

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>West Haven Housing Authority</u> PHA Code: <u>CT 029</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/2012</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>617</u> Number of HCV units: <u>533</u>				
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program PH HCV
	PHA 1:				
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: See attached Mission				
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. See attached Goals and Objectives				
<b>6.0</b>	<p><b>PHA Plan Update</b></p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: None</p> <p><b>Summary of Policy and Program Changes</b></p> <p>The WHHA intends to prepare and submit a Designated Housing Application to HUD by September, 2011. Local preferences were established and will not change, rent policies remain the same, community service policy parameters were included in our lease, ACOP, and our pet policy has been implemented.</p> <p>However, the WHHA has entered into a Capital Funds Bond issue program which obtained \$2,500,000 for the replacement of heating systems in Surfside and Spring Heights that will be repaid from a portion of Capital Fund allocation each year per a Debt Service schedule.</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.</p> <p>Display Locations For PHA Plans and Supporting Documents as well as information regarding any activities outlined in this plan can be obtained by contacting PHA development management offices or the Main administrative office of the WHHA, 5 Glade St., West Haven, CT 06516.</p>				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> Include statements related to these programs as applicable. N/A				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. See attached 2012 Annual Plan; 2011 Performance and Evaluation Report; 2010 Performance and Evaluation Report; and 2009 Stimulus Performance and Evaluation Report.				
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See attached Capital Fund Program 2012-2016 Five-Year Action Plan				
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.				

9.0	<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. See attached Housing Needs</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. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. See attached Strategy for Addressing Housing Needs</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. The PHA has been able to maintain its mission to seek diversified, safe, decent and affordable housing, for low and moderate income families through the utilization of previous Capital funds and the proper application of our public housing policies. We are continuing to address public housing vacancies very aggressively and our PHAS and SEMAP scores indicate that other operational issues are being positively addressed. Capital funds have been utilized to provide modernization of our properties and our FY 2012 application will continue that effort. PHA has implemented local preferences to improve the living environment by deconcentration, promoting income mixing, and improving security throughout our developments. The PHA created and continues to facilitate self-sufficiency programs to improve resident employability as well as solicit support services for the elderly and families with disabilities. We are confident that the PHA will be able to continue to meet and accommodate all our goals and objectives for FY 2012.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p><b>A. Substantial Deviation from the 5-year Plan:</b></p> <p>The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> <li>• changes to rent or admissions policies or organization of the waiting list;</li> <li>• additions of non-emergency work items (items not intended in the current 5-Year Action Plan) or change in use of replacement reserve funds under the Capital Fund; and</li> <li>• any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.</li> </ul> <p><b>B. Significant Amendment or Modification to the Annual Plan:</b></p> <p>The Public Housing Authority's (PHA) Definition of Substantial Deviation and Significant Amendment or Modification is as follows:</p> <ul style="list-style-type: none"> <li>• changes to rent or admissions policies or organization of the waiting list;</li> <li>• additions of non-emergency work items (items not intended in the current Annual Statement) or change in use of replacement reserve funds under the Capital Fund; and</li> <li>• any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.</li> </ul>
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>

**11.0 (F) Resident Advisory Board (RAB) comments.**

**Resident Advisory Board Recommendations**

The PHA did not receive any comments on the PHA Plan from the Resident Advisory Board.

**11.0 (g) Challenged Elements**

There were no elements within the WHHA annual plan that were challenged by residents, staff, Board of Commissioners or the general public.

## 5.1 Mission

We actively and forcefully seek diversified, safe, sanitary, decent and affordable housing for all low and moderate income families. We are advocates for families to rise from a dependent status to be proud, independent citizens. We promote all forms of constructive communication in:

- Defining Our Programs
- Educating All Regarding Our Programs
- Constantly Disseminating Essential Information
- Training
- Self-Sufficiency

## 5.2. Goals and Objectives

### **HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

WHHA Goal: Expand the supply of assisted housing

Objectives:

- Apply for additional rental vouchers:
- Reduce public housing vacancies:
- Leverage private or other public funds to create additional housing opportunities:

WHHA Goal: Improve the quality of assisted housing

Objectives:

- Increase customer satisfaction:
- Renovate or modernize public housing units:

WHHA Goal: Increase assisted housing choices

Objectives:

- Conduct outreach efforts to potential voucher landlords

### **HUD Strategic Goal: Improve community quality of life and economic vitality**

WHHA Goal: Provide an improved living environment

Objectives:

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

### **HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

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

Objectives:

- Provide or attract supportive services to improve assistance recipients' employ ability:
- Provide or attract supportive services to increase independence for the elderly or families with disabilities.

### **HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

WHHA Goal: Ensure equal opportunity and affirmatively further fair housing

Objectives:

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

<b>Part I: Summary</b>						
<b>PHA Name:</b> West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>CT26P029501-12</u>			<b>Replacement Housing Factor Grant No:</b>	<b>FFY of Grant:</b> <u>2012</u> <b>FFY of Grant Approval:</b> <u>2012</u>
<b>Type of Grant</b> <input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>						
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>	115,363.00				
3	1408 Management Improvements	38,000.00				
4	1410 Administration (may not exceed 10% of line 21)	57,500.00				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	28,000.00				
8	1440 Site Acquisition					
9	1450 Site Improvement	60,500.00				
10	1460 Dwelling Structures	70,000.00				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	207,500.00				
18c	9001 Bond Debt Obligations					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2-19)	576,863.00				
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  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>				
<b>PIIA Name:</b> West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>CT26P029501-12</u>		<b>Replacement Housing Factor Grant No:</b>
				<b>FFY of Grant:</b> <u>2012</u> <b>FFY of Grant Approval:</b> <u>2012</u>
<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"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Final Performance and Evaluation Report		
<b>Line</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost<sup>1</sup></b>
		<b>Original</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b> <b>Expended</b>
Signature of Executive Director <i>Michael Duick</i>		Date <i>12/6/11</i>		Signature of Public Housing Director Date

<b>Part II: Supporting Pages</b>										
PHA Name: West Haven Housing Authority			Grant Type and Number Capital Fund Program Grant No: CT26P029501-12 Replacement Housing Factor Grant No:			CFPP (Yes/ <u>No</u> ):			Federal FFY of Grant: <b>2012</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 <sub>2</sub>	Funds Expended <sub>2</sub>			
HA Wide	Housing Operations	1406	10%	115,363.00						
Operations	<b>Subtotal</b>			<b>115,363.00</b>						
HA Wide	Drug Elimination program, for security	1408	100%	38,000.00						
Management	staff salaries									
Improvements	<b>Subtotal</b>			<b>38,000.00</b>						
HA Wide	Partial salary & benefits of staff	1410	2%	57,500.00						
Administrative Cost	involved in CFP activities									
	<b>Subtotal</b>			<b>57,500.00</b>						
HA Wide	A. A/E Services	1430	100%	14,000.00						
Fees & Cost	B. Consulting Services	1430	100%	14,000.00						
	<b>Subtotal</b>			<b>28,000.00</b>						
CT 29-1A, AMP #3	Replace driveways & parking	1450	4500 SF	60,500.00						
Spring Heights	<b>Subtotal</b>			<b>60,500.00</b>						
CT 29-3 AMP #2	Replace windows	1460	1 Floor	50,000.00						
Union School	<b>Subtotal</b>			<b>50,000.00</b>						

<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: West Haven Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P029501-12 Replacement Housing Factor Grant No:			CFFP (Yes/ <u>No</u> ):		Federal FFY of Grant: <b>2012</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 <sub>2</sub>	Funds Expended <sub>2</sub>	
CT 29-6 AMP #2								
John Prete	Replace window glass	1460	1 Bldg	20,000.00				
	<b>Subtotal</b>			<b>20,000.00</b>				
HA Wide Debt Service	Annual debt services charge for bond fund issue	1900	LS	207,500.00				
	<b>Subtotal</b>			<b>207,500.00</b>				
	<b>Grand Total</b>			<b>576,863.00</b>				

<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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: West Haven Housing Authority			CT26P029501-12		Federal FFY of Grant: 2012
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 29-1A Spring Heights	3/11/2014		3/11/2016		
CT 29-3 Union School	3/11/2014		3/11/2016		
CT 29-6 John Prete	3/11/2014		3/11/2016		
HA Wide	3/11/2014		3/11/2016		

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 West Haven Housing Authority/CT 029		Locality (City/County & State) West Haven/New Haven County/Connecticut			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY 2015	Work Statement for Year 5 FFY 2016
B.	Physical Improvements Subtotal	Annual Statement	320,803.00	320,803.00	320,803.00	320,803.00
C.	Management Improvements		18,000.00	18,000.00	18,000.00	18,000.00
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		10,000.00	10,000.00	10,000.00	10,000.00
F.	Other		28,000.00	28,000.00	28,000.00	28,000.00
G.	Operations		64,900.00	64,900.00	64,900.00	64,900.00
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service		207,500.00	207,500.00	207,500.00	207,500.00
K.	Total CFP Funds		649,203.00	649,203.00	649,203.00	649,203.00
L.	Total Non-CFP Funds					
M.	Grand Total		649,203.00	649,203.00	649,203.00	649,203.00

**Part I: Summary (Continuation)**

PHA Name/Number West Haven Housing Authority/CT 029		Locality (City/County & State) West Haven/New Haven County/Connecticut			<input type="checkbox"/> Original 5-Year Plan <input checked="" type="checkbox"/> Revision No: 2	
A.	Development Number and Name	Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013	Work Statement for Year 3 FFY 2014	Work Statement for Year 4 FFY2015	Work Statement for Year 5 FFY 2016
		Annual Statement				
	CT 29-1A		110,900.00	110,900.00	110,900.00	110,900.00
	CT 29-1B		19,800.00	19,800.00	19,800.00	19,800.00
	CT 29-2/4		100,583.00	100,583.00	100,583.00	175,583.00
	CT 29-3		81,000.00	81,000.00	81,000.00	6,000.00
	CT 29-6		8,520.00	8,520.00	8,520.00	8,520.00
	<b>Subtotal</b>		<b>320,803.00</b>	<b>320,803.00</b>	<b>320,803.00</b>	<b>320,803.00</b>
	HA Wide Nondwelling					

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>							
Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013			Work Statement for Year: 3 FFY 2014			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement	<b>CT 29-1A Spring Heights</b>			<b>CT 29-1A Spring Heights</b>			
	A. Interior renovations	5 units	15,900.00	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00	
	B. Replace water distribution lines & add insulation	1 Bldg	95,000.00	B. Replace water distribution lines & add insulation	1 Bldg	95,000.00	
	<b>Subtotal</b>		<b>110,900.00</b>	<b>Subtotal</b>		<b>110,900.00</b>	
	<b>CT 29-1B Morrissey Manor</b>			<b>CT 29-1B Morrissey Manor</b>			
	Interior renovations, replace flooring, patch & paint	7 units	19,800.00	Interior renovations, replace flooring, patch & paint	7 units	19,800.00	
	<b>Subtotal</b>		<b>19,800.00</b>	<b>Subtotal</b>		<b>19,800.00</b>	
	<b>CT 29-2/4 Surfside</b>			<b>CT 29-2/4 Surfside</b>			
	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00	
	B. Renovate kitchens, replace base & wall cabinets, sink & faucets	34 Units	84,683.00	B. Renovate kitchens, replace base & wall cabinets, sink & faucets	34 Units	84,683.00	
	<b>Subtotal</b>		<b>100,583.00</b>	<b>Subtotal</b>		<b>100,583.00</b>	
	<b>CT 29-3 Union School</b>			<b>CT 29-3 Union School</b>			
	A. Interior renovations, replace flooring, patch & paint	2 units	6,000.00	A. Interior renovations, replace flooring, patch & paint	2 units	6,000.00	
	B. Replace windows	1 floor	75,000.00	B. Replace windows	1 floor	75,000.00	
	<b>Subtotal</b>		<b>81,000.00</b>	<b>Subtotal</b>		<b>81,000.00</b>	
<b>CT 29-6, John Prete</b>			<b>CT 29-6, John Prete</b>				
Interior renovations, replace flooring, patch & paint	3 units	8,520.00	Interior renovations, replace flooring, patch & paint	3 units	8,520.00		
<b>Subtotal</b>		<b>8,520.00</b>	<b>Subtotal</b>		<b>8,520.00</b>		
Subtotal of Estimated Cost			\$320,803.00	Subtotal of Estimated Cost			\$320,803.00

<b>Part II: Supporting Pages – Physical Needs Work Statement(s)</b>						
Work Statement for Year 1 FFY 2012	Work Statement for Year 4 FFY 2015			Work Statement for Year: 5 FFY 2016		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See Annual Statement	<b>CT 29-1A Spring Heights</b>			<b>CT 29-1A Spring Heights</b>		
	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00
	B. Replace water distribution lines & add insulation	1 Bldg	95,000.00	B. Replace water distribution lines & add insulation	1 Bldg	95,000.00
	<b>Subtotal</b>		<b>110,900.00</b>	<b>Subtotal</b>		<b>110,900.00</b>
	<b>CT 29-1B Morrissey Manor</b>			<b>CT 29-1B Morrissey Manor</b>		
	Interior renovations, replace flooring, patch & paint	7 units	19,800.00	Interior renovations, replace flooring, patch & paint	7 units	19,800.00
	<b>Subtotal</b>		<b>19,800.00</b>	<b>Subtotal</b>		<b>19,800.00</b>
	<b>CT 29-2/4 Surfside</b>			<b>CT 29-2/4 Surfside</b>		
	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00	A. Interior renovations, replace flooring, patch & paint	5 units	15,900.00
	B. Renovate kitchens, replace base & wall cabinets, sink & faucets	34 Units	84,683.00	B. Renovate kitchens, replace base & wall cabinets, sink & faucets	34 Units	84,683.00
	<b>Subtotal</b>		<b>100,583.00</b>	Replace exterior brick	1 Bldg	75,000.00
				<b>Subtotal</b>		<b>175,583.00</b>
	<b>CT 29-3 Union School</b>			<b>CT 29-3 Union School</b>		
	A. Interior renovations, replace flooring, patch & paint	2 units	6,000.00	Interior renovations, replace flooring, patch & paint	2 units	6,000.00
	B. Replace windows	1 floor	75,000.00	<b>Subtotal</b>		<b>6,000.00</b>
<b>Subtotal</b>		<b>81,000.00</b>				
<b>CT 29-6, John Prete</b>			<b>CT 29-6, John Prete</b>			
Interior renovations, replace flooring, patch & paint	3 units	8,520.00	Interior renovations, replace flooring, patch & paint	3 units	8,520.00	
<b>Subtotal</b>		<b>8,520.00</b>	<b>Subtotal</b>		<b>8,520.00</b>	
Subtotal of Estimated Cost			\$320,803.00	Subtotal of Estimated Cost		
Subtotal of Estimated Cost			\$320,803.00	Subtotal of Estimated Cost		

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2012	Work Statement for Year 2 FFY 2013		Work Statement for Year: 3 FFY 2014	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	<b>HA Wide Operations</b>		<b>HA Wide Operations</b>	
	Housing Operations	64,900.00	Housing Operations	64,900.00
	<i>Subtotal</i>	<b>64,900.00</b>	<i>Subtotal</i>	<b>64,900.00</b>
	<b>HA Wide Management Improvements</b>		<b>HA Wide Management Improvements</b>	
	Drug Elimination, salary of security staff	18,000.00	Drug Elimination, salary of security staff	18,000.00
	<i>Subtotal</i>	<b>18,000.00</b>	<i>Subtotal</i>	<b>18,000.00</b>
	<b>HA Wide Admin Cost</b>		<b>HA Wide Admin Cost</b>	
	Salary and benefits of staff involved in CFP	10,000.00	Salary and benefits of staff involved in CFP	10,000.00
	<i>Subtotal</i>	<b>10,000.00</b>	<i>Subtotal</i>	<b>10,000.00</b>
	<b>HA Wide Fees &amp; Cost</b>		<b>HA Wide Fees &amp; Cost</b>	
	A. A/E Services	14,000.00	A. A/E Services	14,000.00
	B. Consulting Services	14,000.00	B. Consulting Services	14,000.00
	<i>Subtotal</i>	<b>28,000.00</b>	<i>Subtotal</i>	<b>28,000.00</b>
	<b>HA Wide Debt Service</b>		<b>HA Wide Debt Service</b>	
	Annual debt service charge for bond fund issue. (replace heating system @ Surfside & Spring Heights)	207,500.00	Annual debt service charge for bond fund issue. (replace heating system @ Surfside & Spring Heights)	207,500.00
	<i>Subtotal</i>	<b>207,500.00</b>	<i>Subtotal</i>	<b>207,500.00</b>
	Subtotal of Estimated Cost	\$328,400.00	Subtotal of Estimated Cost	\$328,400.00

<b>Part III: Supporting Pages – Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2012	Work Statement for Year 4 FFY 2015		Work Statement for Year: 5 FFY 2016	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See Annual Statement	<b>HA Wide Operations</b>		<b>HA Wide Operations</b>	
	Housing Operations	64,900.00	Housing Operations	64,900.00
	<i>Subtotal</i>	<b>64,900.00</b>	<i>Subtotal</i>	<b>64,900.00</b>
	<b>HA Wide Management Improvements</b>		<b>HA Wide Management Improvements</b>	
	Drug Elimination, salary of security staff	18,000.00	Drug Elimination, salary of security staff	18,000.00
	<i>Subtotal</i>	<b>18,000.00</b>	<i>Subtotal</i>	<b>18,000.00</b>
	<b>HA Wide Admin Cost</b>		<b>HA Wide Admin Cost</b>	
	Salary and benefits of staff involved in CFP	10,000.00	Salary and benefits of staff involved in CFP	10,000.00
	<i>Subtotal</i>	<b>10,000.00</b>	<i>Subtotal</i>	<b>10,000.00</b>
	<b>HA Wide Fees &amp; Cost</b>		<b>HA Wide Fees &amp; Cost</b>	
	A. A/E Services	14,000.00	A. A/E Services	14,000.00
	B. Consulting Services	14,000.00	B. Consulting Services	14,000.00
	<i>Subtotal</i>	<b>28,000.00</b>	<i>Subtotal</i>	<b>28,000.00</b>
	<b>HA Wide Debt Service</b>		<b>HA Wide Debt Service</b>	
	Annual debt service charge for bond fund issue. (replace heating system @ Surfside & Spring Heights)	207,500.00	Annual debt service charge for bond fund issue. (replace heating system @ Surfside & Spring Heights)	207,500.00
	<i>Subtotal</i>	<b>207,500.00</b>	<i>Subtotal</i>	<b>207,500.00</b>
	Subtotal of Estimated Cost	\$328,400.00	Subtotal of Estimated Cost	\$328,400.00

<b>Part I: Summary</b>						
<b>PHA Name:</b> West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>CT26P029501-11</u>			<b>Replacement Housing Factor Grant No:</b>	<b>FFY of Grant:</b> <u>2011</u> <b>FFY of Grant Approval:</b> <u>2011</u>
<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 checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2011 <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>	71,740.00	71,740.00	71,740.00	0.00	
3	1408 Management Improvements	15,000.00	17,126.57	17,126.57	17,126.57	
4	1410 Administration (may not exceed 10% of line 21)	15,375.00	15,375.00	15,375.00	2,900.00	
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	28,260.00	28,260.00	28,260.00	0.00	
8	1440 Site Acquisition					
9	1450 Site Improvement				0.00	
10	1460 Dwelling Structures	179,009.00	176,882.43	176,882.43	0.00	
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures	132,319.00	132,319.00	132,319.00	0.00	
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	207,500.00	207,500.00	207,500.00	0.00	
18c	9001 Bond Debt Obligations					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2-19)	649,203.00	649,203.00	649,203.00	20,026.57	
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  
 OMB No. 2577-0226  
**Expires 4/30/2011**

<b>Part I: Summary</b>					
PHA Name: West Haven Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No. <u>CT26P029501-11</u>		Replacement Housing Factor Grant No	
				FFY of Grant: <u>2011</u>	
				FFY of Grant Approval: <u>2011</u>	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2011				<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>Mikael Seed</i>		Date <i>12/6/11</i>		Signature of Public Housing Director Date	

<b>Part II: Supporting Pages</b>								
PHA Name: West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P029501-11 Replacement Housing Factor Grant No:				<b>Federal FFY of Grant:</b> <b>2011</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>	
HA Wide Operations	Housing Operations	1406	8%	71,740.00	71,740.00	71,740.00	0.00	0% Completed
	<b>Subtotal</b>			<b>71,740.00</b>	<b>71,740.00</b>	<b>71,740.00</b>	<b>0.00</b>	
HA Wide Management Improvements	Drug Elimination program	1408	100%	15,000.00	17,126.57	17,126.57	17,126.57	Completed
	<b>Subtotal</b>			<b>15,000.00</b>	<b>17,126.57</b>	<b>17,126.57</b>	<b>17,126.57</b>	
HA Wide Administrative Cost	Partial salary & benefits of staff involved in CFP activities	1410	2%	15,375.00	15,375.00	15,375.00	2,900.00	19% Completed
	<b>Subtotal</b>			<b>15,375.00</b>	<b>15,375.00</b>	<b>15,375.00</b>	<b>2,900.00</b>	
HA Wide Fees & Cost	A. A/E Services	1430	100%	14,130.00	14,130.00	14,130.00	0.00	0% Completed
	B. Consulting Services	1430	100%	14,130.00	14,130.00	14,130.00	0.00	0% Completed
	<b>Subtotal</b>			<b>28,260.00</b>	<b>28,260.00</b>	<b>28,260.00</b>	<b>0.00</b>	
CT 29-1A AMP #3	A. Replace water distribution lines & add attic insulation	1460	1 Bldg	100,000.00	97,873.43	97,873.43	0.00	0% Completed
Spring Heights	B. Replace flooring, interior doors, patch & paint walls and upgrade lighting Renovations	1460	5 Units	15,900.00	15,900.00	15,900.00	0.00	0% Completed
	<b>Subtotal</b>			<b>115,900.00</b>	<b>113,773.43</b>	<b>113,773.43</b>	<b>0.00</b>	
CT 29-1B AMP #2 Morrissey Manor	Replace flooring, interior doors, patch & paint walls and upgrade lighting Renovations	1460	7 Units	19,880.00	19,880.00	19,880.00	0.00	0% Completed
	<b>Subtotal</b>			<b>19,880.00</b>	<b>19,880.00</b>	<b>19,880.00</b>	<b>0.00</b>	

<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: West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26P029501-11 Replacement Housing Factor Grant No:				<b>Federal FFY of Grant:</b> <b>2011</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 <sub>2</sub>	Funds Expended <sup>2</sup>	
CT 29-2/4 AMP #1 Surfside		Replace flooring, interior doors, patch & paint walls and upgrade lighting Renovations	1460	14 Units	20,375.00	20,375.00	20,375.00	0.00	0% Completed
		<b>Subtotal</b>			<b>20,375.00</b>	<b>20,375.00</b>	<b>20,375.00</b>	<b>0.00</b>	<b>0% Completed</b>
							<b>0.00</b>		
CT 29-3 AMP #2 Union School		Replace flooring, interior doors, patch & paint walls and upgrade lighting Renovations	1460	2 Units	5,959.00	5,959.00	5,959.00	0.00	0% Completed
		<b>Subtotal</b>			<b>5,959.00</b>	<b>5,959.00</b>	<b>5,959.00</b>	<b>0.00</b>	
CT 29-6 AMP #2 John Prete		Replace flooring, interior doors, patch & paint walls and upgrade lighting Renovations	1460	6 Units	16,895.00	16,895.00	16,895.00	0.00	0% Completed
		<b>Subtotal</b>			<b>16,895.00</b>	<b>16,895.00</b>	<b>16,895.00</b>	<b>0.00</b>	<b>0% Completed</b>
								<b>0.00</b>	
HA Wide Non dwelling Structures		Expand & renovate Administrative Office	1470	1 Bldg	132,319.00	132,319.00	132,319.00	0.00	0% Completed
		<b>Subtotal</b>			<b>132,319.00</b>	<b>132,319.00</b>	<b>132,319.00</b>	<b>0.00</b>	
HA Wide Debt Service		Annual debt services charge for bond fund issue	1900	LS	207,500.00	207,500.00	207,500.00	0.00	0% Completed
		<b>Subtotal</b>			<b>207,500.00</b>	<b>207,500.00</b>	<b>207,500.00</b>	<b>0.00</b>	
		<b>Grand Total</b>			<b>649,203.00</b>	<b>649,203.00</b>	<b>649,203.00</b>	<b>20,026.57</b>	

<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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: West Haven Housing Authority			CT26P029501-11		Federal FFY of Grant: 2011
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 29-1A Spring Heights	8/2/2013	9/9/2011	8/2/2015		
CT 29-1B Morrissey Manor	8/2/2013	9/9/2011	8/2/2015		
CT 29-2/4 Surfside HR	8/2/2013	9/9/2011	8/2/2015		
CT 29-3 Union School	8/2/2013	9/9/2011	8/2/2015		
CT 29-6 John Prete	8/2/2013	9/9/2011	8/2/2015		
HA Wide	8/2/2013	9/9/2011	8/2/2015		

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>CT26P029501-10</u>		Replacement Housing Factor Grant No:	
				<b>FFY of Grant:</b> <u>2010</u>	
				<b>FFY of Grant Approval:</b> <u>2010</u>	
<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 checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2011		<input checked="" 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>	53,814.00	53,814.00	53,814.00	53,814.00
3	1408 Management Improvements	15,000.00	22,300.00	22,300.00	22,300.00
4	1410 Administration (may not exceed 10% of line 21)	10,000.00	10,000.00	10,000.00	10,000.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	30,000.00	31,270.00	31,270.00	31,270.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	400,570.00	392,000.00	392,000.00	392,000.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment	208,000.00	208,000.00	208,000.00	208,000.00
18c	9001 Bond Debt Obligations				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	717,384.00	717,384.00	717,384.00	717,384.00
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  
 OMB No. 2577-0226  
 Expires 4/30/2011

<b>Part I: Summary</b>				
PIIA Name: West Haven Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No. CT26P029501-10		Replacement Housing Factor Grant No.
				FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2011 <input checked="" 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>Michael Deuch</i>		Date 12/6/11	Signature of Public Housing Director Date	

<b>Part II: Supporting Pages</b>									
PHA Name: West Haven Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P029501-10 Replacement Housing Factor Grant No:				CFPP (Yes/ <u>No</u> ):			Federal FFY of Grant: <b>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>		
HA Wide	Housing Operations	1406	7%	53,814.00	53,814.00	53,814.00	53,814.00	Completed	
Operations	<b>Subtotal</b>			<b>53,814.00</b>	<b>53,814.00</b>	<b>53,814.00</b>	<b>53,814.00</b>		
HA Wide	Drug Elimination program	1408	100%	15,000.00	22,300.00	22,300.00	22,300.00	Completed	
Management Improvements	<b>Subtotal</b>			<b>15,000.00</b>	<b>22,300.00</b>	<b>22,300.00</b>	<b>22,300.00</b>		
HA Wide	Partial salary & benefits of staff involved in CFP	1410	1%	10,000.00	10,000.00	10,000.00	10,000.00	Completed	
Administrative Cost	<b>Subtotal</b>			<b>10,000.00</b>	<b>10,000.00</b>	<b>10,000.00</b>	<b>10,000.00</b>		
HA Wide	A. A/E Services	1430	100%	15,000.00	15,000.00	15,000.00	15,000.00	Completed	
Fees & Cost	B. Consulting Services	1430	100%	15,000.00	16,270.00	16,270.00	16,270.00	Completed	
	<b>Subtotal</b>			<b>30,000.00</b>	<b>31,270.00</b>	<b>31,270.00</b>	<b>31,270.00</b>		
CT 29-1A	A. Interior Renovations	1460	6 Units	23,700.00	26,950.00	26,950.00	26,950.00	Completed	
Spring Heights	B. Exterior Renovations	1460	4 Bldg	50,000.00	103,500.00	103,500.00	103,500.00	Completed	
	C. Replace water distribution lines & add insulation	1460	2 Bldg	0.00	190,250.00	190,250.00	190,250.00	Completed	
	<b>Subtotal</b>			<b>73,700.00</b>	<b>320,700.00</b>	<b>320,700.00</b>	<b>320,700.00</b>		
CT 29-1B	Interior Renovations	1460	7 Units	25,500.00	10,650.00	10,650.00	10,650.00	Completed	
Morrissey Manor	<b>Subtotal</b>			<b>25,500.00</b>	<b>10,650.00</b>	<b>10,650.00</b>	<b>10,650.00</b>		

<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: West Haven Housing Authority		Grant Type and Number Capital Fund Program Grant No: CT26P029501-10 Replacement Housing Factor Grant No:				CFPP (Yes/ <u>No</u> ):			Federal FFY of Grant: <b>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 <sub>2</sub>	Funds Expended <sub>2</sub>		
CT 29-2/4 Surfside	A. Renovate kitchens	1460	10 Units	28,000.00	0.00	0.00	0.00	Deleted	
	B. Interior Renovations	1460	10 Units	25,000.00	39,000.00	39,000.00	39,000.00	Completed	
	<b>Subtotal</b>			<b>53,000.00</b>	<b>39,000.00</b>	<b>39,000.00</b>	<b>39,000.00</b>		
CT 29-3	A. Replace windows	1460	1 Bldg	166,870.00	0.00	0.00	0.00	Deleted	
Union School	B. Interior Renovations	1460	3 Units	11,250.00	9,100.00	9,100.00	9,100.00	Completed	
	C. Renovate kitchens	1460	4 Units	11,200.00	0.00	0.00	0.00	Deleted	
	<b>Subtotal</b>			<b>189,320.00</b>	<b>9,100.00</b>	<b>9,100.00</b>	<b>9,100.00</b>		
CT 29-6 John Prete	A. Interior Renovations	1460	3 Units	11,250.00	12,550.00	12,550.00	12,550.00	Completed	
	B. Renovate kitchens	1460	7 Units	19,600.00	0.00	0.00	0.00	Deleted	
	C. Upgrade elevator	1460	1 Car	28,200.00	0.00	0.00	0.00	Deleted	
	<b>Subtotal</b>			<b>59,050.00</b>	<b>12,550.00</b>	<b>12,550.00</b>	<b>12,550.00</b>		
HA Wide Debt Service	Annual debt services charge for bond fund issue	1900	LS	208,000.00	208,000.00	208,000.00	208,000.00	Completed	
	<b>Subtotal</b>			<b>208,000.00</b>	<b>208,000.00</b>	<b>208,000.00</b>	<b>208,000.00</b>		
	<b>Grand Total</b>			<b>717,384.00</b>	<b>717,384.00</b>	<b>717,384.00</b>	<b>717,384.00</b>		

<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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: West Haven Housing Authority			CT26P029501-10		Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT 29-1A Spring Heights	7/14/2012	8/30/2010	7/14/2014	9/9/2011	
CT 29-1B Morrissey Manor	7/14/2012	8/30/2010	7/14/2014	9/9/2011	
CT 29-2/4 Surfside HR	7/14/2012	8/30/2010	7/14/2014	9/9/2011	
CT 29-3 Union School	7/14/2012	8/30/2010	7/14/2014	9/9/2011	
CT 29-6 John Prete	7/14/2012	8/30/2010	7/14/2014	9/9/2011	
HA Wide	7/14/2012	8/30/2010	7/14/2014	9/9/2011	

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

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

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

<b>Part I: Summary</b>					
<b>PHA Name:</b> West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Date of CFFP Program Grant No: <u>CT26S029501-09</u>		<b>FFY of Grant:</b> <u>2009</u> <b>FFY of Grant Approval:</b> <u>2009</u>	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 ) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2011 <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>				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	93,825.61	94,082.97	94,082.97	94,082.97
8	1440 Site Acquisition				
9	1450 Site Improvement	174,813.92	174,813.92	174,813.92	174,813.92
10	1460 Dwelling Structures	666,972.47	666,715.11	666,715.11	643,976.88
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment				
18c	9001 Bond Debt Obligations				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	935,612.00	935,612.00	935,612.00	912,873.77
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.

Part I: Summary					
PHA Name: West Haven Housing Authority		Grant Type and Number Capital Fund Date of CFFP Program Grant No: <u>CT26S029501-09</u>		Replacement Housing Factor Grant No.	
				FFY of Grant: <u>2009</u>	
				FFY of Grant Approval: <u>2009</u>	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2 )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9/30/2011					
<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>Michael J. Seid</i>		Date <i>12/6/11</i>		Signature of Public Housing Director Date	

<b>Part II: Supporting Pages</b>								
PHA Name: West Haven Housing Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: CT26S029501-09 Replacement Housing Factor Grant No:				<b>Federal FFY of Grant:</b> <b>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 <sub>2</sub>	Funds Expended <sub>2</sub>	
HA Wide	Consulting Services	1430	100%	93,825.61	94,082.97	94,082.97	94,082.97	Completed
Fees & Cost	<b>Subtotal</b>			<b>93,825.61</b>	<b>94,082.97</b>	<b>94,082.97</b>	<b>94,082.97</b>	
CT 29-1A	A. Replace sidewalks	1450	16,500 SF	174,813.92	174,813.92	174,813.92	174,813.92	Completed
Spring Heights	B. Upgrade heating system	1460	2 Sys	20,000.00	20,000.00	20,000.00	20,000.00	Completed
	C. Replace siding	1460	2 Bldg	39,000.00	39,000.00	39,000.00	39,000.00	Completed
	<b>Subtotal</b>			<b>233,813.92</b>	<b>233,813.92</b>	<b>233,813.92</b>	<b>233,813.92</b>	
CT 29-1B Morrissey Manor	Exterior Renovations (replacing siding, entry & storm doors and tuck point and seal brick)	1460	5 Bldgs	279,891.27	279,633.91	279,633.91	256,895.68	92% Completed
	<b>Subtotal</b>			<b>279,891.27</b>	<b>279,633.91</b>	<b>279,633.91</b>	<b>256,895.68</b>	
CT 29-2 Surfside	Replace flooring	1460	1,780 SY	95,081.20	95,081.20	95,081.20	95,081.20	Completed
	<b>Subtotal</b>			<b>95,081.20</b>	<b>95,081.20</b>	<b>95,081.20</b>	<b>95,081.20</b>	
CT 29-6 John Prete	Replace built-up roof	1460	1 Bldg	233,000.00	233,000.00	233,000.00	233,000.00	Completed
	<b>Subtotal</b>			<b>233,000.00</b>	<b>233,000.00</b>	<b>233,000.00</b>	<b>233,000.00</b>	
	<b>Grand Total</b>			<b>935,612.00</b>	<b>935,612.00</b>	<b>935,612.00</b>	<b>912,873.77</b>	

<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.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: West Haven Housing Authority			CT26S029501-09		Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	03/17/2010	03/17/2010	03/17/2012		
CT 29-1A, Spring Heights	03/17/2010	03/17/2010	03/17/2012		
CT 29-1B, Morrissey Manor	03/17/2010	03/17/2010	03/17/2012		
CT 29-2, Surfside HR	03/17/2010	03/17/2010	03/17/2012		
CT 29-6, John Prete	03/17/2010	03/17/2010	03/17/2012		

<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.

## **9.0 Housing Needs**

### **Housing Needs of Families in the Jurisdiction by Family Type**

Family Type	Overall	Affordability	Supply	Quality	Accessibility	Size	Location
Income <= 30% of AMI	3,713	5	5	5	3	3	2
Income >30% but <=50% of AMI	582	5	5	5	3	3	2
Income >50% but <80% of AMI	179	4	4	4	3	3	2
Elderly	626	5	5	4	3	2	4
Families with Disabilities	850	5	5	4	3	2	4
White	3,221	5	5	5	3	3	2
Black	716	5	5	5	3	3	2
Hispanic	403	5	5	5	3	3	2
Asian	125	5	5	5	3	3	2
American Indian	9	5	5	5	3	3	2

The sources of information the WHHA used to conduct this analysis are listed below; all materials are available for public inspection.

- 2000-2005 Consolidated Plan of the Jurisdiction
- U.S. Census data: the Comprehensive Housing Affordability Strategy (“CHAS”) dataset 1991

### **9.1 Strategy for Addressing Housing Needs**

#### **Need: Shortage of affordable housing for all eligible populations**

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

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program

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

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

#### **Need: Specific Family Types: Families at or below 30% of median**

##### **Strategy 1: Target available assistance to families at or below 30 % of AMI**

- Employ admissions preferences aimed at families with economic hardships

#### **Need: Specific Family Types: Families at or below 50% of median**

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

- Employ admissions preferences aimed at families who are working

#### **Need: Specific Family Types: Families with Disabilities**

##### **Strategy 1: Target available assistance to Families with Disabilities:**

- Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing

#### **Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

##### **Strategy: Conduct activities to affirmatively further fair housing**

- Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the section 8 program to owners outside of areas of poverty /minority concentrations

The factors listed below, influenced the WHHA's selection of the strategies it will pursue:

- Funding and Staffing constraints
- Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the WHHA
- Influence of the housing market on WHHA programs

**Housing Needs of Families on the Public Housing Waiting List**

The waiting list is open

	Number of families	Percent of total families	Annual Turnover
Waiting list total	296		90
Extremely low income <=30% AMI	214	72	
Very low income (>30% but <=50% AMI)	52	18	
Low income (>50% but <80% AMI)	30	10	
Families with children	111	38	
Elderly families	96	32	
Families with Disabilities	89	30	
Race/ethnicity White	213	72	
Race/ethnicity Black	79	27	
Race/ethnicity Hispanic	4	1	
Characteristics by Bedroom Size			
1 Bedroom	180	61	55
2 Bedroom	88	30	27
3 Bedroom	26	8.8	8
4 Bedroom	2	.2	0

**Housing Needs of Families on the Section 8 tenant-based assistance Waiting List**

The waiting list has been closed for 20 Months the WHHA does not expect to reopen the list in the WHHA Plan year.

The WHHA does not permit specific categories of families onto the waiting list, even if generally closed.

	Number of families	Percent of total families	Annual Turnover
Waiting list total	2134		110
Extremely low income <=30% AMI	1771	83	
Very low income (>30% but <=50% AMI)	347	16.3	
Low income (>50% but <80% AMI)	16	0.7	
Families with children	1892	89	
Elderly families	53	2	
Families with Disabilities	189	9	
Race/ethnicity White	900	42.1	
Race/ethnicity Black	1233	57.8	
Race/ethnicity Hispanic	0		
Race/ethnicity Asian	1	.1	

## **Violence Against Women Act (VAWA) Policy**

Title VI of the VAWA adds a new housing provision that establishes several categories of protected individuals. Under the law victims of domestic violence, dating violence, sexual assault, and stalking are granted protections and cannot be denied or terminated from housing or housing assistance because of activity that is directly related to domestic violence. 2005 VAWA Pub. L. 109-162; Stat. 2960 signed into law on January 5, 2006 and codified at 42 U.S.C. §1437d(l) and 1435f(d), (0) & 1 and (u)

### **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 WHHA to respond appropriately to the violence while maintaining a safe environment for WHHA, employees, tenants, applicants, Section 8 participants, program participants and others.

The policy will assist the West Haven Housing Authority (WHHA) in providing rights under the Violence Against Women Act to its applicants, public housing residents, Section 8 participants and other program participants.

This Policy is incorporated into WHHA's "Admission and Continued Occupancy Policy" and "Section 8 Administration Plan" and applies to all WHHA housing programs.

### **2.0 Definitions**

The definitions in this Section apply only to this Policy.

- 2.1 **Confidentiality:** Means that WHHA will not enter information provided to WHHA by a victim alleging domestic violence into a shared database or provide this information to any related entity except as stated in 3.4
- 2.2 **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 relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; (iii) the frequency of interaction between the persons involved in the relationship. 42 U.S.C. §1437d (u)(3)(A), § 13925.
- 2.3 **Domestic Violence:** Felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, committed by a person with whom the victim shares a child in common, committed by a person who is cohabitating with

## Violence Against Women Act (VAWA) Policy

or has cohabitated with the victim as a spouse, committed by a person similarly situated to a spouse of the victim under the domestic or family violence laws of Connecticut, or committed by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of Connecticut. 42 U.S.C. §1437d(u)(3)(B), § 13925.

- 2.4 **Immediate Family Member:** A spouse, parent, brother or sister, or child of a victim or an individual to whom the victim stands *in loco parentis*; or any other person living in the household of the victim and related to the victim by blood or marriage. 42 U.S.C. § 1437d(u)(3)(D), § 13925.
- 2.5 **Perpetrator:** A person who commits an act of domestic violence, dating domestic violence or stalking against a victim.
- 2.6 **Stalking:** (a) to follow, pursue or repeatedly commit acts with the intent to kill, injure, harass or intimidate the victim; (b) to place under surveillance with the intent to kill, injure, harass or intimidate the victim; (c) in the course of, or as a result of such following, pursuit, surveillance, or repeatedly committed acts, to place the victim in reasonable fear of the death of, or serious bodily injury to the victim; or (d) to cause substantial emotional harm to the victim, a member of the immediate family of the victim or the spouse or intimate partner of the victim. 42 U.S.C. §1437d(u)(3)(C), § 13925.
- 2.7 **Bona Fide Claim:** A *bonafide* claim of domestic violence, dating violence or stalking must include incidents that meet the terms and conditions in the above definitions.
- 2.8 **Victim:** Is a person who is the victim of domestic violence, dating violence, or stalking under this Policy and who has timely and completely completed the certification under 3.2 and 3.3 or as requested by WHHA.

### 3.0 Certification and Confidentiality

#### 3.1 Failure to Provide Certification Under 3.2 and 3.3

The person claiming protection under VAWA shall provide complete and accurate certifications to WHHA, owner or manager within 14 business days after the party requests in writing that the person completes the certifications. If the person does not provide a complete and accurate certification within the 14 business days, WHHA, owner or manager may take action to deny or terminate participation or tenancy. 42 U.S.C. §14371 (5) & (6); 42 U.S.C. § 1437F(c)(9); 42 U.S.C. §1437f(d)(l)(B)(ii)&(iii); 42 U.S.C. §1437f(o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20) or for other good cause.

## **Violence Against Women Act (VAWA) Policy**

### **3.2 HUD Approved Certification**

For each incident that a person is claiming as abuse, the person shall certify to WHHA, owner or manager their victim status by completing a HUD approved certification form. The person shall certify the date, time and description of the incidents, that the incidents are *bonafide* incidents of actual or threatened abuses and meet the requirements of VAWA and this Policy. The person shall provide information to identify the perpetrator including but not limited to the name and, if known, all alias names, date of birth, address, contact information such as postal, e-mail or internet address, telephone or facsimile number or other identification.

### **3.3 Confirmation of Certification**

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

### **3.4 Confidentiality**

WHHA, the owner and managers shall keep all information provided to WHHA under this Section confidential. WHHA, owner and manager shall not enter the information into a shared database or provide to any related entity except to the extent that:

- (a) the victim request or consents to the disclosure in writing;
- (b) the disclosure is required for:
  - (i) eviction from public housing under 42 U.S.C. §1437 l(5)&(6)(See Section 4 in this Policy)
  - (ii) termination of Section 8 assistance under 42 U.S.C. §1437f(c)(9); 42 U.S.C. §1437f(d)(l)(B)(ii)&(iii); 42 U.S.C. §1437f (o)(7)(C)&(D); or 42 U.S.C. §1437f(o)(20)(See Section 4 in this Policy); or (c) the disclosure is required by applicable law.

## **4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy**

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

## Violence Against Women Act (VAWA) Policy

- 4.2 An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be a serious or repeated violation of the lease by the victim and shall not be good cause for denying to a victim admission to a program, terminating Section 8 assistance or occupancy rights, or evicting a tenant.
- 4.3 Criminal activity directly related to domestic violence, dating violence, or stalking engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim of that domestic violence, dating violence or stalking.
- 4.4 Notwithstanding Sections 4.1, 4.2, and 4.2, WHHA, an owner or manager may bifurcate a lease to evict, remove or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others without evicting, removing, terminating assistance to or otherwise penalizing the victim of the violence who is also a tenant or lawful occupant. 42 U.S.C. §1437d(l)(6)(B)
- 4.5 Nothing in Sections 4.1, 4.2, and 4.3 shall limit the authority of WHHA, an owner or manager, when notified, to honor court orders addressing rights of access to or control of the property, including civil protection orders issued to protect the victim and issued to address the distribution or possession of property among the household members when the family breaks up.
- 4.6 Nothing in Sections 4.1, 4.2, and 4.3 limits WHHA, an owner or manager's authority to evict or terminate assistance to any tenant for any violation of lease not premised on the act or acts of violence against the tenant or a member of the tenant's household. However WHHA, owner or manager may not hold a victim to a more demanding standard.
- 4.7 Nothing in Sections 4.1, 4.2, and 4.3 limits WHHA, an owner or manager's authority to evict or terminate assistance, or deny admission to a program if the WHHA, owner or manager can show an actual and imminent threat to other tenants, neighbors, guests, their employees, persons providing service to the property or others if the tenant family is not evicted or terminated from assistance or denied admission.
- 4.8 Nothing in Sections 4.1, 4.2, or 4.3 limits WHHA, an owner or manager's authority to deny admission, terminate assistance or evict a person who engages in criminal acts including but not limited to acts of physical violence or stalking against family members or others.

## **Violence Against Women Act (VAWA) Policy**

- 4.9 A Section 8 recipient who moves out of an assisted dwelling unit to protect their health or safety and who: (a) is a victim under this Policy; (b) reasonably believes he or she was imminently threatened by harm from further violence if he or she remains in the unit; and (c) has complied with all other obligations of the Section 8 program may receive a voucher and move to another Section 8 jurisdiction.

### **5.0 Actions Against a Perpetrator**

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

### **6.0 WHHA Right to Terminate Housing and Housing Assistance Under this Policy**

- 6.1 Nothing in this Policy will restrict the WHHA, owner or manager's right to terminate tenancy for lease violations by a resident who claims VAWA as a defense if it is determined by the WHHA, owner or manager that such a claim is false.
- 6.2 Nothing in this Policy will restrict the WHHA right to terminate tenancy if the victim tenant (a) allows a perpetrator to violate a court order relating to the act or acts of violence; or (b) if the victim tenant allows a perpetrator who has been barred from WHHA property to come onto WHHA property including but not limited to the victim's unit or any other area under their control; or (c) if the victim tenant fails to cooperate with an established safety strategy as designed by a local victim support service provider (see 7.2).
- 6.3 Nothing in this Policy will restrict the WHHA right to terminate housing and housing assistance if the victim tenant who claims as a defense to an eviction or termination action relating to domestic violence has engaged in fraud and abuse against a federal housing program; especially where such fraud and abuse can be shown to have existed before the claim of domestic violence was made. Such fraud and abuse includes but is not limited to unreported income and ongoing boarders and lodgers violations, or damage to property.

### **7.0 Statements of Responsibility of Tenant Victim, the WHHA to the Victim, and to the Larger Community.**

## **Violence Against Women Act (VAWA) Policy**

- 7.1 A tenant victim has no less duty and responsibility under the lease to meet and comply with the terms of the lease than any other tenant not making such a claim. Ultimately all tenants must be able to take personal responsibility for themselves and exercise control over their households in order to continue their housing and housing assistance. The WHHA will continue to issue lease violation notices to all residents who violate the lease including those who claim a defense of domestic violence.
- 7.2 WHHA recognizes the pathologic dynamic and cycle of domestic violence and a victim of domestic violence will be referred to local victim support service providers to help victims break the cycle of domestic violence through counseling, referral and development of a safety strategy.
- 7.3 A tenant victim must take personal responsibility for exercising control over their household by accepting assistance and complying with the safety strategy or plan to best of victim's ability and reason under the circumstances. Failure to do this may be seen as other good cause.
- 7.4 All damages including lock changes will be the responsibility of the tenant victim. This is in keeping with other agency policies governing tenant caused damages.

### **8.0 Notice to Applicants, Participants, Tenants and Section 8 Managers and Owners.**

WHHA shall provide notice to applicants, participants, tenants, managers and owners of their rights and obligations under Section 3.4 Confidentiality and Section 4.0 Appropriate Basis for Denial of Admission, Assistance or Tenancy.

- 8.1 If the WHHA, owner or manager knows that an applicant to or participant in a WHHA housing program is the victim of dating violence, domestic violence or stalking, the WHHA, owner or manager shall inform that person of this Policy and the person's rights under it.

### **9.0 Reporting Requirements**

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

### **10.0 Conflict and Scope**

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

## **Violence Against Women Act (VAWA) Policy**

### **11.0 Amendment**

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

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

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and or  Annual PHA Plan for the PHA fiscal year beginning 04/01/2012, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:*

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
  - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
  - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
  - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
  - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
  - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

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

West Haven Housing Authority

CT 029

PHA Name

PHA Number/HA Code

\_\_\_\_ 5-Year PHA Plan for Fiscal Years 20\_\_\_\_ - 20\_\_\_\_  
 X \_\_\_\_ Annual PHA Plan for Fiscal Years 20<sup>12</sup> - 20<sup>16</sup>\_\_\_\_

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

*Willie Holmes*

Name of Authorized Official

Title

*Willie Holmes*

*Board Chairman*

Signature

Date

*Willie Holmes*

*December 13, 2011*