

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>Manchester Housing and Redevelopment Authority</u> PHA Code: <u>NH001</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>10/1/2012</u>												
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>1,169</u> Number of HCV units: <u>1,921</u>												
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only												
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)												
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program <table border="1"> <thead> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> </tr> </tbody> </table>	PH	HCV	PHA 1:		PHA 2:		PHA 3:	
PH	HCV												
PHA 1:													
PHA 2:													
PHA 3:													
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.												
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the Manchester Housing and Redevelopment Authority is to provide and sustain affordable, secure, quality living environments for low income families and individuals; to provide personal and economic enrichment and independence opportunities for residents; to act as a catalyst and community partner in developing new low income affordable housing opportunities; and to engage in community revitalization initiatives to improve neighborhoods, promote economic development, increase employment opportunities and broaden the local tax base.												

5.2	<p>Goals and Objectives. Identify the PHA’s quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.</p> <p>1. Expand the supply of assisted housing by: applying for additional rental vouchers; reducing public housing vacancies; leveraging private or other public funds to create additional housing opportunities. Past Progress: MHRA has applied for additional vouchers as they became available. MHRA secured 109 VASH vouchers and 100 vouchers for Non-Elderly Disabled . MHRA is pursuing conversion and construction of units using tax credit and other funding.</p> <p>2.Improve the quality of assisted housing by: improving public housing management; maintaining voucher management; increasing customer satisfaction; renovating or modernizing public housing units. Past Progress: Conducted resident meetings to assess and ensure customer satisfaction. Achieved a voucher utilization rate of 100%. Renovated interiors of 12 units for the elderly and persons with disabilities; replaced roofing at two building at Kelley Falls, AMP 2; updated ssecurity camera systems at all highrise buildings; and installed carbon monoxide detectors in all apartments.</p> <p>3. Increase assisted housing choices by: providing voucher mobility counseling; conducting outreach efforts to potential voucher landlords; increasing voucher payment standards; implementing voucher homeowner program. Past Progress: Voucher mobility counseling conducted during briefings; continual staff outreach to landlords; voucher payment standards increased from 100% to 110%, Voucher homeownership program implemented.</p> <p>4. Provide an improved living environment by: implementing public housing security improvements. Past Progress: Security lighting installed; new security cameras installed in all highrise buildings; on site police presence provided in family public housing developments; replacement and expansion of security systems implemented.</p> <p>5. Promote self-sufficiency and asset development of assisted households by: Increasing the number and percentage of employed persons in assisted families; providing or attracting supportive services to improve assistance recipients’ employability; provide or attract supportive services to increase independence for the elderly or families with disabilities. Past Progress: Continued to provide the Family Self Sufficiency Program for HCV residents; Provide afterschool homework help for children of working parents of assisted housing; Established partnership with Manchester School District and preschool child care provider for provision of educational, developmental preschool for assisted families with children aged 3 & 4, with full day, wrap around daycare for children of working parents. Provided facilities for Manchester School District to operate an Even Start program for residents who are not proficient in English. Continued to provide Congregate Services Programs until February 2012 to help maintain independence of the elderly and persons with disabilities.</p> <p>6. Ensure equal opportunity and affirmatively further fair housing by: Undertaking affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability; Undertaking 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; undertaking affirmative measures to ensure accessible housing to person with all varieties of disabilities regardless of unit size required; employing a Fair Housing Officer and a 504 Compliance Coordinator to work with staff and residents on fair housing issues. Past Progress: Promoted affirmative measures to ensure access at briefing for HCV participants and encouraged participants to seek suitable housing; Continue to provide reasonable accommodations to families with members who have a disability; continued to employ Fair Housing and 504 Compliance Coordinators.</p> <p>7. Ensure compliance with the Violence Against Women Act by: Amending the HCV Administrative Plan and Admissions and Continued Occupancy Policy; Adopting revised Housing Assistance Payments Contract and revised Tenancy Addendum (HUD-52641-A); Utilizing HUD-approved certification form(s); Notifying tenants and owners and managers of rights and obligations under VAWA. Past Progress: HCV Administrative Plan and Admissions and Continued Occupancy Policies were revised and revisions were approved by Board of Commissioners; Revised (January 2007) Housing Assistance Payments Contract and Tenancy Addendum are being utilized; HUD-approved certification forms are being utilized; tenants, owners and managers have been notified of rights and obligations under VAWA.</p>
6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: There have been no revisions to any PHA plan element since the last Annual Plan submission.</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>198 Hanover Street, Manchester, NH 03104</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <p>Homeownership Program: MHRA offers a Homeownership Program to its Section 8 HCV program participants who qualify. This program was implemented in 2003 and since that time, 31 families have participated. A full description of the program is included in MHRA’s HCV Administrative Plan.</p> <p>Project Based Vouchers: 362 vouchers have been approved for participation in the program and of these, 303 are now under contract in the following projects: Piscataquog Apartments, Market/Amherst/Spruce Streets, Straw Mansion, Mary Gale Apartments, Inc., Old Wellington Rd. Apartments, Family Mill, Brown School Apartments, Family Willows, Karatzas Avenue Phase I & II, and South Porter Street (Laurette Sweeney) Apartments.</p>

8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p> <p>The City of Manchester's Consolidated Plan (2010 - 2015) indicates that since 1990, the percent of low and moderate persons citywide has increased from 40.63% (1990 Census data) to 49.89% in 2000 (2000 Census data) and 52.20% in 2008 (2007 Census Low and Moderate income Summary Data for Manchester. The 2007 Census projection indicates that Manchester is income eligible on a citywide basis for entitlement funded activities. The 2000 Census indicated that there are 6,645 extremely-low income households and 5,961 low-income renter households in Manchester, which represents 37% of all renter households in the City. 67% of extremely low-income and 43% of low income renter households have cost burdens exceeding 30% of income, and 58% of low-income and 23% of low-income households have a rent burden in excess of 50% of income. Manchester's elderly population is estimated at 15% of total, with 11% living below the poverty level. 21% of frail elderly (frail elderly are most in need of services) aged 65-74 are living below poverty and 16% of frail elderly over the age of 74 are living below poverty.</p> <p>The Consolidated Plan does not provide income estimates for households with persons with disabilities, but the 2000 Census indicated that there were 2,449 individuals over the age of 16 with self-care mobility disabilities and a total of 9,147 non-institutionalized persons over the age of 16 with physical disabilities living in Manchester. The Consolidated Plan states that there are 491 units of universally accessible assisted housing units in the City. Minority households account for 9.1% of the total number of rental households. 83.9% of Hispanic/Latin households are renters. Minority households which are considered extremely low-income comprise 25.7%, and low-income households comprise 13.6%, of the total minority households. Over 70% of minority renter households in the City have incomes below 80% of median, compared to a citywide 59% for renter households.</p> <p>On MHRA's waiting list, there are 9,361 extremely low income households, 1,624 very low income households and 151 low income households. Of these, 3,988 are families with children, 980 are elderly families, and 877 are families with disabilities. There are 7,939 (63%) on MHRA's public housing waiting list that are white, non-hispanic/latino and 4,607 (37%) are white-hispanic/latino, hispanic/latino, black, American Indian, asian, or pacific islander. On MHRA's Section 8 Housing Choice Voucher waiting list, 11,755 (64%) are white, non-hispanic/latino and 6,596 (36%) are white-hispanic/latino, hispanic/latino, black, American Indian, asian or pacific islander.</p> <p>According to the City's analysis, extremely-low, very-low and low-income renters experience great difficulty in securing affordable housing. It has been noted that within the City, a persistent problem continues to be that both large and small families are doubled-up because of the high cost of housing. The City's analysis shows that extremely -low income households, regardless of the size of length of time in the City, continue to expend the greatest proportion of their income for housing costs. Estimates have confirmed that 53% of Manchester renters are spending more than 30% of their gross annual income on housing costs.</p>
9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>MHRA is committed to efficient use of existing resources to continue to address the housing needs of families on its waiting list. MHRA has, and will continue to, utilize every one of its allotted Housing Choice Vouchers (up to the allowed budget authority) as well as expending all HCV allocated money. Additionally, with a vacancy rate of less than 3%, MHRA will continue to maximize occupancy in its Public Housing units for families, the elderly and persons with disabilities. MHRA will continue to leverage private/public partnership resources to develop additional affordable housing opportunities in the City of Manchester.</p>

10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”</p> <p>Per HUD regulations, the Authority must provide its definition of a substantial deviation and significant amendment or modification to the Comprehensive Agency Plan (CAP). Under HUD regulations, any item falling under this category requires an interim change to the CAP; smaller or less significant changes may wait until the next CAP submission. It is the Authority’s intent to update the CAP in the event of any discretionary substantial deviation, significant amendment and/or modification. Any change to the CAP that fundamentally alters the mission, goals and/or policies of the Authority would fall under this category. All proposed changes will be reviewed on a case by case basis.</p> <p>The following are examples of possible substantial deviations, significant amendments and/or modifications (“change”) to the CAP. This is not an inclusive list:</p> <ul style="list-style-type: none"> ~ Substantial reduction or discontinuance of the provision of Public Housing or the Housing Choice Voucher Program. For Public Housing, “substantial reduction” shall be a minimum of two- percent (25) of all units OR if an entire site or development of a smaller size is removed for any reason (deconcentration, modernization, disposition, etc.) in one fiscal year. For the Housing Choice Voucher Program., “substantial reduction” shall be a minimum of ten- percent (168) of all vouchers. ~ Change to rent policies, admissions policies or organization of the waiting lists. ~ Addition or removal of a secondary housing program such as Section 5(h) or Section 8y homeownership programs. ~ Addition or removal of primary support services such as the Congregate Services Program. ~ Ten percent (10%) or more adjustment in funding amount, funding source and/or use not mandated by Federal, State, Local or other regulations or requirements. ~ Conversion or elimination of any Public Housing units under voluntary conversion, disposition or demolition guidelines. ~ Fundamental change to mission or strategic goals such as no longer providing affordable housing. <p>Per HUD regulations, any significant amendment or substantial deviation/modification (“change”) to a CAP is subject to the same requirements as the original CAP including time frames. In these situations the Authority must:</p> <ul style="list-style-type: none"> ~ Consult with the Resident Advisory Board; and ~ Ensure consistency with the City of Manchester’s Consolidated Plan; and ~ Provide for a review of the change(s) by the public during a 45-day review period; and ~ Convene the Board of Commissioners to adopt the change(s) during a meeting that is open to the public; and ~ Submit the change to and receive approval from HUD in accordance with HUD’s plan review procedures prior to implementation of the change(s).
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11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>
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This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Part I: Summary					
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150112 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2012 FFY of Grant Approval: 2012	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Serve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 267,669			
3	1408 Management Improvements	\$ 267,500			
4	1410 Administration (may not exceed 10% of line 21)	\$ 133,834			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 145,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 392,000			
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 60,000			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 63,500			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 6,000			
17	1499 Development Activities ⁴				
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)	\$ 2,844			
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$ 1,338,347	\$ -	\$ -	\$ -
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	\$ 140,000			
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	\$ 60,000			
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement

³ PHAs with under 250 units may use 100% of CFP Grants for Operations

⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name:		Grant Type and Number				FFY of Grant:		
Manchester Housing and Redevelopment Authority		Capital Fund Program Grant No: NH36P00150112 Replacement Housing Factor Grant No: CFFP (Yes/No): No				2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
AMP 001 Elmwood Gardens	Exterior Trim & Siding Replacement / Paint	1460	10 Bldg's	\$ 10,000				
	Window Repair / Replacement	1460		\$ 8,000				
	Heat Convector / Piping Replacement	1460		\$ 12,000				
AMP 002 Kelley Falls	Roofing Replacement	1460	1 Bldg.	\$ 65,000				
AMP 003 Scattered Sites Elderly	A & E Services for Rehabilitation	1430.1		\$ 3,000				
	Consulting/Testing Services Rehabilitation	1430.2		\$ 3,000				
	Interior Building Rehabilitation	1460	6 DU's	\$ 132,000				
	Relocation Costs for Rehabilitation	1495.1	6 DU's	\$ 6,000				
AMP 004 Scattered Sites Family	Roofing Replacement	1460		\$ 10,000				
AMP 005 O'Malley Apartments	A & E Services for Trash Chute Replacement	1430.1		\$ 2,000				
	Trash Chute Replacement	1460		\$ 80,000				
Central Office Cost Center	HVAC System Replacement	1460		\$ 50,000				
HA-Wide Improvements	Consultant for Hazardous Materials Abatement	1430.2		\$ 3,000				
	Hazardous Mataerials Abatement	1460		\$ 15,000				
	Accessibility Issues / Section 504 Activities	1460		\$ 10,000				
	Appliance Replacement	1465.1		\$ 60,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150112 Replacement Housing Factor Grant No: CFPP (Yes/No): No				FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
HA-Wide Management Improvements	Computer System Software & Support	1408		\$ 100,000				
	Staff Professional Training	1408		\$ 26,000				
	Commnity Policing Contract	1408		\$ 140,000				
	Resident Initiatives and Training	1408		\$ 500				
	Newsletters & Operational Guides	1408		\$ 500				
	Archive Document Storage	1408		\$ 500				
Administration	Non-Technical PHA Staff Salaries	1410.1		\$ 87,889				
	Non-Technical PHA Staff Benefits	1410.9		\$ 43,945				
	Legal Counsel Contract & Bid Reviews	1410.4		\$ 1,000				
	Advertising Costs	1410.19		\$ 1,000				
Fees and Costs	Project Inspector Salaries and Benefits	1430.7		\$ 134,000				
Non-Dwelling Equipment	Office Equipment & Furniture Replacement	1475.1		\$ 23,500				
	Computer System Enhancement	1475.4		\$ 40,000				
Operations	Operations Account	1406		\$ 267,669				
Contingency	Contingency Account	1502		\$ 2,844				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Manchester Housing and Redevelopment Authority			FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Reveised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 001 Elmwood Gardens	3/11/2014		3/11/2016		
AMP 002 Kelley Falls	3/11/2014		3/11/2016		
AMP 003 Scattered Sites	3/11/2014		3/11/2016		
AMP 004 Scattered Sites	3/11/2014				
AMP 005 O'Malley Apartments	3/11/2014		3/11/2016		
Central Office Cost Center	3/11/2014		3/11/2016		
HA-Wide Management Improvements	3/11/2014		3/11/2016		
Administration	3/11/2014		3/11/2016		
Fess and Costs	3/11/2014		3/11/2016		
Non-Dwelling Equipment	3/11/2014		3/11/2016		

¹ Obligations and expenditure end date 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
 OMB No. 2477-0226
Expires 8/30/2011

Part 1: Summary						
PHA Name/Number NH36P001			Locality (City/ County & State) Manchester, NH		<input checked="" type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
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	\$ 713,000	\$ 708,000	\$ 716,000	\$ 716,000
C.	Management Improvements		\$ 176,500	\$ 178,500	\$ 176,500	\$ 176,500
D.	PHA-Wide Non-Dwelling Structures and Equipment		\$ 47,344	\$ 50,344	\$ 44,344	\$ 44,344
E.	Administration		\$ 133,834	\$ 133,834	\$ 133,834	\$ 133,834
F.	Other					
G.	Operations		\$ 267,669	\$ 267,669	\$ 267,669	\$ 267,669
H.	Demolition					
I.	Development					
J.	Capital Fund Financing -Debt Service					
K.	Total CFP Funds		\$ 1,338,347	\$ 1,338,347	\$ 1,338,347	\$ 1,338,347
L.	Total Non-CFP Funds					
M.	Grand Total		\$ 1,338,347	\$ 1,338,347	\$ 1,338,347	\$ 1,338,347

Capital Fund Program - Five-Year Action Plan

U.S Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2477-0226
Expires 8/30/2011

Part II: Supporting Pages - Physical Needs Work Statement (s)						
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	AMP 001 Elmwood Gardens			AMP 001 Elmwood Gardens		
Annual	Exterior Trim & Siding Replacement/Paint	10 Bldg's	\$ 10,000	Exterior Trim & Siding Replacement/Paint	10 Bldg's	\$ 10,000
Statement	Window Repair / Replacement		\$ 9,000	Window Repair / Replacement		\$ 24,000
	Heat Convector / Piping Replacement		\$ 10,000	Shed Replacement		\$ 40,000
	AMP 002 Kelley Falls			AMP 002 Kelley Falls		
	Roofing Replacement	1 Bldg.	\$ 65,000	Roofing Replacement	1 Bldg	\$ 65,000
	Window Replacement / Repairs	1 Bldg.	\$ 14,000	Window Replacement / Repairs	1 Bldg.	\$ 14,000
	AMP 003 Scattered Sites Elderly			AMP 003 Scattered Sites Elderly		
	Interior Building Rehabilitation	8 DU's	\$ 200,000	Interior Building Rehabilitation	6 DU's	\$ 150,000
	AMP 004 Scattered Sites Family			AMP 004 Scattered Sites Family		
	Roofing Replacement		\$ 20,000	Roofing Replacement		\$ 20,000
	AMP 005 O'Malley Apartments			AMP 005 Kalivas Apartments		
	Kitchen Renovations	100 DU's	\$ 300,000	Kitchen Renovations	100 DU's	\$ 300,000
	HA - Wide Improvements			HA - Wide Improvements		
	Accessibility Issues/Section 504 Activities		\$ 15,000	Accessibility Issues/Section 504 Activities		\$ 15,000
	Hazardous Materials Abatement		\$ 20,000	Hazardous Materials Abatement		\$ 20,000
	Appliance Replacement		\$ 50,000	Appliance Replacement		\$ 50,000
	Subtotal of Estimated Cost		\$ 713,000	Subtotal of Estimated Cost		\$ 708,000

Capital Fund Program - Five-Year Action Plan

U.S Department of Housing and Urban Development
 Office of Public and Indian Housing
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Part II: Supporting Pages - Physical Needs Work Statement (s)						
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	AMP 001 Elmwood Gardens			AMP 001 Elmwood Gardens		
Annual Statement	Window Repair / Replacement		\$ 17,000	Window Repair / Replacement		\$ 17,000
	AMP 002 Kelley Falls			AMP 002 Kelley Falls		
	Roofing Replacement	1 Bldg.	\$ 65,000	Roofing Replacement	1 Bldg	\$ 65,000
	Window Replacement / Repairs	1 Bldg.	\$ 14,000	Window Replacement / Repairs	1 Bldg.	\$ 14,000
	AMP 003 Scattered Sites			AMP 003 Scattered Sites		
	Interior Building Rehabilitation	8 DU's	\$ 200,000	Interior Building Rehabilitation	6 DU's	\$ 150,000
	AMP 005 O'Malley Apartments			AMP 005 Kalivas Apartments		
	Window / Curtain Wall Replacement	100 DU's	\$ 190,000	Paint Public Spaces		\$ 10,000
	Hot Water Tank Relining		\$ 10,000			
	AMP 005 Kalivas Apartments			AMP 008 Pariseau Apartments		
	Air Conditioner Sleeves	100 DU's	\$ 110,000	Kitchen Renovations	50 DU's	\$ 150,000
	Replace Hallway flooring		\$ 25,000	Replace Ceiling Tiles	100 DU's	\$ 125,000
				Closet Door Replacement	100 DU's	\$ 100,000
	HA - Wide Improvements			HA - Wide Improvements		
	Accessibility Issues/Section 504 Activities		\$ 15,000	Accessibility Issues/Section 504 Activities		\$ 15,000
	Hazardous Materials Abatement		\$ 20,000	Hazardous Materials Abatement		\$ 20,000
	Appliance Replacement		\$ 50,000	Appliance Replacement		\$ 50,000
	Subtotal of Estimated Cost		\$ 716,000	Subtotal of Estimated Cost		\$ 716,000

Part I: Summary					
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150107 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2007 FFY of Grant Approval: 2007	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Serve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: 3)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 3/31/2012		<input checked="" type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 294,534	\$ -	\$ 294,534	\$ 294,534
3	1408 Management Improvements	\$ 177,952	\$ -	\$ 179,098	\$ 179,098
4	1410 Administration (may not exceed 10% of line 21)	\$ 80,613	\$ -	\$ 85,266	\$ 85,839
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 176,723	\$ -	\$ 180,660	\$ 180,087
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 815,340	\$ -	\$ 805,684	\$ 805,684
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 48,798	\$ -	\$ 48,718	\$ 48,718
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Deposit				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$ 1,593,960	\$ -	\$ 1,593,960	\$ 1,593,960
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement

³ PHAs with under 250 units may use 100% of CFP Grants for Operations

⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150107 Replacement Housing Factor Grant No: CFPP (Yes/No): No				FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
AMP 003 Elmwood Gardens	A & E Services Replacement of Boilers	1430.1		\$ 6,025		\$ 6,025	\$ 6,025	Completed
	Replacement of Boilers	1460		\$ 278,619		\$ 267,938	\$ 267,938	Completed
AMP 003 Scattered Sites	A & E Services for Rehabilitation	1430.1		\$ 222		\$ 222	\$ 222	Completed
	Consulting/Testing Services Rehabilitation	1430.2		\$ 5,709		\$ 5,709	\$ 5,709	Completed
	Exterior Building Rehabilitation	1460		\$ 423,121		\$ 423,121	\$ 423,121	Completed
AMP 005 O'Malley	Window Air Conditioner Sleeves	1460	96	\$ 92,500		\$ 93,525	\$ 93,525	Completed
HA-Wide	A & Services Exterior Masonry Repairs	1430.1		\$ 5,695		\$ 5,695	\$ 5,695	Completed
	Exterior Masonry Repairs	1460		\$ 21,100		\$ 21,100	\$ 21,100	Completed
HA-Wide Management Improvements	Computer System Software & Support	1408		\$ 48,712		\$ 48,572	\$ 48,572	Completed
	Staff Professional Training	1408		\$ 21,194		\$ 21,194	\$ 21,194	Completed
	Archive Document Storage	1408		\$ 220		\$ 220	\$ 220	Completed
	Security Upgrades	1408		\$ 107,826		\$ 109,112	\$ 109,112	Completed
Administration	Non-Technical PHA Staff Salaries	1410.1		\$ 55,307		\$ 56,172	\$ 56,172	Completed
	Non-Technical PHA Staff Benefits	1410.9		\$ 25,306		\$ 29,094	\$ 29,667	Completed
Fees and Costs	Project Inspector Salaries and Benefits	1430.7		\$ 159,072		\$ 163,009	\$ 162,436	Completed
Non-Dwelling Equipment	Office Equipment & Furniture Replacement	1475.1		\$ 36,113		\$ 36,113	\$ 36,113	Completed
	Computer System Enhancement	1475.4		\$ 12,685		\$ 12,605	\$ 12,605	Completed
Operations	Operations Account	1406		\$ 294,534		\$ 294,534	\$ 294,534	Completed

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part I: Summary					
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150108 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2008 FFY of Grant Approval: 2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 4) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 3/31/2012 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 297,081	\$ 297,081	\$ 297,081	\$ 297,081
3	1408 Management Improvements	\$ 110,567	\$ 110,567	\$ 111,802	\$ 111,802
4	1410 Administration (may not exceed 10% of line 21)	\$ 152,681	\$ 152,681	\$ 166,633	\$ 166,633
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 272,281	\$ 183,281	\$ 151,414	\$ 147,908
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 50,000	\$ 50,000	\$ 50,000	\$ 50,000
10	1460 Dwelling Structures	\$ 632,650	\$ 694,650	\$ 708,617	\$ 666,092
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 34,000	\$ 61,000	\$ 62,790	
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 54,000	\$ 54,000	\$ 54,862	\$ 54,862
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 4,226	\$ 4,226	\$ 4,288	\$ 4,288
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Deposit				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$ 1,607,486	\$ 1,607,486	\$ 1,607,486	\$ 1,498,665
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement

³ PHAs with under 250 units may use 100% of CFP Grants for Operations

⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150108 Replacement Housing Factor Grant No: CFPP (Yes/No): No			FFY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
AMP 001 Elmwood Gardens	Replacement of Boilers	1460		\$ 207,612	\$ 207,612	\$ 207,612	\$ 207,612	Completed
AMP 002 Kelley Falls	Appliance Replacement	1465.1		\$ 34,000	\$ 61,000	\$ 62,790		In Progress
	Roofing Replacement	1460			\$ 62,000	\$ 42,525		In Progress
AMP 003 Scattered Sites	A & E Services for Rehabilitation	1430.1		\$ 41,975	\$ 41,975	\$ 41,975	\$ 41,935	In Progress
	Consulting/Testing Services Rehabilitation	1430.2		\$ 830	\$ 830	\$ 830	\$ 830	Completed
	Site Rehabilitation	1450		\$ 50,000	\$ 50,000	\$ 50,000	\$ 50,000	Completed
	Exterior Building Rehabilitation	1460		\$ 425,038	\$ 425,038	\$ 458,480	\$ 458,480	Completed
	Relocation	1495.1		\$ 4,226	\$ 4,226	\$ 4,288	\$ 4,288	Completed
HA-Wide Management Improvements	Computer System Software & Support	1408		\$ 62,901	\$ 62,901	\$ 63,556	\$ 63,556	Completed
	Staff Professional Training	1408		\$ 26,000	\$ 26,000	\$ 26,580	\$ 26,580	Completed
	Resident Initiatives and Training	1408		\$ 579	\$ 579	\$ 579	\$ 579	Completed
	Program Reviews	1408		\$ 21,000	\$ 21,000	\$ 21,000	\$ 21,000	Completed
	Archive Document Storage	1408		\$ 87	\$ 87	\$ 87	\$ 87	Completed
Administration	Non-Technical PHA Staff Salaries	1410.1		\$ 100,454	\$ 100,454	\$ 116,185	\$ 116,185	Completed
	Non-Technical PHA Staff Benefits	1410.9		\$ 50,227	\$ 50,227	\$ 48,095	\$ 48,095	Completed
	Legal Counsel Contract & Bid Reviews	1410.4		\$ 2,000	\$ 2,000	\$ 2,353	\$ 2,353	Completed
Fees and Costs	Project Inspector Salaries and Benefits	1430.7		\$ 229,476	\$ 140,476	\$ 108,609	\$ 105,143	Ongoing
Non-Dwelling Equipment	Office Equipment & Furniture Replacement	1475.1		\$ 14,000	\$ 14,000	\$ 10,573	\$ 10,573	Completed
	Computer System Enhancement	1475.4		\$ 40,000	\$ 40,000	\$ 44,289	\$ 44,289	Completed
Operations	Operations Account	1406		\$ 297,081	\$ 297,081	\$ 297,081	\$ 297,081	Completed

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part I: Summary					
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant					
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 2) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 3/31/2012 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 322,540		\$ 322,540	\$ 322,540
3	1408 Management Improvements	\$ 119,494	\$ -	\$ 119,247	\$ 119,247
4	1410 Administration (may not exceed 10% of line 21)	\$ 159,928	\$ -	\$ 155,191	\$ 47,102
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 373,922	\$ -	\$ 353,519	\$ 60,505
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 632,518	\$ -	\$ 657,832	\$ 442,444
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 4,300	\$ -	\$ 4,374	\$ 4,374
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Deposit				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$ 1,612,702	\$ -	\$ 1,612,702	\$ 996,211
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement

³ PHAs with under 250 units may use 100% of CFP Grants for Operations

⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name:		Grant Type and Number				FFY of Grant:		
Manchester Housing and Redevelopment Authority		Capital Fund Program Grant No: NH36P00150109 Replacement Housing Factor Grant No: CFFP (Yes/No): No				2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
AMP 002 Kelley Falls	Roofing Replacement	1460	2 Bldg's	\$ 107,500		\$ 107,500	\$ 107,500	Completed
AMP 003 Scattered Sites	A & E Services for Rehabilitation	1430.1		\$ 64,061		\$ 43,660	\$ 12,217	In Progress
	Consulting/Testing Services Rehabilitation	1430.2		\$ 2,350		\$ 2,348	\$ 2,348	In Progress
	Interior Building Rehabilitation	1460	14 DU's	\$ 290,800		\$ 299,482	\$ 150,055	In Progress
AMP 005 Kalivas	Engineer for Generator Replacement Kalivas	1430.1		\$ 4,500		\$ 4,500	\$ 3,600	In Progress
HA-Wide Improvements	Engineer for Masonry Repairs	1430.1		\$ 20,000		\$ 20,000	\$ 14,750	In Progress
	Masonry Repairs	1460		\$ 141,528		\$ 141,528	\$ 75,567	In Progress
	Carbon Monoxide Detectors	1460	649 DU's	\$ 92,690		\$ 109,322	\$ 109,322	Completed
HA-Wide Management Improvements	Computer System Software & Support	1408		\$ 10,350		\$ 8,861	\$ 8,861	Completed
	Staff Professional Training	1408		\$ 3,620		\$ 3,621	\$ 3,621	Completed
	Security Systems Upgrades	1408		\$ 105,524		\$ 106,765	\$ 106,765	Completed
Administration	Non-Technical PHA Staff Salaries	1410.1		\$ 103,285		\$ 103,285	\$ 31,740	In Progress
	Non-Technical PHA Staff Benefits	1410.9		\$ 51,643		\$ 51,643	\$ 15,100	In Progress
	Legal Counsel Contract & Bid Reviews	1410.4		\$ 5,000		\$ 263	\$ 263	Completed
Fees and Costs	Project Inspector Salaries and Benefits	1430.7		\$ 255,421		\$ 255,421		
	Consultant PHA Physical Needs Assessment	1430.2		\$ 27,590		\$ 27,590	\$ 27,590	Completed
Non-Dwelling Equipment	Computer System Enhancement	1475.4		\$ 4,300		\$ 4,374	\$ 4,374	Completed
Operations	Operations Account	1406		\$ 322,540		\$ 322,540	\$ 322,540	Completed

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part I: Summary					
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant					
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Serve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 2)	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 3/31/2012		<input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 321,950	\$ 321,950	\$ 321,950	\$ 321,950
3	1408 Management Improvements	\$ 225,500	\$ 368,858	\$ 143,218	\$ 143,218
4	1410 Administration (may not exceed 10% of line 21)	\$ 155,928	\$ 155,678	\$ 155,376	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 272,440	\$ 244,065	\$ 223,474	\$ 12,034
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 541,954	\$ 462,053	\$ 270,652	\$ 102,891
11	1465.1 Dwelling Equipment - Nonexpendable	\$ 28,680	\$ 2,151		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 43,500	\$ 40,000	\$ 595	\$ 595
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 15,000	\$ 15,000	\$ 6,318	\$ 6,318
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Deposit				
19	1502 Contingency (may not exceed 8% of line 20)	\$ 4,803	\$ -		
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$ 1,609,755	\$ 1,609,755	\$ 1,121,583	\$ 587,006
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement

³ PHAs with under 250 units may use 100% of CFP Grants for Operations

⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150110 Replacement Housing Factor Grant No: CFFP (Yes/No): No				FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
AMP 003 Scattered Sites	A & E Services for Rehabilitation	1430.1		\$ 35,000	\$ 20,000	\$ 487	\$ 487	In Progress
	Consulting/Testing Services Rehabilitation	1430.2		\$ 3,000	\$ 1,500	\$ 794	\$ 794	In Progress
	Interior Building Rehabilitation	1460	3 DU's	\$ 85,200	\$ 65,000			
	Relocation Costs for Rehabilitation	1495.1	13 DU's	\$ 15,000	\$ 15,000	\$ 6,318	\$ 6,318	Ongoing
AMP 001 Elmwood Gardens	Window Repair / Replacement	1460		\$ 6,580	\$ 6,580	\$ 6,580	\$ 6,580	Completed
	Heat Convector / Piping Replacement	1460		\$ 20,000	\$ 11,037	\$ 11,037	\$ 11,037	Completed
AMP 002	Roofing Replacement	1460	1 Bldg.	\$ 65,000	\$ 19,762			
AMP 005 O'Malley Apartments	Heat Exchanger Replacement	1460		\$ 6,264	\$ 6,264	\$ 6,264	\$ 6,264	Completed
Kalivas Apartments	Emergency Generator Replacement	1460		\$ 60,000	\$ 118,000	\$ 108,911		In Progress
AMP 015 Gallen Apartments	Concrete Vault Repairs	1460		\$ 13,910	\$ 13,910	\$ 13,910	\$ 13,910	Completed
	Masonry Repairs	1460		\$ 10,000	\$ 3,000	\$ 2,600	\$ 2,600	In Progress
AMP 008 Burns Apartments	Masonry Repairs	1460		\$ 115,000	\$ 91,000			In Progress
HA-Wide Improvements	Appliance Replacement	1465.1	3 DU's	\$ 28,680	\$ 2,151			
	Accessibility Issues / Section 504 Activities	1460		\$ 10,000	\$ 1,500			
	Hazardous Mataerials Abatement	1460		\$ 30,000	\$ 68,000	\$ 65,750	\$ 62,500	Ongoing
	Engineer for Carbon Monoxide Detectors	1430.1		\$ 26,500	\$ 15,125	\$ 15,125	\$ 9,625	In Progress
	Carbon Monoxide Detectors	1460	519 DU's	\$ 120,000	\$ 58,000	\$ 55,600		In Progress
	Consultant Hazardous Materials	1430.2		\$ 2,000	\$ 1,500	\$ 1,128	\$ 1,128	Ongoing

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150110 Replacement Housing Factor Grant No: CFFP (Yes/No): No				FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
HA-Wide Management Improvements	Computer System Software & Support	1408		\$ 40,000	\$ 227,000	\$ 11,122	\$ 11,122	
	Staff Professional Training	1408		\$ 28,000	\$ 10,000	\$ 1,238	\$ 1,238	
	Community Policing Contract	1408		\$ 140,000	\$ 130,858	\$ 130,858	\$ 130,858	
	Newsletters & Operational Guides	1408		\$ 17,000	\$ 500			
	Archive Document Storage	1408		\$ 500	\$ 500			
Administration	Non-Technical PHA Staff Salaries	1410.1		\$ 103,285	\$ 103,285	\$ 103,285		
	Non-Technical PHA Staff Benefits	1410.9		\$ 51,643	\$ 51,643	\$ 51,643		
	Legal Counsel Contract & Bid Reviews	1410.4		\$ 1,000	\$ 750	\$ 448		
Fees and Costs	Project Inspector Salaries and Benefits	1430.7		\$ 205,940	\$ 205,940	\$ 205,940		
Non-Dwelling Equipment	Office Equipment & Furniture Replacement	1475.1		\$ 23,500	\$ 25,000			
	Computer System Enhancement	1475.4		\$ 20,000	\$ 15,000	\$ 595	\$ 595	
Operations	Operations Account	1406		\$ 321,950	\$ 321,950	\$ 321,950	\$ 321,950	
Contingency	Contingency Account	1502		\$ 4,803	\$ -			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Manchester Housing and Redevelopment Authority			FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Reveised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 003 Scattered Sites	6/30/2012		6/30/2014		
AMP 001 Elmwood	6/30/2012	12/31/2011	6/30/2014		
AMP 002 Kelley Falls	6/30/2012		6/30/2014		
AMP 005 O'Malley/Kalivas	6/30/2012	3/31/2012	6/30/2014		
AMP 015 Gallen	6/30/2012		6/30/2014		
AMP 008 Burns	6/30/2012		6/30/2014		
HA-Wide Management Improvements	6/30/2012		6/30/2014		
Administration	6/30/2012		6/30/2014		
Fess and Costs	6/30/2012		6/30/2014		
Non-Dwelling Equipment	6/30/2012		6/30/2014		

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

Part I: Summary					
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150111 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval: 2011	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Serve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending 3/31/2012 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 276,356		\$ 276,356	
3	1408 Management Improvements	\$ 173,000		\$ 130,858	\$ 32,715
4	1410 Administration (may not exceed 10% of line 21)	\$ 138,178		\$ 137,178	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 312,817		\$ 210,317	
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 15,000			
10	1460 Dwelling Structures	\$ 449,000		\$ 26,295	\$ 24,195
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$ 12,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs	\$ 1,500			
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18b	9000 Collateralization or Debt Service paid Via System of Direct Deposit				
19	1502 Contingency (may not exceed 8% of line 20)	\$ 3,929			
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$ 1,381,780	\$ -	\$ 781,004	\$ 56,910
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement

³ PHAs with under 250 units may use 100% of CFP Grants for Operations

⁴ RHF funds shall be included here

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150111 Replacement Housing Factor Grant No: CFPP (Yes/No): No				FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
AMP 001 Elmwood Gardens	Exterior Trim & Siding Replacement / Paint	1460	10 Bldg's	\$ 15,000				
	Window Repair / Replacement	1460		\$ 5,000				
	Shed Demolition / Replacement	1460		\$ 30,000				
	Heat Convector / Piping Replacement	1460		\$ 20,000		\$ 5,520	\$ 3,420	
AMP 002 Kelley Falls	Roofing Replacement	1460	1 Bldg.	\$ 45,000				
	A & E Services Community Center	1430.1		\$ 60,000				
	Engineer Repair / Replace Stairways	1430.1		\$ 2,000				
	Repair / Replace Stairways	1460	17 Bldg's	\$ 40,000				
AMP 003 Scattered Sites	A & E Services for Rehabilitation	1430.1		\$ 3,000				
	Consulting/Testing Services Rehabilitation	1430.2		\$ 1,500				
	Interior Building Rehabilitation	1460	4 DU's	\$ 100,000				
	Relocation Costs for Rehabilitation	1495.1	4 DU's	\$ 1,500				
AMP 005 O'Malley Apartments	Paint Public Spaces	1460		\$ 4,000				
	Replace Ceiling Tiles Public Spaces	1460		\$ 5,000				
AMP 008 Burns Apartments	Masonry Repairs	1460		\$ 20,000				
	Parking Lot Restoration	1450		\$ 15,000				
AMP 015 Gallen Apartments	A & E for Window Replacement	1430.1		\$ 15,000				
	Window Replacement	1460	95 DU's	\$ 140,000				
HA-Wide Improvements	Consultant for Hazardous Materials Abatement	1430.2		\$ 1,000				
	Hazardous Mataerials Abatement	1460		\$ 15,000		\$ 20,775	\$ 20,775	
	Accessibility Issues / Section 504 Activities	1460		\$ 10,000				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part II: Supporting Pages								
PHA Name: Manchester Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: NH36P00150111 Replacement Housing Factor Grant No: CFPP (Yes/No): No				FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised 1	Funds Obligated 2	Funds Expended 2	
Central Office Cost Center	Engineer HVAC System Replacement	1430.1		\$ 20,000				
HA-Wide Management Improvements	Computer System Software & Support	1408		\$ 30,000				
	Staff Professional Training	1408		\$ 1,500				
	Commnity Policing Contract	1408		\$ 140,000		\$ 130,858	\$ 32,715	
	Resident Initiatives and Training	1408		\$ 500				
	Newsletters & Operational Guides	1408		\$ 500				
	Archive Document Storage	1408		\$ 500				
Administration	Non-Technical PHA Staff Salaries	1410.1		\$ 91,591		\$ 91,591		
	Non-Technical PHA Staff Benefits	1410.9		\$ 45,587		\$ 45,587		
	Legal Counsel Contract & Bid Reviews	1410.4		\$ 1,000				
Fees and Costs	Project Inspector Salaries and Benefits	1430.7		\$ 210,317		\$ 210,317		
Non-Dwelling Equipment	Office Equipment & Furniture Replacement	1475.1		\$ 2,000				
	Computer System Enhancement	1475.4		\$ 10,000				
Operations	Operations Account	1406		\$ 276,356		\$ 276,356		
Contingency	Contingency Account	1502		\$ 3,929				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement

² To be completed for the Performance and Evaluation Report

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Manchester Housing and Redevelopment Authority			FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Reveised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMP 001 Elmwood Gardens	6/30/2013		6/30/2015		
AMP 002 Kelley Falls	6/30/2013		6/30/2015		
AMP 003 Scattered Sites	6/30/2013		6/30/2015		
AMP 005 O'Malley Apartments	6/30/2013		6/30/2015		
AMP 008 Burns Apartments	6/30/2013		6/30/2015		
HA-Wide Management Improvements	6/30/2013		6/30/2015		
Administration	6/30/2013		6/30/2015		
Fess and Costs	6/30/2013		6/30/2015		
Non-Dwelling Equipment	6/30/2013		6/30/2015		

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

**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 X 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 10/1/12 hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Manchester Housing and Redevelopment
Authority

NH001

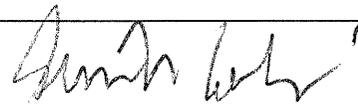
PHA Name

PHA Number/HA Code

_____ 5-Year PHA Plan for Fiscal Years 20____ - 20_____

 x Annual PHA Plan for Fiscal Years 20 13 - 20 14

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 George N. Copadis	Title Chair
Signature 	Date 7-12-12

DISCLOSURE OF LOBBYING ACTIVITIES

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

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c1st NH	5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:	
6. Federal Department/Agency: U.S. Department of Housing and Urban Development	7. Federal Program Name/Description: Capital Fund Program Grant CFDA Number, if applicable: _____	
8. Federal Action Number, if known:	9. Award Amount, if known: \$	
10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i>	b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i> <div style="text-align: center; font-size: 2em; font-family: cursive;">  </div>	
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature: <u></u> Print Name: <u>George N. Copadis</u> Title: <u>Chair</u> Telephone No.: <u>(603)624-2100</u> Date: <u>7-12-12</u>	
Federal Use Only:		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

Certification of Payments to Influence Federal Transactions

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

Applicant Name

Manchester Housing and Redevelopment Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Grant Program

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

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

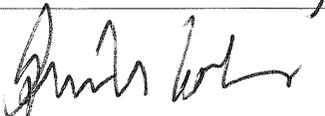
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this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

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

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

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

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

Name of Authorized Official George N. Copadis	Title Chair
Signature 	Date (mm/dd/yyyy) 7-12-12

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Manchester Housing and Redevelopment Authority

Program/Activity Receiving Federal Grant Funding

Capital Fund Program Grant

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 Federalagency 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.)

198 Hanover Street
Manchester, NH 03104

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 George N. Copadis	Title Chair
Signature 	Date 7-12-12

Civil Rights Certification

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

Civil Rights Certification

Annual Certification and Board Resolution

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

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

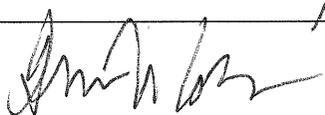
Manchester Housing and Redevelopment Authority

NH001

PHA Name

PHA Number/HA Code

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

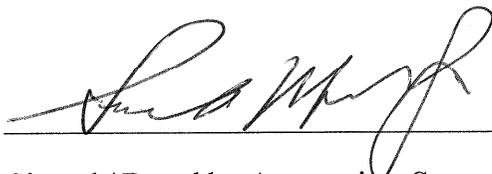
Name of Authorized Official	George N. Copadis	Title	Chair
Signature		Date	7-12-12

**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, Samuel Maranto the Manager of Community Improvement certify that the Five Year and Annual PHA Plan of the Manchester Housing and Redevelopment Authority is consistent with the Consolidated Plan of the City of Manchester, NH prepared pursuant to 24 CFR Part 91.

 7/2/12

Signed / Dated by Appropriate State or Local Official

MANCHESTER HOUSING AND REDEVELOPMENT AUTHORITY

RESIDENT ADVISORY BOARD MEETING

JULY 10, 2012

In Attendance:

Michele Desmond, MHRA Policy and Compliance Officer
Bert Davis, MHRA Housing Operations Director
Michael DiSabato, Deputy Housing Operations Director
Bonnie Badolati, Leased Housing Manager
Ed Russell, Public Housing Resident
Marion Russell, Public Housing Resident
Robin Harrell, Section 8 HCV Resident
William Diener, Section 8 HCV (Homeownership Program) Resident
Alicia Parker, Public Housing Resident
Zainab Kanu, Public Housing Resident
Alie Kanu, Public Housing Resident

Marion Russell and Ed Russell stated that they were happy that work on the heating system at the Gallen Highrise had been included as part of the Capital Fund submission. They said they hoped that the work would be completed before winter.

Alicia Parker, Zainab Kanu and Alie Kanu stated that there are many unsupervised children at the Elmwood Gardens development. They said that there is not a problem with teenagers, but that very small children were allowed to wander around the neighborhood with no adults present. They indicated that it appeared to be a parenting issue.

Zainab Kanu said that speeding cars at Elmwood Gardens is also an issue and that young drivers go way too fast on the city streets and she is concerned for small children who may be out in the road.

William Diener said that all appears to be going well with MHRA's Section 8 Housing Choice Voucher Program and that he's had no issues during the year.

Robin Harrell thanked MHRA staff for their intervention in a problem she had had with her landlord and stated that relations between the tenants in her building and the landlord had improved tremendously since MHRA staff got involved.

Michele Desmond asked those in attendance if there was anything that should be included in the Annual Plan and/or Capital Fund request that had not been included and the group answered that there was nothing they could think of. She asked if anything needed to be taken out of the Plan/Request and they again answered that they did not think that there was.

Meeting adjourned at 6:15 p.m.