

**PHA 5-Year and Annual Plan**

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

**OMB No. 2577-0226  
Expires 8/30/2011**

<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Waterville Housing Authority</u> PHA Code: <u>ME008</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>07/2012</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>194</u> Number of HCV units: <u>394</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
	PHA 1:				PH HCV
	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:				
<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.				

**PHA Plan Update**

(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:

**1. Eligibility, Selection, Admissions Policies –**

Per previous PIH Notices issued over the last year, the ACOP and Section 8 Administrative Plan have been updated to reflect all HUD-mandated changes. In addition WHA has made the following discretionary changes:

**Section 8 Administrative Plan:**

- Approval of additional family members will be subject to review of criminal history under “Crime by a Household Member”;
- If the HOH is the only occupant and is out of their assisted unit (1) for more than 30 days for incarceration, (2) has vacated the unit without a proper notice to WHA, or (3) is out without prior approval of WHA, at its discretion WHA may terminate assistance;
- Numerous repeat offenses constituting a Felony charge and parole/probation violations will be taken into consideration. WHA may deny the addition of a household member while on parole;
- Applications will be checked against the Bad Debt list in PIC and RIFME. Applicants will be provided an opportunity to resolve the debt. If no resolution is reached the applicant will be removed from the waiting list;
- At its discretion, WHA may allow families to reapply to the HCV wait list sooner than four years, due to an extended waiting list;
- Re-payment plans must be paid in full within 60 days OR half within 60 days and remaining balance within 120 days. Upon hardship request minimum monthly payments of \$25 will be accepted, due by the 10<sup>th</sup> of the month, required consecutively to remain in good standing;
- WHA cannot pay two landlords for the same period. HAP to landlord will be set by the end date of the notice to vacate by tenant, or non-renewal of lease, or eviction notice by landlord;
- To have HAP start for the 1<sup>st</sup> of a month, a RFTA must be received no later than the 20<sup>th</sup> of the preceding month, the unit meets rent reasonableness and is within the tenant’s 40% rent calculation;
- Allow exception payment standards to address Reasonable Accommodations for medical equipment in the home;
- Establish protocol for eliminating program participants due to HUD funding shortfalls;
- Require a properly executed lease be provided to WHA within 30 days of lease-up, or HAP funding will be suspended;
- WHA will review charges leading to legal probation and may deny assistance until the probationary period is completed;
- WHA will not accept an apartment where there are two sources of heat, the primary source being included in rent and the secondary being tenant-paid;
- HAP will only be paid to the new landlord where a properly noticed mid-month move-out is allowed by the terminating landlord; and,
- Existing public housing tenants accepting Section 8 will not be allowed to lease-up until all outstanding rent and charges are paid in full, or a repayment agreement has been executed.

6.0

**ACOP:**

- Cash will no longer be accepted for rent payments.

The ACOP and Section 8 Administrative Plan are Supporting Documents to the Annual Plan.

**2. Financial Resources –** Continuously changing. The financial resources table is a Supporting Document to the Annual Plan

**3. Rent Determinations –** No changes

**4. Operations and Management –** No changes

**5. Grievance Procedures –** No changes

**6. Designated Housing for Elderly and Disabled Families –** No changes

**7. Community Service and Self-Sufficiency –** No changes

**8. Safety and Crime Prevention –** No changes

**9. Pets –** No changes

**10. Civil Rights Certification –** No changes

**11. Fiscal Year Audit –** No changes

**12. Asset Management –** No changes

**13. Violence Against Women Act (VAWA) –** Details are in Attachment A.

(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.

**Copies are available at the Main Office**

7.0	<p><b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i></p> <p><i>HOPE VI</i> – WHA does not anticipate applying for a HOPE VI grant in the upcoming fiscal year.</p> <p><i>Mixed-Finance Modernization or Development</i> – WHA does not anticipate any mixed-finance mod or development in the upcoming fiscal year</p> <p><i>Demolition and/or Disposition</i> – The single-family detached 4-bedroom unit identified as 20 Boothby Street (formerly 20 Nash St) is currently vacant and being considered for disposition. Costs to bring the physical structure and more importantly the surrounding site up to appropriate standards, as well as an appraisal are being investigated. An application for disposition may be submitted pending cost/benefit analysis results.</p> <p><i>Conversion of Public Housing</i> – WHA does not anticipate any conversions of public housing to tenant-based assistance in the upcoming fiscal year</p> <p><i>Section 8 Homeownership Program</i> - WHA does not anticipate administering a Section 8 Homeownership Program in the upcoming fiscal year</p> <p><i>Public Housing Homeownership Program</i> – WHA does not anticipate administering a Public Housing Homeownership Program in the upcoming fiscal year</p> <p><i>Project-Based Vouchers</i> – WHA does not anticipate project-basing any of it’s tenant-based vouchers in the upcoming fiscal year</p> <p><i>Other</i> – WHA may apply for new programs or incremental units if NOFAs are issued by HUD or other appropriate opportunities are presented.</p>
8.0	<p><b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p><b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing.</p> <p><b>Attachment B – FY 2012 Capital Fund Program Annual Statement</b>  <b>Attachment C – FY 2011 Capital Fund Program Performance and Evaluation Report</b>  <b>Attachment D – FY 2010 Capital Fund Program Performance and Evaluation Report</b>  <b>Attachment E – FY 2009 Capital Fund Program Performance and Evaluation Report</b></p>
8.2	<p><b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.</p> <p><b>Attachment F – Capital Fund Program Five-Year Action Plan</b></p>
8.3	<p><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.  <b>Not Applicable</b></p>
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.  <b>N/A – Annual Plan Submission/Small PHA</b></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> <p><b>N/A – Annual Plan Submission/Small PHA</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) <b>Progress in Meeting Mission and Goals.</b> Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan. <b>N/A – Annual Plan Submission/Small PHA</b></p> <p>(b) <b>Significant Amendment and Substantial Deviation/Modification.</b> Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification” <b>N/A – Annual Plan Submission/Small PHA</b></p> <p>(c) WHA is currently under a “Public Housing Occupancy Standardized Action Plan” due to sustained vacancies in excess of 7%.</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> <ul style="list-style-type: none"> <li>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) <b>(see attachment G)</b></li> <li>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) <b>(see attachment H)</b></li> <li>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) <b>(see attachment I)</b></li> <li>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) <b>(see attachment J)</b></li> <li>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</li> <li>(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. <b>(see attachment K)</b></li> <li>(g) Challenged Elements <b>(see attachment L)</b></li> <li>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</li> <li>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</li> </ul>
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## **Attachment A**

### **Waterville Housing Authority**

#### **Annual Plan**

**Fiscal Year 07/01/2012 – 06/30/2013**

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

A goal of the Waterville Housing Authority is to fully comply with the Violence Against Women Act (VAWA). It is our objective to work with others to prevent offenses covered by VAWA to the degree we can.

The Waterville Housing Authority provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking:

**Through cooperation with the local domestic violence agency and the Waterville Police Department, any cases of violence as described are referred for assistance. The local domestic violence agency is the Family Violence Project.**

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

**Program staff at the local domestic violence agency is aware of our housing programs and make client referrals to our office. Apparently eligible clients are placed on our waiting list.**

**For persons already living in a public housing or Housing Choice Voucher unit who become victims as described, and/or those who cannot be immediately assisted, these are referred to the above-listed domestic violence advocacy groups. An applicant or participant that is or has been a victim of domestic violence, dating violence, or stalking is not an appropriate basis for denial of program assistance or for denial of admission, if the applicant otherwise qualifies for assistance or admission.**

The Waterville Housing Authority provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families:

**The same methods as described herein are used, making referrals to the above-listed domestic violence advocacy group for counseling and support services, and attempting to enforce orders of protection with the cooperation of Police Department personnel.**

The Waterville Housing Authority has the following procedure in place to assure applicants and residents are aware of their rights and responsibilities under the Violence Against Women Act:

**All residents and participants have been notified of their rights and responsibilities under the Violence Against Women Act.**

**The orientation for new residents and new participants includes information on their rights and responsibilities under the Violence Against Women Act.**

**The Admissions & Continued Occupancy Policy (ACOP), the Public Housing Dwelling Lease and the Section 8 Administrative Plan have been revised to include screening and termination language related to the Violence Against Women Act**

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 8/31/2011

**Part I: Summary**

PHA Name: Waterville Housing Authority	Grant Type and Number Capital Fund Program Grant No: ME36P00850112 Date of CFFP: _____	Replacement Housing Factor Grant No: _____	FFY of Grant: 2012
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____			FFY of Grant Approval: 2012
Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input type="checkbox"/> Final Performance and Evaluation Report			

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFF Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		129,057				
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						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures		132,500				
11	1465.1 Dwelling Equipment - Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of line 2 - 19)		261,557	0		0	
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs						
25	Amount of line 20 Related to Energy/Conservation Measures						

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

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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 8/31/2011

<b>Part I: Summary</b>		<b>Grant Type and Number</b>		<b>FFY of Grant:</b>			
PHA Name: Waterville Housing Authority		Capital Fund Program Grant No: ME36P00850112 Date of CFPP: _____		2012			
		Replacement Housing Factor Grant No:		FFY of Grant Approval: 2012			
<b>Type of Grant</b>		<input type="checkbox"/> Reserve for Disasters/Emergencies					
<input checked="" type="checkbox"/> Original Annual Statement Performance and Evaluation Report for Period Ending:		<input type="checkbox"/>		Revised Annual Statement (revision no: ) Final Performance and Evaluation Report			
<b>Line</b>	<b>Summary by Development Account</b>	<b>Original</b>	<b>Total Estimated Cost</b>	<b>Revised<sup>2</sup></b>	<b>Obligated</b>	<b>Total Actual Cost<sup>1</sup></b>	<b>Expended</b>
Signature of Executive Director		Date	Signature of Public Housing Director		Date		
<i>Stacy D'Amico</i>		3/31/12					

**Part II: Supporting Pages**

PHA Name: Waterville Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		ME36P00850112	CFPP (Yes/No):	No	Federal FY of Grant: 2012	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Revised 2	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	Status of Work
ME008000088	Facade work/steps	1460		10,000				
Formerly ME008-2	Roofing - Acq.	1460		2,500				
	Complete unit rehab - Acq.	1460	1 Unit	17,500				
	<b>Sub-Total</b>			<b>30,000</b>				
ME008000088	Bathroom Rehab - on-going (final)	1460		2,500				
Formerly ME008-3	Replace windows	1460	150	72,000				
	<b>Sub-Total</b>			<b>74,500</b>				
ME008000088	Plumbing, drain line repair/replacement	1460		16,500				
Formerly ME008-4								
	<b>Sub-Total</b>			<b>16,500</b>				
ME008000088								
Formerly ME008-5	Facade crack/joint repairs	1460		11,500				
				<b>11,500</b>				
ME008000088	General operating expenses	1406		129,057				
	<b>Sub-Total</b>			<b>129,057</b>				
	<b>TOTAL</b>			<b>261,557</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.

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 8/31/2011

Part I: Summary

PHA Name: Waterville Housing Authority  
 Grant Type and Number: ME36P00850111  
 Replacement Housing Factor Grant No:  
 Capital Fund Program Grant No:  
 Date of CFPP:  
 FRY of Grant: 2011  
 FRY of Grant Approval: 2011

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	Original	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	151,600		93,705	20,500		1,513
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						
8	1440 Site Acquisition						
9	1450 Site Improvement	20,000		20,000			
10	1460 Dwelling Structures	136,842		194,737		27,500	20,748
11	1465 I Dwelling Equipment - Nonexpendable						
12	1470 Non-dwelling Structures						
13	1473 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495 I 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 line 2 - 19)	308,442		308,442		48,000	22,261
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  
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U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 Expires 8/31/2011

Part I: Summary										
PHA Name:		Grant Type and Number			Capital Fund Program Grant No:		Replacement Housing Factor Grant No:		FY of Grant:	
Waterville Housing Authority					ME36P00850111				2011	
		Date of CFFP:							FY of Grant Approval: 2011	
Type of Grant		Original Annual Statement		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: 2 )		Final Performance and Evaluation Report		
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>		
Line		Summary by Development Account			Date		Original		Total Estimated Cost	
					3/21/12				Revised <sup>2</sup>	
Signature of Executive Director							Signature of Public Housing Director		Obligated	
<i>Thomas Young</i>									Total Actual Cost <sup>1</sup>	
									Date Expended	

Part II: Supporting Pages

PHA Name: Waterville Housing Authority		Grant Type and Number Capital Fund Program Grant No:		ME36P00850111		CFPP (Yes/No):		No		Federal FY of Grant: 2011	
Replacement Housing Factor Grant No:		Development Account No:		Quantity		Total Estimated Cost		Total Actual Cost		Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Original	Revised 2	Funds Obligated <sup>1</sup>	Funds Expended <sup>2</sup>				
	Facade work/steps	1460		0	20,000						
ME008000088	Paving, site work, landscaping - Acq.	1450	2 Bldgs	20,000	20,000						
Formerly ME008-2	Complete unit rehab - Acq.	1460	2 Units	17,500	7,500					Contract	
	Roofing	1460	2 Bldgs	0	16,540					Contract	
	<b>Sub-Total</b>				<b>37,500</b>	<b>64,040</b>	<b>0</b>		<b>0</b>		
ME008000088	Bathroom Rehab - on-going	1460	10 Units	10,400	29,800	2,852				Contract	
Formerly ME008-3	Replace windows	1460	201	64,942	96,249					Contract	
	<b>Sub-Total</b>				<b>75,342</b>	<b>126,049</b>	<b>2,852</b>	<b>0</b>			
ME008000088	Plumbing, drain line repair/replacement	1460		16,500	0	0			0	Defer to CFP12	
Formerly ME008-4	Replace windows	1460	42	20,000	20,748	20,748			20,748	FINAL	
	Bathroom Rehab - on-going	1460	3 Units	7,500	3,900	3,900			3,900		
	<b>Sub-Total</b>				<b>44,000</b>	<b>24,648</b>	<b>24,648</b>	<b>20,748</b>			
ME008000088	Replace heat appliances/water heaters	1460	5 Units	0	0	0				Defer	
Formerly ME008-6	<b>Sub-Total</b>				<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>			
ME008000088	General operating expenses	1406		151,600	93,705	20,500			1,513		
	<b>Sub-Total</b>				<b>151,600</b>	<b>93,705</b>	<b>20,500</b>	<b>1,513</b>			
	<b>TOTAL</b>				<b>308,442</b>	<b>308,442</b>	<b>48,000</b>	<b>22,261</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.



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 8/31/2011

Part I: Summary

PHA Name: Waterville Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36P00850110 Date of CFFP: _____	Replacement Housing Factor Grant No:	FFY of Grant: 2010				
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 12/31/2011		Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no: 3 ) Final Performance and Evaluation Report	FFY of Grant Approval: 2010				
Line	Summary by Development Account	Date	Original	Total Estimated Cost	Revised <sup>1</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director <i>Diana Thomas</i>		Date <i>3/21/12</i>	Original	Total Estimated Cost	Revised <sup>1</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
					Signature of Public Housing Director			

Part II: Supporting Pages

PHA Name: Waterville Housing Authority		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No:		ME36P00850110	CFPP (Year/No):	No	Federal FFY of Grant: 2010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost Original	Revised 2	Funds Obligated <sup>2</sup>	Total Actual Cost Funds Expended <sup>2</sup>	Status of Work
ME008000088	Replace entry steps/porch repair - Acq.	1460	6 Units	0	0			Completed 501-09
Formerly ME008-2	Complete unit rehab - Acq.	1460	2 Units	5,520	31,101	31,101	7,065	Contracted
	Replace roofs	1460	3 Bldgs	55,154	61,636	61,636	61,636	FINAL
	Complete siding (ARRA Cont)	1460	1 Unit	9,270	9,270	9,270	9,270	Completed
	<b>Sub-Total</b>			<b>69,944</b>	<b>102,007</b>	<b>102,007</b>	<b>77,971</b>	
ME008000088	Replace entry steps-ongoing	1460	4 Bldgs	4,200	4,400	4,400		Scheduled early 2012
Formerly ME008-3	Replace windows	1460	115	0	0			Defer to CFPI1
	Replace flooring (on-going)	1460	5 Units	10,500	15,323	15,323	13,062	In Progress
	Bathroom Rehab (ARRA Cont)	1460	17 Units	44,200	61,408	61,408	58,253	Almost Complete
	<b>Sub-Total</b>			<b>58,900</b>	<b>81,131</b>	<b>81,131</b>	<b>71,315</b>	
ME008000088	Plumbing, drain line repair/replacement	1460		38,500	0	0		Defer
Formerly ME008-4	Replace windows	1460	135	86,010	87,439	87,439	87,439	Complete
	Replace flooring (on-going)	1460	5 Units	18,000	24,468	24,468	21,039	As Needed
	<b>Sub-Total</b>			<b>142,510</b>	<b>111,907</b>	<b>111,907</b>	<b>108,478</b>	
ME008000088	General operating expenses	1406		50,000	50,000	50,000	50,000	Completed
	Computer Equipment, Office Fixtures	1475		7,000	3,675	3,675	3,675	FINAL
	Professional reports, design, fees, etc.	1430		5,800	0			
	Replace appliances as needed	1465.1		6,000	6,579	6,579	6,579	Completed
	Replace boilers/water heaters as needed	1460		20,000	4,855	4,855	4,855	Completed
	<b>Sub-Total</b>			<b>88,800</b>	<b>65,109</b>	<b>65,109</b>	<b>65,109</b>	
	<b>TOTAL</b>			<b>360,154</b>	<b>360,154</b>	<b>360,154</b>	<b>322,873</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.

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 8/31/2011

Part I: Summary

PHA Name: Waterville Housing Authority	Grant Type and Number Capital Fund Program Grant No: ME36P00850109 Date of CFFP: _____	Replacement Housing Factor Grant No: _____	FFY of Grant: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <input type="checkbox"/> Reserve for Disasters/Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 4) <input type="checkbox"/> Final Performance and Evaluation Report			FFY of Grant Approval: 2009

Line	Summary by Development Account	Original	Total Estimated Cost	Revised <sup>1</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		70,000	35,000		35,000	35,000
3	1408 Management Improvements		10,460	10,460		10,460	10,460
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition		8,672	6,662		6,662	6,662
9	1450 Site Improvement						
10	1460 Dwelling Structures		74,760	39,760		39,760	39,760
11	1465.1 Dwelling Equipment - Nonexpendable		170,670	246,269		246,269	175,610
12	1470 Non-dwelling Structures		12,000	10,515		10,515	10,515
13	1475 Non-dwelling Equipment						
14	1485 Demolition		4,540	2,436		2,436	2,436
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						
18a	1501 Collateralization or Debt Service paid by the PHA						
18b	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceeds 8% of line 20)						
20	Amount of Annual Grant: (sum of line 2 - 19)		351,102	351,102		351,102	280,443
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 - Hart 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: Waterville Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36P00850109 Date of CFFP: _____		Replacement Housing Factor Grant No:		FFY of Grant: 2009 FFY of Grant Approval: 2009		
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 4) Final Performance and Evaluation Report				
Line	Summary by Development Account	Date	Original	Total Estimated Cost	Revised <sup>1</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director					Signature of Public Housing Director			
<i>Daniel Taylor</i>								





Capital Fund Program-Five-Year Action Plan

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 8/30/2011

Part I: Summary						
PHA Name/Number	Waterville Housing Authority/ME008	Locality (City/County & State)	Waterville, Maine		Revision No:	
			Work Statement for Year 1	Work Statement for Year 2		
Development Number and Name	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5	
A. ME008000088, Elm Towers	FFY 1 2012	FFY 2013	FFY 2014	FFY 2015	FFY 2016	
B. Physical Improvements Subtotal	Annual Statement	205,000	196,000	210,000	205,000	
C. Management Improvements						
D. PHA-Wide Non-dwelling Structures and Equipment						
E. Administration						
F. Other						
G. Operations		145,000	154,000	130,000	135,000	
H. Demolition						
I. Development						
J. Capital Fund Financing - Debt Service						
K. Total CFP Funds		350,000	350,000	340,000	340,000	
L. Total Non-CFP Funds		0	0	0	0	
M. Grand Total		350,000	350,000	340,000	340,000	

Capital Fund Program-Five-Year Action Plan

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 8/30/2011

Part I: Summary (Continuation)

PHA Name/Number	Waterville Housing Authority/ME008	Locality (City/County & State)	Waterville, Maine	Original 5-Year Plan		Revision No.	
				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
ME008-2/Acquisitions & Riverview				40,000	83,000	40,000	30,000
ME008-3/Woodmont Heights				120,000	73,000	55,000	75,000
ME008-4/Chap-Hill Manor				10,000	20,000	115,000	60,000
ME008-5/Elm Towers				5,000	0	0	0
ME008-6/Louise Ave.				15,000	10,000	0	20,000
ME008-7/Forsythe				15,000	10,000	0	20,000
PHA Wide				145,000	154,000	130,000	135,000
				350,000	350,000	340,000	340,000
				0	0	0	0
				0	0	0	0
				350,000	350,000	340,000	340,000









**PHA Certifications of Compliance  
with PHA Plans and Related  
R e g u l a t i o n s**

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
Expires 08/30/2011

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**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, 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.

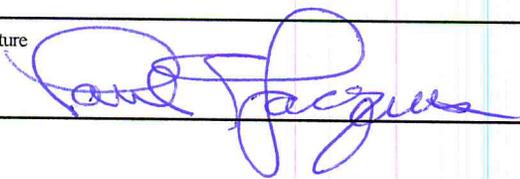
Waterville Housing Authority  
 PHA Name

ME008  
 PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20 - 20

Annual PHA Plan for Fiscal Years 2012- 2013

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

Name of Authorized Official Paul F. Jacques	Title Board Chairperson
Signature 	Date April 10, 2012

# Civil Rights Certification

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
Expires 08/30/2011

## Civil Rights Certification

### Annual Certification and Board Resolution

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

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

Waterville Housing Authority  
PHA Name

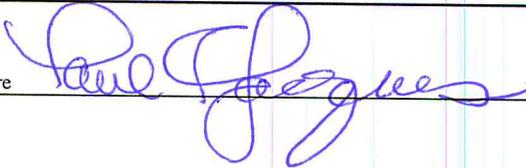
ME008  
PHA Number/HA Code

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

Name of Authorized Official  
Paul F. Jacques

Title  
Board Chairperson

Signature



Date

4/10/2012

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

**U.S. Department of Housing and Urban Development**  
Office of Public and Indian Housing  
**OMB# 2577-0226**  
**Expires 08/30/2011**

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

I, Peter Merrill the Acting Director certify that the Five Year and  
Annual PHA Plan of the Waterville Housing Authority is consistent with the Consolidated Plan of  
Maine State Housing Authority prepared pursuant to 24 CFR Part 91.

 3/20/12

Signed / Dated by Appropriate State or Local Official

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Waterville Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

60 Elm St., 83 Water St., 7 Lowell St., 12 Silvermount St., 51 Summer St., 14 Belmont Ave., 25 Oakland St., 18&20 Boothby St., 24 hight St., 14 Boutelle Ave., 8 Canabas Ave., 91 North St., 6 Fairmont St., 63-85 Drummond Ave., 2-23 Wilson St., 13-24 Crawford St., 21-31 Hazelwood Ave., 17, 19, 21 Chaplin St., 13, 18, 20 Hillside Ave., and 26 Louise Ave., Waterville, Kennebec County, Maine, 04901

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

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

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

Name of Authorized Official

Diane Townsend

Title

Executive Director

Signature

X 

Date

3/21/12

# Certification of Payments to Influence Federal Transactions

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

OMB Approval No. 2577-0157 (Exp. 01/31/2014)

Applicant Name

Waterville Housing Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program

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

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

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

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

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

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

Name of Authorized Official

Diane Townsend

Title

Executive Director

Signature

Date (mm/dd/yyyy)



3/21/2012

## DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Waterville Housing Authority 88 Silver St. Waterville ME 04901  Congressional District, if known:	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>   Congressional District, if known:	
<b>6. Federal Department/Agency:</b> Department of Housing and Urban Development	<b>7. Federal Program Name/Description:</b> HUD PHA Plan  CFDA Number, if applicable: NA	
<b>8. Federal Action Number, if known:</b> NA	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI): NA	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI): NA	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: Diane Townsend Title: Executive Director Telephone No.: (207) 873-2155      Date: 3/21/12	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

**Attachment K**

**Waterville Housing Authority**

**Annual Plan**

**Fiscal Year 07/01/2012 – 06/30/2013**

**Comments of the Resident Advisory Board**

The Housing Authority of the City of Waterville met with the Resident Advisory Board (RAB) on March 6, 2012.

Elements of the PHA Plan Template and the Capital Fund Program grants were discussed. The RAB agreed with the overall Plan as presented and no comments or suggestions were offered by them.

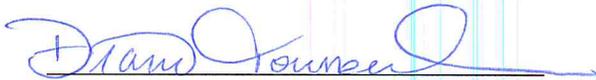


Diane Townsend, Executive Director  
Waterville Housing Authority

March 21, 2012

**Attachment L**  
**Waterville Housing Authority**  
**Annual Plan**  
**Fiscal Year 07/01/2012 – 06/30/2013**  
**Challenged Elements**

There were no challenged elements to the Housing Authority's Annual Plan



Diane Townsend, Executive Director  
Waterville Housing Authority

March 21, 2012