653.00			
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 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>					
PHA Name: New Britain Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P00550111 Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2011 FFY of Grant Approval:
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
Signature of Executive Director <i>Mary E. Boyce</i>		Date 10.15.10		Signature of Public Housing Director Date	





Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: New Britain Housing Authority					Federal FFY of Grant: CT26P00550111
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT. 5-1	2013		2015		
CT. 5-2	2013		2015		
CT. 5-3	A.	2013		2015	
	B.	2013		2015	
CT. 5-4	A.	2013		2015	
	B.	2013		2015	
	C.	2013		2015	
CT. 5-9	A.	2013		2015	
	B.	2013		2015	

<sup>1</sup> 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.

