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 Fiscal Year Beginning: (MM/YYYY):		☐ Standard	PHA (HCV (Section 8)	Code: NH014	ı
2.0	Inventory (based on ACC units at time of FY Number of PH units: 107	Y beginning i	n 1.0 above) Number of HCV	units: 169		
3.0	Submission Type	Annual F	Plan Only	5-Year Plan Only		
4.0	PHA Consortia	HA Consortia	a: (Check box if submitting a join	nt Plan and complete table bel	low.)	
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Unit Program PH	ts in Each HCV
	PHA 1:				111	ne v
	PHA 2: PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 on	ly at 5-Year I	Plan update.			1
05.1	Mission. State the PHA's Mission for servin jurisdiction for the next five years: The Exet options and opportunities for the residents	er Housing A s of Exeter	Authority is committed to exce	llence in offering quality, af	fordable, safe	housing
5.2	Goals and Objectives. Identify the PHA's of low-income, and extremely low-income familiand objectives described in the previous 5-Ye housing by continuing to improve PH Mar Improve Voucher Management (SEMAP Continuing to concentrate our efforts to in Renovate or modernize public housing unit PHA Strategic Goal. Continue to undertain national origin, sex, familial status and dis Continue to undertake affirmative measurace, color, religion, national origin, sex, fa Continue to undertake affirmative measurace.	lies for the near Plan. The nagement (Pl Score) 95+ nprove specits. ke affirmativability. res to providamilial status	ext five years. Include a report of Exeter Housing Authority Pu HAS Score) 95+. fic management functions (list we measures to ensure access to le a suitable living environments and disability.	on the progress the PHA has reblic Housing Goal is to impose te.g., public housing finance to assisted housing regardless at for families living in assist	nade in meeting rove the qualit , voucher unit s of race, color ed housing reg	g the goals y of assisted inspections). , religion, gardless of
6.0	(a) Identify all PHA Plan elements that have Revised ACOP Policy Revised Section 8 Administrative Plan Revised Procurement Policy 1. Rent Determination. Minimum rent for 2. Termination Policy: VAWA Protections Confidentiality clause for above has been a (b) Identify the specific location(s) where the elements, see Section 6.0 of the instructions. The 5 year plan (2010/2015) and the Annu Street, Exeter NH. 03833. Office hours	Public Hous, and Verifice added. e public may al Plan for 2	sing has been raised to \$50.00 cations of Domestic Violence, I obtain copies of the 5-Year and 010/2011 are on display at the	Dating Violence or Stalking parting Number 1985 Annual PHA Plan. For a con	nplete list of PF	IA Plan
7.0	Hope VI, Mixed Finance Modernization of				lousing, Home	ownership
8.0	Programs, and Project-based Vouchers. In N/A Capital Improvements. Please complete Pa		1 0	as applicable.		
0.0			, 11			
8.1	Capital Fund Program Annual Statement/complete and submit the <i>Capital Fund Progr</i> open CFP grant and CFFP financing.					

- Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund 8.2 Program Five-Year Action Plan, 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. Capital Fund Financing Program (CFFP). 8.3 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. N/A 9.0 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. 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. Employ effective maintenance and management policies to minimize the number of public housing units off-line Participate in the Consolidated Plan development process to ensure coordination with broader community strategies 9.1 Reduce time to renovate public housing units Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program Reduce turnover time for vacated public housing units 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. Latest FHAS scores have been over 95% and the latest SEMAP scores are over 98%. We have concentrated our efforts to improve all management functions ass well as modernizing PH units, professionally making HQS inspections as well as offering advice to landlords on improving their units. We feel this professional advice and follow-up has drastically raised the standards of the Section 8 unit offerings in the area. 10.0 We have continued to aggressively undertake affirmative measures to insure access to assisted housing regardless of race, color, religion, national origin, sex, familial status and disability. The EHA has continued to undertake affirmative measures to insure accessible housing with all varieties of disabilities regardless of unit size required. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" Definition - Substantial Deviations or Significant amendments or modifications are defined as discretionary changes in plans or policies of the Exeter Housing Authority that fundamentally change the missions, goals, objectives, or plans of the
- 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)

agency and which require formal approval of the Board of Commissioners.

- (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)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

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

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
 - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
 - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
 - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
 - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
 - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
 - (a) To submit the initial budget for a new grant or CFFP;
 - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
 - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

- portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
- $\underline{http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm}$
- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
 - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments.
 - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

Par	t I: Summary					
	Name/Number Exeter Hous	ing Authority	Locality	Exeter, NH	⊠Original 5-Year Plan ☐	Revision No:
NH0	014					
A.	Development Number and Name	Work Statement for Year 1 FFY _2110	Work Statement for Year 2 FFY _2112	Work Statement for Year 3 FFY2113	Work Statement for Year 4 FFY2114	Work Statement for Year 5 FFY
B.	Physical Improvements Subtotal	Annual Statement	122,722	93947	132178	220,213
C.	Management Improvements		1000	1000	1000	1000
D.	PHA-Wide Non-dwelling Structures and Equipment		1850	30,000.	564	
E.	Administration		1000	1000	1000	
F.	Other					
G.	Operations		35000	35000	35000	35000
H.	Demolition					
I.	Development					
J.	Capital Fund Financing –					
	Debt Service					
K.	Total CFP Funds		161,572	160 947.	169,742.	265,213.
L.	Total Non-CFP Funds					
M.	Grand Total					

Part	I: Summary (Continua	tion)				
Exet	er Housing Authority NH014		Locality Exeter,	Rockingham, NH	⊠Original 5-Year Plan	Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY	Work Statement for Year 2 FFY2012	Work Statement for Year 3 FFY	Work Statement for Year 4 FFY	Work Statement for Year 5 FFY
		Annual Statement				
	Linden Fields NH014-002		Physical Improvements 14,637	Physical Improvements	Physical Improvements	Physical Improvements
	Water Street NH014-003		Physical improvements 94,520	Physical Improvements	Physical Improvements	Physical Improvements
	PA/Auburn NH014-004		physical improvements 15,465	Physical Improvements	Physical Improvements	Physical Improvements
	PHA Wide		Operations 35000	Operations 35000	Operations 35000	Operations 35000

Operations 35000

Work	Work Sta	tement for Year2012		Work Sta	tement for Year:2013_	
Statement for		FFY			FFY	
Year 1 FFY	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	NH003- Water Street	Repair exterior stucco	30000	NH003 Water Street	Computers	3000
Annual		Replace smoke detect	1520		Refrigerators	30000
Statement		Replace Cabinets	30000		Replace Cabinets Paint units Replace carpet landscaping	30000 1000 1000 1000
	NH003	Replace carpets	1000	NH0092 Linden Fields	Storage sheds	1500
		Paint units landscaping	1000 1000		Counter top & sink	550
	NH002- Linden Fields	Bath accessories	432		Bath access	432
		Bath Fixtures	495		Bath fixtures	495
		Kitchen range	910		Kit range	910
		Electric Baseboard	9000		Counter top & cabinets	4100
		Sanitary waste & vent	2800		Heat strips	3000
	NH004 – PA/Auburn	PA- Bath Fix	330		Vent fans	2800
		Tubs	3600		ranges	8178
		ranges	1800	NH004 PA/Auburn	ranges	3822
		baseboards	9335		fence	849
		Vent fans	400		floors	2961
					Hot water heater	350
	PHA Wide	Operations	35000	PHA Wide	Operations	35000
		Mgt improvements	1000		Mgt improvements	1000
		admin	1000		admin	1000
	NH003-Water Street	Carpet tile & paint Front hallway & Office	30000		Fees & Costs truck	1000 30000
	Sub	ototal of Estimated Cost	\$ 160,622	Sut	ototal of Estimated Cost	\$163,947

Work	porting Pages – Physi Work Sta	atement for Year2014		Work Sta	tement for Year:2015	
Statement for	VV OTR BU	FFY		Work Sta	FFY	
Year 1 FFY	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	NH003- Water Street	Stairs 3 Scrape & Paint	6000	NH003	Paint gazebo	4000
Annual		HWH - 2	2300		Common are carpet	49215
Statement		ranges	38000		Bath fixtures	14500
		Replace carpets Landscaping	1000 1000		Thermostats Carpets Landscaping Paint Remediate waste pipes	15000 1000 1000 1000 1000
		Paint units	1000	Nh002	Vinyl Siding	80000
		refrigerators	30000		Walls ext	1080
	NH002 Linden Fields	Bath access	432		windows	30000
		Bath fix	485		ceilings	907
		ranges	910		Walls common areas	1176
		tub	1450		bath	432
		Vents	2600		Tub	495
		windows	30000		Smoke det	300
	NH004 PA/ Auburn	Parking lot	564		Range & range Hood	910
		Heat strips	7001		Liv room vinyl	3718
					Counter top	550
	PHA Wide	Operations	35000	NH004 PA/Auburn	Vents	2600
		Mgt improvements	1000	Auburn	Replace sump pump	1330
		admin	1000		Operations	35000
		Fees & Costs	1000		Seal & stripe pl	10000
				NH003 Water Street	Add Circuits emergency generator	10000
	Sub	total of Estimated Cost	\$ 160,742	Sul	ototal of Estimated Cost	\$ 265,213

Page 4 of 6

Part III: Su	porting Pages – Mai	nagement Needs Worl	k Statement(s)			
Work		tement for Year2012_		Wor	k Statement for Year:2013	
Statement for		FFY			FFY	
Year 1 FFY	Development	Number/Name	Estimated Cost	Developr	nent Number/Name	Estimated Cost
		Major Work Categories			on of Major Work Categories	
See	Water street NH003	Repair exterior stucco	30000	Water Street NH	003Computers	3000
Annual		Replace smoke detect	1520		Refrigerators	30000
Statement		Replace Cabinets	30000		Replace Cabinets	30000
					Paint units	1000
					Replace carpet	1000
					landscaping	1000
		Replace carpets	1000	Linden Fields NH002	2 Storage sheds	1500
		Paint units	1000		Counter top & sink	550
		landscaping	1000			
	Linden Fields NH002	Bath accessories	432		Bath access	432
		Bath Fixtures	495		Bath fixtures	495
		Kitchen range	910		Kit range	910
		Electric Baseboard	9000		Counter top & cabinets	4100
		Sanitary waste & vent	2800		Heat strips	3000
	Auburn NH004	Bath Fix	330		Vent fans	2800
		Tubs	3600		ranges	8178
		ranges	1800	PA/Auburn NH004	ranges	3822
		baseboards	9335		fence	849
		Vent fans	400		floors	2961
					Hot water heater	350
	PHA-Wide	Operations	35000	PHA Wide	Operations	35000
		Mgt improvements	1000		Mgt improvements	1000
		admin	1000		admin	1000
	Carpet tile & pair	nt Front hallway & Office	30000		Fees & Costs	1000
					truck	30000
	Su	btotal of Estimated Cost	\$ 160,622		Subtotal of Estimated Cost	\$163,947

Page 5 of 6

Work	Work	Statement for Year2014		V	Work Statement for Year:2015	
Statement for		FFY			FFY	
Year 1 FFY	Developn	nent Number/Name	Estimated Cost	Devel	opment Number/Name	Estimated Cost
	General Description	on of Major Work Categories			ption of Major Work Categories	
See	Water Street NH003	Stairs 3 Scrape & Paint	6000	Water Street NH0	003 Paint gazebo	4000
Annual		HWH - 2	2300		Common are carpet	49215
Statement		ranges	38000		Bath fixtures	14500
		Replace carpets	1000		Thermostats	15000
		Landscaping	1000		Carpets	1000
					Landscaping	1000
					Paint	1000
					Remediate waste pipes	1000
		Paint units	1000		Vinyl Siding	80000
		refrigerators	30000		Walls ext	1080
	Linden Fields NH003	Bath access	432	Linden Fields NH	002 windows	30000
		Bath fix	485		ceilings	907
		ranges	910		Walls common areas	1176
		tub	1450		bath	432
		Vents	2600		Tub	495
		windows	30000		Smoke det	300
	PA/Auburn NH004	Parking lot	564		Range & range Hood	910
		Heat strips	7001		Living room vinyl	3718
		-			Counter top	550
	PHA Wide	Operations	35000	PA/Auburn NH00	04 Vents	2600
		Mgt improvements	1000		Replace sump pump	1330
		admin	1000	PHA Wide	Operations	35000
		Fees & Costs	1000		Seal & stripe pl	10000
				Ad	ld Circuits emergency generator	10000
		Subtotal of Estimated Cost	\$ 160,742		Subtotal of Estimated Cost	\$ 265,213

Expires 4/30/2011

Capital Fund Operation Capital Foot Replacement Housing Factor Grant No. Replacement Housing Factor Grant No. Date of CFFP. Total Estimated Cost Account Total Estimated Cost Dobigated Total Estimated Cost Dobigated Dobigated Dobigated D	Para II Summur Para Name Deter	Housing Authority					FFY of Grant: 2010/2011	
of Grant Annual Statement Distance and Evaluation Report for Period Endings Prinal Estimation Report for Period Endings Prinal Period Endings Prinal Period Endings Prinal Period Endings Prinal Estimation Report for Period Endings Prinal P	Frate er NF	NH014	If Type and Number al Fund Program Grant No: NH36P014 teement Housing Factor Grant No: of CFFP:	50110			FFY of Grant Approval: 2011	ĝi.
Summary by Development Account Total Estimated Cost Total Included Total non-CFP Funds 35000 35000 1406 Operations (may not exceed 20% of line 21) * 35000 1000 1410 Administration (may not exceed 10% of line 21) * 1000 1000 1411 Audit 1410 Administration (may not exceed 10% of line 21) * 1000 1000 1411 Audit 1415 Liquidated Danages 1000 1000 1000 1440 Site and Costs 1430 Rec and Costs 1000 1000 1000 1440 Site Acquisition 1450 Site Inprovement 9840 41840 1850 1450 Site Inprovement 25710 1850 1850 1850 1450 Mon-dwelling Equipment 25710 1850 1850 1850 1455 Moving to Work Demonstration 1495.1 Relexation Costs 1495.1 Relexation Costs 1495.1 Relexation Costs 1495.1 Relexation Costs	e of G Origin Perfor	Repor	rve for Disasters/Emergencies		Revised Annual Statement Final Performance and Ev	(revision no:2)		
of line 21) 3 35000 35000 1000 1000 1000 1000 1000		Summary by Development Account			Total Estimated Cost	* 10.50	Total Actual Cost 1	
riot exceed 20% of line 21) 3 5000 35000 may not exceed 10% of line 21) 1000 1000 1000 may not exceed 10% of line 21) 1000 1000 1000 1000 1000 1000 1000	- Comment of the Comm	errornist verminn erstelskinne vallansse vallansse stateste og gregorise og dyregesterrornismen fraktiskensken		Original	Revised ²	Obligated	Expended	
21). ³ 35000 1000 1000 1000 1000 159350 25710	minde photography and the state of the state	Total non-CFP Funds	THE				•	
1000 1000 1000 1000 15900 15900 25710		1406 Operations (may not exceed 209	% of line 21) ³	35000	35000			
ine 21) 1000 1000 1000 59350 59350 15900 25710		1408 Management Improvements		1000	1000	The state of the s		Add from front or an
1000 1000 9840 59350 15900 25710		1410 Administration (may not exceed	1 10% of line 21)	1000	1000	Heritania de la companya de la comp		
1000 1000 59350 15900 25710		1411 Audit		Annual An				
1000 9840 59350 15900 25710	The state of the s	1415 Liquidated Damages	THE PROPERTY OF THE PROPERTY O				appropries and the state of the	
9840 59350 15900 25710		1430 Fees and Costs		1000	10000			
9840 59350 15900 25710		1440 Site Acquisition	montan merepanya maya amatana manapagam papam papam papam papam papam papam papam pangan pangan pangan pangan p					
59350 15900 25710		[450 Site Improvement		9840	41840	· · · · · · · · · · · · · · · · · · ·	W-12-4W-W-W-1-4-4W-W-W-W-W-W-W-W-W-W-W-W-W-W	ddialerrererererererererererererererererere
15900 25710	- Contraction of the Contraction	1460 Dwelling Structures		59350	60108			
15900 25710		1465.1 Dwelling Equipment—Nonex	pendable		And the second s			
25710		1470 Non-dwelling Structures		15900	1850			
		1475 Non-dwelling Equipment	ik dege ververen ververen van de	25710		**************************************		
1492 Moving to Work Demonstration 1495.1 Relocation Costs 1499 Development Activities ⁴		1485 Demolition						
1495.1 Relocation Costs 1499 Development Activities ⁴		1492 Moving to Work Denunstration	**************************************		Additional management of the contract of the c	Antichitation of the second of	AND	***************************************
1499 Development Activities 4		1495.1 Relocation Costs						
	of the second se	1499 Development Activities 4	THE OWN PERSONS ASSESSMENT AND AND AND AND AND ASSESSMENT ASSESSMENT ASSESSMENT AND STATE OF MANAGEMENTS.			***************************************		

¹To be completed for the Performance and Evaluation Report.

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

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

⁴RHF funds shall be included here.

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

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

A CAR I A CHARACTERS						
PHA Name: Exeter Housing Authority 277 Water Street Exeter NH 03833	Grant Type and Number Capital Fund Program Grant No: NH36P01450110 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2010/2011 FFY of Grant Approval: 2010	.011 val: 2016	
Type of Grant				elektronikariteteksikis teratores saavava evanatarana jarganisan gugunum gugunum		
Original Annual Statement	al Statement		⊠ Re		nt (revision no: 2	
erformance a	Performance and Evaluation Report for Period Ending:			Final Performance and Evaluation Report	Svaluation Report	
Summa	Summary by Bevelopment Account	Total Es	Total Estimated Cost		Total Actual Cost	I Cost 1
		Original	Revised 2		Obligated	Expended
1501 C	1501 Collateralization or Debt Service paid by the PHA				**************************************	***************************************
9000 C	9000 Collateralization or Debt Service paid Vía System of Direct Payment					
1502 C(1502 Contingency (may not exceed 8% of line 20)					
Amoun	Amount of Annual Grant:: (sum of lines 2 - 19)	148,800	150,798.			
Amoun	Amount of line 20 Related to LBP Activities				THE PROPERTY OF THE PROPERTY O	
Amoun	Amount of line 20 Related to Section 504 Activities		36500		de de de constante de destacto de la constante	
Amoun	Amount of line 20 Related to Security - Soft Costs				The second secon	
Amoun	Amount of line 20 Related to Security - Hard Costs		20000			
Amoun	Amount of line 20 Related to Energy Conservation Measures	***************************************	7140			
ature of Ex	Signature of Executive Director	Signa	Signature of Public Housing Director	nsing 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 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

PHA Name: Exeter Housing Authority 277 Water Street Exeter NH 03833	NH014	Grant Type and Number Capital Fund Program Gra CFFP (Yes/ No): Replacement Housing Fact	Grant Type and Number Capital Fund Program Grant No: NH36P01450110 CFFP (Yes/ No): Replacement Housing Factor Grant No:	NH36P014501 int No:	01	Federal 1	Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	ited Cost	Total Actual Cost	3.1	Status of Work
					Original	Revised 1	Funds F Obligated ² E	Funds Expended ²	
14002 Linden Fields	Enclose dumpster on 3 sides w Stockade	\vdash	1450	Average de la completation de la	9840	9840	 		
	Upgrade 2 rips								
од на применения в п						***************************************			***************************************
	replace vanity Apt 12	1.4	1460		2850	2650			
	hand kit range hood exaust motors				2400	0			
	countertops 6-7-11-13-								
	replace 8 old hot water heaters	7	1460		6400	6400			
	Security Camera upgrade	14	1460		10,710	10,000			
minut Hamada Walana Wa	replace electrical panels	7.	1475		15000	0			
	remediate 2 units sanitary waste system		1460		0	2600			
14003 Water Street	lKitchens				38000	0			
	IANDSCAPINGI	14	1450		0	2000			
	Replace hdcap bathrooms fixtures	14	1460		1500	1500			
	Replace Carpt	7	1460		0001	2628			
	Bathroom fans	7	1460		009	5000			
	Security Camera Upgrade, upgrade		1460		14050	19050			
A CONTRACTOR OF THE CONTRACTOR	emergency lights		1460						
The second secon	Regrade entryways front & two sides		1450		0	30000			
diameter in the second	paint units	14	1460		0	1000			

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.

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

		Status of Work	1-2															**************************************		
) <u>I</u> 0	Cost	Funds Expended ²	min de marante maniferante marante maniferante de marante de maran														- the fortune of terrorement from the second		-
	Federal FFY of Grant: 2010	Total Actual Cost	Funds Obligated ²																	
	Federal	ated Cost	Revised	1850	009	0000	2007	300	1000	5380						35000	10000	1000	1000	
	01	Total Estimated Cost	Original	1850	350	9000	07.67			4780						35000	1000	1000	1000	
	: NH36P014501 ant No:	Quantity		A CONTRACTOR OF THE CONTRACTOR																
	Grant Type and Number Capital Fund Program Grant No: NH36P01450110 CFFP (Yes/No): Replacement Housing Factor Grant No:	Development Account No.		1470	1460	1460	1400	1460	1460	1460						1406	1430	1408	1410	
V Domino VV VV	Grant Ty Capital Fi CFFP (Ye Replacen	or Work			**************************************					ures -tub-										
	uthority 833 NH014	General Description of Major Work Categories		Replace garage door	Replace HWH	THE PARTY OF THE P	raille Folcilles	Lighting building mounted	dund duns	Bath fixtures-lavatoryBath fixtures -tub-	-Bath Vanities, fans					Operations	Fees & Costs	Mgt improvements	lin	
ges	ousing Au er NH 038				Repl		Falls	L Igh	luns	Bath	-Bath					Oper	Fees	Mgt	Admin	
Part II: Supporting Pages	PHA Name: Exeter Housing Authority 277 Water Street Exeter NH 03833	Development Number Name/PHA-Wide Activities		NH004 Ports & Aubr	Auburn	Marie	ronsmonal Ave				CONTRACTOR		A CONTRACTOR OF THE CONTRACTOR	лема — по в при	PHA wide				A TO THE PROPERTY OF THE PROPE	

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.

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

	Federal FFY of Grant: 2010	All Funds Expended Reasons for Revised Target Dates (Quarter Ending Date)	nditure Actual Expenditure End e Date										
ancing Program	et Exeter NH 03833 NH014		Actual Obligation Original Expenditure End Date End Date	07/15/2014	07/15/2014	07/15/2014	0//15/2014						
Jule for Capital Fund Fir	Authority 277 Water Stre	All Fund Obligated (Quarter Ending Date)	Original Obligation End Date	07/15/2012	07/15/2012	07/15/2012	0//15/2012						
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Exeter Housing Authority 277 Water Street Exeter NH 03833	Development Number Name/PHA-Wide Activities		NH014-002 Linden Fields	NH014-003 Water Street	NHO14-004 PA/Auburn	PHA Wide						

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

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

	Federal FFY of Grant:	Reasons for Revised Target Dates													
	Federal F	C.													
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date												
		All Funds (Quarter E	Original Expenditure End Date												may be a second of the second
Financing Program		All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date												
dule for Capital Fund		All Fund (Quarter F	Original Obligation End Date												
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name:	Development Number Name/PHA-Wide Activities		The state of the s	A CONTRACTOR OF THE CONTRACTOR		THE RESERVE OF THE PROPERTY OF		The state of the s	THE REPORT OF THE PROPERTY OF	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	AMARIAN IN ANTARA PARA PARA PARA PARA PARA PARA PARA	**************************************	A TANAN AND AND AND AND AND AND AND AND AND	Total Control

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

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

Part I: Summary	umnary	***************************************			***************************************	
PHA Name: Exet 277 Water Street Exeter NH 03833	Housing Auth NH014	at No: NH36P01 or Grant No:	450109			FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant Original A	nnual Statement ce and Evaluation Repor	Reserve for Disasters/Emergencies f for Period Ending:		Revised Annual Statement (revision no:01	vision no:01) ition Report	
Line	Summary by Development Account		Total	Fotal Estimated Cost		Fotal Actual Cost 1
			Original	Revised ²	Obligated	Expended
esere!	Total non-CFP Funds					
2. The second se	1406 Operations (may not exceed 20% of line 21) 3	21) 3	35000	35000	35000	35000
۳,	1408 Management Improvements		1000	1000		
せ	1410 Administration (may not exceed 10% of line 21)	line 21)	1000	1000		
5	1411 Audit	maaaaanga day day day day day day day day day da		atoret trad det kest de skrivteninnennelske kristenindensemmensemmensemmensemmensemmensemmensemmensemmensemmen		
9	1415 Liquidated Damages					
r-	1430 Fees and Costs		1000	1000		
~	1440 Site Acquisition					
6	1450 Site Improvement	anne de	1000	1000		
9	1460 Dwelling Structures		45000	45000	32822.11	32822.11
=	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures				Assument parameter mental mental and a summer s	
1.3	1475 Non-dwelling Equipment		00069	66973	33666	33666
=	1485 Demolition					
51	1492 Moving to Work Demonstration			7.4.1		
91	1495.1 Relocation Costs					
17	1499 Development Activities 4				TYPE TO THE	

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.

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

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

Part I: 5	Part I: Summary					
PHA Name: Exeter Housing Authority NH-014	ousing Capital Fund Program Grant No: NH36P01450109 Replacement Housing Factor Grant No: Date of CFFP:		FFY OF	FFY of Grant:2009 FFY of Grant Approval:		
Type of Grant						
	Original Annual Statement	99	Revised Am	Revised Annual Statement (revision no: 01		
	Performance and Evaluation Report for Period Ending:		☐ Final Perfor	Final Performance and Evaluation Report		
Line	Summary by Development Account	Total Est	Total Estimated Cost	Total A	Total Actual Cost	
Commission of the Commission o		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					
9	1502 Contineercy (may not exceed 8% of line 20)	***************************************				
20	Amount of Annual Grant: (sum of lines 2 - 19)	153000	150973	101488 11	101488 11	
2	Amount of line 20 Related to LBP Activities			* * * * * * * * * * * * * * * * * * *		T
22	Amount of line 20 Related to Section 504 Activities					T
23	Amount of line 20 Related to Security - Soft Costs		New York Control of the Control of t	**************************************		T
24	Amount of line 20 Related to Security - Hard Costs					T
25	Amount of line 20 Related to Energy Conservation Measures		anno de la companya del companya de la companya de la companya del companya de la companya del la companya del la companya de	***************************************		<u> </u>
Signatu	Signature of Executive Director Date	Date Signal	Signature of Public Housing Director	irector	Date	
SA						

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.

Expires 4/30/2011

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

Part II. Supporting Pages	**************************************						***************************************	
PHA Name: Exeter Housing Authority	ing Authority	Grant Type and Number Capital Fund Program Grant No: NH36P01450109 CFFP (Yes/ No): Replacement Housing Factor Grant No:	nt No: NH36P01450	60]	Federal	Federal FFY of Grant: 2009	60	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork Development Account No.	t Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Jost	Status of Work
				Original	Revised	Funds Obligated ²	Funds Expended ²	
NH014-PHA Wide	Bobcat	1475		32000	33666	33666	33,666.00	
o to the state of the format of the format of the state o	Ford F250 Truck	1475		33973	33973	0		
	computer	1475		2000	2000	0		
NH014-003 Water St	Kitchen Cabinets & Floors	1460		38000	38000	29888.42	29,888.42	
	Paint units	1460		0001	2264.94	2264.94	2264.94	
	carpets	1460		1000	1000			
	Heat Strips	1460		2000	90'6907	0	0	
NH014-PH Wide	Operations	1406		35000	35000	35,000.00	35,000.00	
	Management Improvments	1408		1000	1000	0.	0	
	Administrative	1410		0001	332	0	0	
NH014-003 Water St	site improvements	1450		0001	0001	0	0	
The second secon	roof (Addl to Stimulus)	1460		0	668.75	668.75	668.75	
++++++++++++++++++++++++++++++++++++++								***************************************
те институте по институте до должно се					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
100 mm 10								
AN HOMEPHEN MEN'ALADI KAMANANAN KAMANAN				150973	150,973	101,488.11	101,488.11	
						A STATE OF THE STA		

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.

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

Part II: Supporting Pages	WORKER AND		A V v v v v v v v v v v v v v v v v v v							
PHA Name:		Grant Typ Capital Fur CFFP (Yes Replaceme	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	ant No:		Federal I	Federal FFY of Grant:			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work	
					Original	Revised	Funds Obligated ²	Funds Expended ²		,
								W	***************************************	
								***************************************	***************************************	
ALT ACTOR THE ACTOR ACCORDING ACCORDING TO THE ACTOR ACCORDING ACC										
ACTIVITÀ A TOTA A CONTROLLA PROGRAMMA DE SANTONI DE LA CONTROLLA DE LA CONTROL						***************************************				

										······
равида на вере пределения в поставления в поставления в поставления в поставления в поставления в поставления в			***************************************							
										······································
VARIENTAFARENISTI FAĞUNDAŞ TEVINDAVI VARIENTAŞ VARIENTAFARAŞ BIRDAVAŞ BIRDAVI FAĞIRINAŞ TEVINDƏ VAŞ VARIS AASA ADA							ALL PARTY AND THE PARTY OF THE			
						***************************************	7/2/4/			
										·······
Tobe	¹ To be completed for the Performance and Evaluation Report or		a Revised Annual Statement	<u>.</u>						

¹To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

form HUD-50075.1 (4/2008)

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

	Federal FFY of Grant: 2009	Reasons for Revised Target Dates 1		ACC	ACC							
		All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date	09/15/2013	09/15/2013							
		All Fund (Quarter F	Original Expenditure End Date	10/01/2013	10/01-2013		mmmmarkenterkenterketetetetetetetetetetetetetetetetetet					
Financing Program	Street, Exeter NH,0383	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date	09/15/2011	09/15/2011							
dule for Capital Func	Authority, 277 Water	All Fun (Quarter	Original Obligation End Date	10/01/2011	10/01/2011	- Anna continue de la contraction de la contract	***************************************	Administratummaturatumateratumateratumateratumateratumateratumateratumateratumateratumateratumateratumateratum				
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Exeter Housing Authority, 277 Water Street, Exeter NH,0383 NH014	Development Number Name/PHA-Wide Activities		PHA Wide	NH014-003			AND THE RESIDENCE AND THE PROPERTY OF THE PROP				

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 93 of the U.S. Housing Act of 1937, as amended.

form HUD-50075.1 (4/2008) Page5

Expires 4/30/2011

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

Reasons for Revised Target Dates Federal FFY of Grant: Actual Expenditure End Date All Funds Expended (Quarter Ending Date) Original Expenditure End Date Actual Obligation End Date Part III: Implementation Schedule for Capital Fund Financing Program All Fund Obligated (Quarter Ending Date) Original Obligation End Date Development Number Name/PHA-Wide Activities PHA Name:

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

Expires 4/30/2011

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

Part I. Summary	ummary					
PHA Namer 277 Water NH014	Housing Authority xeter NH	Grant Type and Number Capital Fund Program Grant No: NH36P01 Replacement Housing Factor Grant No: Date of CFFP:	1450108		E E	FFY of Grant Approval:
Type of Grant Original A	nnual Statement ce and Evaluation Repor	Reserve for Disasters/Emergencies t for Period Ending: 3/31/2010		Revised Annual Statement (revision no:	revision no: Evaluation Report	
Line	Summary by Development Account	III	Tot	Total Estimated Cost		Total Actual Cost 1
			Original	Revised ²	Obligated	Expended
	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) ³	0% of line 21) ³	35000	35000	35000	35000.00
3	1408 Management Improvements	**************************************	1000	0		
4	1410 Administration (may not exceed 10% of line 21)	ed 10% of line 21)	10500	1903.00	1903.00	1903.00
3	i de l'Aridit	MANAGEMENT AND				
9	1415 Liquidated Damages					
	1430 Fees and Costs		4000	00.9699	00.9699	00.9699
8	1440 Site Acquisition					
6	1450 Site Improvement		5000	0		
	1460 Dwelling Structures		87934	103512	95128.61	95128.61
=	1465.1 Dwelling Equipment-Nonexpendable	expendable				
Z	1470 Non-dwelling Structures		3000	0		
13	1475 Non-dwelling Equipment	TO SECURITY CONTRACTOR	5500	4823	4823.18	4823.18
Accompanies a resonance and a	1485 Demolition					
2	1492 Moving to Work Demonstration	UO				
16	1495,1 Relocation Costs	**************************************				
	1499 Development Activities					

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.

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

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

Part I: Summary	ummary				**************************************		
PHA Name: Exeter Housing Authority 277 Water Street, Exeter NH		Grant Type and Number Capital Fund Program Grant No: NH36P01450108 Replacement Housing Factor Grant No: Date of CFFP:		## ***	FFY of Grant Approval: FFY of Grant Approval:		
NH014					**************************************		
Type of Grant	rant						
	Original Annual Statement Performance and Evaluation	Original Annual Statement	ties	☐ Revised ☐ Fin	Revised Annual Statement (revision no: Final Performance and Evaluation Report	ort	
Line	Summary by Development Account	pment Account	Total Es	Total Estimated Cost	Total	Total Actual Cost	
	And the second s	A Control of the Cont	Original	Revised 2	Obligated	Expended	
18a	1501 Collateralization	1501 Collateralization or Debt Service paid by the PHA			**************************************		
18ba	9000 Collateralization	9000 Collateralization or Debt Service paid Via System of Direct Payment	***************************************				•
61	1502 Contingency (m	1502 Contingency (may not exceed 8% of line 20)					
26	Amount of Annual G.	Amount of Annual Grant:: (sum of lines 2 - 19)	151,934.00		143,551.	143551.	
21	Amount of line 20 Re	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Re	Amount of line 20 Related to Section 504 Activities			And the second s		
23	Amount of line 20 Re	Amount of line 20 Related to Security - Soft Costs		**************************************			
24	Amount of line 20 Re	Amount of line 20 Related to Security - Hard Costs				***************************************	
52	Amount of line 20 Re	Amount of line 20 Related to Energy Conservation Measures					
Signatur	Signature of Executive Director	General.	0/2	Signature of Public Housing Director	g 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 in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

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

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

Part II. Sumortino Pages								
PHA Name: Exeter Housing Authority 277 Water Street, Exeter NH	ing Authority NH	Grant Type and Numl Capital Fund Program C CFFP (Yes/ No):	Type and Number Fund Program Grant No: NH36P01450108 Yes/ No):	801	Federal	Federal FFY of Grant: 2008	80	
NH014		Replacement Housing Factor Grant No:	actor Grant No:					
Development Number Name/PHA-Wide	General Description of Major Work Categories	Work Development Account No.	ent Quantity o.	Total Estimated Cost	ited Cost	Total Actual Cost	Cost	Status of Work
		And the second s		Original	Revised 1	Funds Obligated ²	Funds Expended ²	
PHA Wide	operations	1406		35000	35000	35000	35000	
A A A A A A A A A A A A A A A A A A A	Mgt Improvements	1408		1000	0			
ANNALY VALVOREN VALVOREN AND AND AND AND AND AND AND AND AND AN	Adm-Emergency Plan	1410		3000	0			
THE WORLD AND ADDRESS OF THE PARTY OF THE PA	Adm-Appraisal	1410		5000	0	0	0	
	fees & costs	1430		4000	6696.25	6696.25	6696,25	
An dende de des des des des des des des des de	Comm Vacume	1475		1000	2565.48	2565.48	2565.48	
NH014-003	Railings	1450		4000	0	0	0	
	Card system outside doors	1460		13000	0	0	0	
MILLE VOCOCOCERTET THE STREET THE THE THE THE THE THE THE THE THE	Kitchen Cabinets	1460		38000	52962.43	46,964.03	46964.03	
AND AND THE PROPERTY OF THE PR	Carpet & tile Bldg entrance	1460		8000	0	0	0	
το έντε έντε την του	Breaker panels	1460		25000	15763.45	15763.45	15763.45	
	Survey Land	1410		2500	1903	1903.00	1903	
MATAIN SEA AND	Landscaping	1450		0001	0	0	0	
марти при при при при при при при при при пр	Paint units 460	1460		3934	1046913	10469.13	10469.13	
	Carpet office	1470		2000	0	0	0	
	Paint office	1470		1000	0	0	0	
	Computers	1475		2000	0	0	0	
THE PROPERTY OF THE PROPERTY O	Carpet cleaner	1475		2500	2257.70	2257.70	2257.70	**************************************
Make desirate two minimum desirates and a state of the st	Re Roof Building (excess stimulus)	us) 1460		0	21932.00	21932	21932	
				151,934	151,934	143,351	143351	
			10 miles and 10 mi			***************************************		

 $^{^1{\}rm To}$ be completed for the Performance and Evaluation Report or a Revised Annual Statement. $^2{\rm To}$ be completed for the Performance and Evaluation Report.

Expires 4/30/2011

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

	Status of Work								The state of the s					
	Statı	Ď.												
8008	Cost	Funds Expended ²	***************************************											
Federal FFY of Grant: 2008	Total Actual Cost	Funds Obligated ²	A A A A A A A A A A A A A A A A A A A											
Federal I	tted Cost	Revised 1	 ***************************************											
80	Total Estimated Cost	Original												
NH36P014501	Quantity													
Grant Type and Number Capital Fund Program Grant No: NH36P01450108 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Development Account No.			***************************************										
Grant Tyl Capital Fu CFFP (Ye Replaceme	Work													
ng Authority NH	General Description of Major Work Categories											**************************************		
Part II: Supporting Pages PHA Name: Exeter Housing Authority 277 Water Street, Exeter NH NH014	Development Number Name/PHA-Wide Activities				A) LIS minor of the contract o	A TONOMONOMONO MANAGEMENT AND A TONOMONO MAN	Advantages to the state of the	The state of the s	PANAMATANA ANTONIA PARAMATANA PARAMA		Дитубиральный применення примене	With the same and	The state of the s	

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.

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

	Federal FFY of Grant: 2008	Reasons for Revised Target Dates ¹												
	Œ.	All Funds Expended (Quarter Ending Date)	Actual Expenditure End Date											
		All Funds (Quarter Ei	Original Expenditure End Date	6/13/2012	6/13/2012	6/13/2012	6/13/2012	The state of the s						**************************************
Financing Program	3	All Fund Obligated (Quarter Ending Date)	Actual Obligation End Date		**************************************									
dule for Capital Fund	Authority	All Fund (Quarter E	Original Obligation End Date	6/13/2010	6/13/2010	6/13/2010	6/13/2010				AND THE RESERVE A PROPERTY OF			
Part III: Implementation Schedule for Capital Fund Financing Program	PHA Name: Exeter Housing Authority 277 Water Street, Exeter NH	NH014 Development Number Name/PHA-Wide Activities		PHA Wide	NH014-002	NH014-003	NH014-004							STANDSONALISSINALISONALI

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

form HUD-50075.1 (4/2008) Page5

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

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