

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**

1.0	PHA Information PHA Name: <u>BURLINGTON HOUSING AUTHORITY</u> PHA Code: <u>VT001</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>07/2012</u>																														
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>343</u> Number of HCV units: <u>1829</u>																														
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" 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.)																														
	<table border="1"> <thead> <tr> <th rowspan="2">Participating PHAs</th> <th rowspan="2">PHA Code</th> <th rowspan="2">Program(s) Included in the Consortia</th> <th rowspan="2">Programs Not in the Consortia</th> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> </thead> <tbody> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:									
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																							
		PH	HCV																												
PHA 1:																															
PHA 2:																															
PHA 3:																															
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:																														
5.2	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.																														
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: No Plan elements have been revised. (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 of the Five Year and Annual PHA Plan, together with supporting documents, are available at the Burlington Housing Authority's central office located at 65 Main Street, Burlington, Vermont 05401.																														
7.0	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> 1. BHA is exploring a land sale, or a land swap, of a small parcel of land at Hillside Terrace Apartments in order to facilitate the development of new housing units on adjacent, privately owned, parcels of land. The small parcel, which may be conveyed, subject to HUD approval, is of no use or value to BHA or the residents. Any proceeds will be used for capital improvements benefiting the residents. 2. BHA operates a Section 8 Homeownership (Mortgage Assistance Program) and a Project-based Voucher Program. Information on the policies and procedures for these programs is contained in the Administrative Plan for the Section 8 Housing Choice Voucher program. BHA may issue an RFP for additional project-based vouchers during FY2013.																														
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. Our Capital Fund Program Annual Statement and Performance and Evaluation Reports for open grants are attached.																														

8.2	<p>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.</p> <p>Our Capital Fund Program Five-Year Action Plan is attached.</p>
8.3	<p>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.</p>
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>With the recession, the housing needs of low income individuals and families in Chittenden County are growing. The BHA waiting list has grown from an average of 1,000 in prior years to a high of over 2000. The vacancy rate in the Burlington area remains at or around 1%, while rent inflation continues at an average annual rate of 4.25%. The market has experienced a switch in demand from owner-occupied housing to rental. Based on our waiting lists, the greatest housing need is affordable housing for extremely low income households, who represent 77% of the waiting list. Within this income group, the greatest need is experienced by families with a disabled individual, representing 53% of the waiting list. Programs that are endeavoring to address homelessness and housing retention identify a priority need for additional transitional and service enriched housing, which combines affordability with appropriate support services. The limited amount of new rental housing being developed by the for-profit sector and non-profit organizations is not affordable to extremely low income households. Therefore, the greatest identified housing need in the City of Burlington is additional rental assistance resources.</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>In FY2013, to partially address the unmet needs of the households on our waiting list, we intend to: (1) apply to the U.S. Department of Housing and Urban Development for additional rental assistance, if and when Notices of Funding availability are published; (2) encourage the State of Vermont to provide additional financial assistance for short-term rental assistance for homeless households or households at risk of homelessness, until a Section 8 voucher is available; and (3) continue to develop new transitional, service-enriched housing.</p>

Additional Information. Describe the following, as well as any additional information HUD has requested.

(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.

During FY2012, BHA made the following progress in meeting the goals described in the 5-Year Plan:

- 1. Maintained its status as a "High Performer" for the Section 8 program.**
- 2. Successfully applied for 50 additional vouchers under the Family Unification Program**
- 3. Continued development of a number of supportive, transitional housing projects.**
- 4. Expanded its partnerships for persons with disabilities, homeless households, and offenders returning to the community.**
- 5. Initiated a housing retention and rapid rehousing initiative.**
- 6. Acquired and preserved 37 units of affordable apartments with Section 8 project-based assistance.**
- 7. Initiated the Support & Services at Home (SASH)**

(b) **Significant Amendment and Substantial Deviation/Modification.** Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

Substantial Deviation from the 5-Year/Annual Plan

The Burlington Housing Authority will consider the following to be significant amendments or modifications to the 5-year plan and annual plan for the purposes of submitting a revised plan and meeting full public process requirements:

- 1. Changes to admission policies.**
- 2. Changes to the organization of the waiting list.**

(An exception may be made for any of the above definitions that are adopted by the Burlington Housing Authority in response to changes in HUD regulatory requirements.)

10.0

Significant Amendment or Modification to the 5-Year/Annual Plan

The Burlington Housing Authority will consider the following definition to be significant deviations to the 5-year plan and annual plan for the purposes of submitting a revised plan and meeting full public process requirements:

- 1. Changes to the Burlington Housing Authority's overall mission.**
- 2. Substantive changes to BHA goals and objectives.**

(An exception may be made for any of the above definitions that are adopted by the Burlington Housing Authority in response to changes in HUD regulatory requirements.)

(c) **VAWA Statement**

The Burlington Housing Authority has modified its Public Housing Admissions and Continued Occupancy Policy, Section 8 Housing Choice Voucher Administrative Plan, Applications and Leases to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA). BHA is committed to appropriately serving the needs of child and adult victims of domestic violence, dating violence and stalking, in conformance with the requirements of VAWA

All public housing residents, Section 8 program participants and landlords participating in the Section 8 Housing Choice Voucher program have been notified of their rights and obligations under VAWA.

In addition, the Burlington Housing Authority has partnered with Women Helping Battered Women and the Vermont Agency of Human Services (WHBW) to serve victims of domestic violence through a number of initiatives: (1) Sophie's Place, an 11 unit service-enriched housing developments for victims of domestic violence; (2) the Family Unification Program, and (3) the "Fast Track" Program.

(d) **Resident Advisory Board Comments**

The Resident Advisory Board reviewed and approved the Annual Plan on March 13, 2012.

- 11.0** **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.
- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations* (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, *Certification for a Drug-Free Workplace* (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions* (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, *Disclosure of Lobbying Activities* (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet* (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. 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.
 - (g) Challenged Elements
 - (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report* (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan* (PHAs receiving CFP grants only)

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

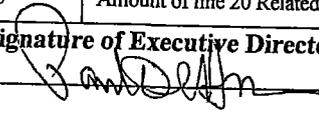
U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary						
PHA Name: Burlington Housing Authority		Grant Type and Number Capital Fund Program Grant No: VT.36P001501-12 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"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	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					
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)	\$38,811				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs	\$2,308				
8	1440 Site Acquisition					
9	1450 Site Improvement	\$109,000				
10	1460 Dwelling Structures	\$180,000				
11	1465.1 Dwelling Equipment—Nonexpendable	\$58,000				
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 ⁴					

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 in management may use 100% of CFP Grants for operations.
⁴ 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
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Part I: Summary						
PHA Name: Burlington Housing Authority		Grant Type and Number Capital Fund Program Grant No: VT.36P001501-12 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"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report						
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$388,119				
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		
		2/24/2012				

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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 in management may use 100% of CFP Grants for operations.
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Part II: Supporting Pages

PHA Name: Burlington Housing Authority

Grant Type and Number
 Capital Fund Program Grant No: VT.36P001501-12
 CFFP (Yes/ No): No
 Replacement Housing Factor Grant No:

Federal 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	Administration	1410	1	\$38,811				
HA-Wide	A&E Fee	1430	1	\$2,308				
VT 00100000 2								
Riverside Ave.	Sidewalk Repairs	1450	2	\$18,000				
	Parking Lot Re-Surfacing	1450	1	\$60,000				
	Exterior Painting	1460	13	\$30,000				
VT 00100000 1								
No Champlain St.	Parking Lot Re-Surfacing	1450	1	\$15,000				
VT 00100000 2								
Franklin Square	Parking Area Re-Surfacing	1450	1	\$16,000				
	Weatherization Phase II	1460	60	\$40,000				
	Appliances	1465	61	\$36,000				

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 I: Summary						
PHA Name/Number Burlington VT001		Locality (City/County & State) Burlington, Chittenden, Vermont			<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	\$349,308	\$349,308	\$349,308	\$349,308
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration		\$38,811	\$38,811	\$38,811	\$38,811
F.	Other					
G.	Operations					
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds					
L.	Total Non-CFP Funds					
M.	Grand Total		\$388,119	\$388,119	\$388,119	\$388,119

Part I: Summary (Continuation)						
PHA Name/Number Burlington VT001			Locality (City/county & State) Burlington, Chittenden, Vermont		<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
	VT001000002 Riverside Avenue	Annual Statement	\$75,000	\$0	\$18,000	\$0
	VT001000001 10 N. Champlain St.		\$0	\$0	\$80,000	\$0
	VT001000002 Franklin Square		\$142,300	\$217,300	\$110,000	\$110,000
	VT001000001 230 St. Paul St.		\$132,000	\$132,000	\$132,000	\$132,000
	VT001000002 Hillside Terrace		\$0	\$0	\$9,300	\$107,000

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

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

Part I: Summary		
PHA Name: BURLINGTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: VT-36P001501-10 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"/> Reserve for Disasters/Emergencies	<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/7/2012		<input checked="" type="checkbox"/> Final Performance and Evaluation Report

Line	Summary by Development Account	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				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$51,104	\$51,104	\$51,104	\$51,104
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$459,942	\$459,942	\$459,942	\$459,942
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 ⁴				

¹ To be completed for the Performance and Evaluation Report.

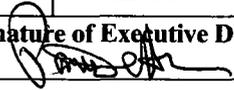
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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

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

Part I: Summary						
PHA Name: BURLINGTON HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: VT-36P001501-10 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"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 3)		
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/7/2012				<input checked="" type="checkbox"/> Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹		
		Original	Revised ²	Obligated	Expended	
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$511,046	\$511,046	\$511,046	\$511,046	
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 3/21/12		Signature of Public Housing Director Date	

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
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Part II: Supporting Pages								
PHA Name: BURLINGTON HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: VT-36P001501-10 CFFP (Yes/ No): No Replacement Housing Factor Grant 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		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide	Administration	1410	1	\$51,104	\$51,104	\$51,104	\$51,104	Complete
VT001000002-Riverside Avenue	Siding Replacement	1460	13	42,477.46	\$42,477.46	\$42,477.46	42,477.46	Complete
VT001000001-No. Champlain Street				-0-				
VT001000002-Franklin Square				-0-				
VT001000001-230 St. Paul Street	Exterior Stucco Refinishing & Window Replacement	1460	1	\$459,942	\$417,464.54	\$417,464.54	\$417,464.54	Complete
VT001000002-Hillside Terrace				-0-				
TOTAL				\$511,046	\$511,046	\$511,046	\$511,046	Complete

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expire 8/31/2011

Part I: Summary

PHA Name: BURLINGTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: VT36P001501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval: 2011
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Type of Grant

Original Annual Statement
 Reserve for Disaster/Emergencies
 Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending: 02/29/2012
 Final Performance and Evaluation Report

Line	Summary by Development	Time 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				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$ 43,815.00	\$ 43,815.00	\$ 43,815.00	\$ 29,209.84
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 7,500.00	\$ 7,500.00	\$ 1,742.00	\$ 1,742.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 351,642.00	\$ 351,642.00		
11	1465.1 Dwelling Equipment- Nonexpendable	\$ 35,200.00	\$ 35,200.00		
12	1470 Non-dwelling structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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 Expires 8/31/2011

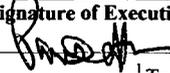
Part I: Summary

PHA Name: BURLINGTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: VT36P001501-11 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant: 2011 FFY of Grant Approval: 2011
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Type of Grant

Original Annual Statement
 Reserve for Disasters/Emergencies
 Revised Annual Statement (revision no: 2)
 Performance and Evaluation Report for Period Ending: 02/29/2012
 Final Performance and Evaluation Report

Line	Summary by Development Account	Time Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service Paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2-19)	\$ 438,157.00	\$ 438,157.00	\$ 45,557.00	\$ 30,951.84
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 3/29/12	Signature of Public Housing Director	Date
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⁴ PHF funds shall be included here.

Part II: Supporting Pages

PHA Name: BURLINGTON HOUSING AUTHORITY	Grant Type and Number Capital Fund Program Grant No: VT36P001501-11 CFFP (Yes/No): No Replacement Housing Factor Grant No:	Federal FFY of Grant: 2011
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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	Administration	1410	1	\$ 43,815.00	\$ 43,815.00	\$ 43,815.00	\$ 29,209.84	In Progress
HA - WIDE	A&E Fees	1430	1	\$ 7,500.00	\$ 7,500.00	\$ 1,742.00	\$ 1,742.00	In Progress
VT001000002 - Riverside Ave	Appliances	1465	24	\$ 13,200.00	\$ 13,200.00	\$ -	\$ -	Identifying Replacements
VT001000001 - 10 No. Champlain St.	Elevator Upgrades	1460	1	\$ 45,000.00	\$ 45,000.00	\$ -	\$ -	Preparing to Bid
VT001000002 - Franklin Square	Weatherization	1460	7	\$ 30,000.00	\$ 30,000.00	\$ -	\$ -	Eval. Scope of Work
	Bathroom Exhaust	1460	60	\$ 50,000.00	\$ 50,000.00	\$ -	\$ -	Eval. Scope of Work
	Appliances	1465	40	\$ 22,000.00	\$ 22,000.00	\$ -	\$ -	Identifying Replacements
VT001000001 - 230 St. Paul St.	Elevator Upgrades	1460	2	\$ 182,000.00	\$ 182,000.00	\$ -	\$ -	Preparing to Bid
	Circulation System	1460	1	\$ -	\$ -	\$ -	\$ -	Removed
VT001000002 - Hillside Terrace	Bathroom Exhaust	1460	26	\$ 25,000.00	\$ 25,000.00	\$ -	\$ -	Eval. Scope of Work
	Weatherization	1460	26	\$ 19,642.00	\$ 19,642.00	\$ -	\$ -	Eval. Scope of Work

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.