PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
Annual Plan	Development Office of Public and Indian Housing	Expires 4/30/2011

1.0	PHA Information PHA Name: Ilion Housing Authority PHA Type: Small High	PHA Code: NY 059 Performing Standard	HCV (Section 8)	
	PHA Fiscal Year Beginning: (MM/YYYY):	10/2010		
2.0	Inventory (based on ACC units at time of F Number of PH units: 158	Y beginning in 1.0 above) Number of HCV units: 112		
3.0	Submission Type	Annual Plan Only	Year Plan Only	
4.0	PHA Consortia	PHA Consortia: (Check box if submitting a joint P	lan and complete table below.)	
			Particip	ating PHAs
	Participating PHAs	Participating PHAs	PH	
	PHA 1:	PHA 1:	PHA 1:	
	PHA 2:	PHA 2:	PHA 2:	
	PHA 3:	PHA 3:	PHA 3:	
5.0	5-Year Plan. Complete items 5.1 and 5.2 or	ıly at 5-Year Plan update.		
5.1	jurisdiction for the next five years: Mission Statement: It is the mission of	ng the needs of low-income, very low-income, an of the Ilion Housing Authority to provide a rsons without regard to race, color, religio	affordable housing and services	to families,
	Vision Statement: To be the first cho unsurpassed quality services and cus	bice in low income housing programs and tomer care.	property management services	by providing

Goals and C	D jectives. 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 objective	es described in the previous 5-Year Plan.
A. <u>GOAL</u>	<u>S & OBJECTIVES FOR FISCAL YEARS 2010 – 2014</u> :
Strategic In	itiative: The Ilion Housing Authority will dedicate itself to be recognized as an industry leader in public housing management.
1.	Obtain High Performer Status.
2.	
3.	1 2
4.	
5.	1 5
6.	
7.	
Strategic In	itiative. The Ilion Housing Authority will dedicate itself to maintaining fiscal discipline, profitability and continuous growth.
1	
1. 2.	
	· · · · · · · · · · · · · · · · · · ·
3.	6
4.	Keep spending at 3% growth per year.
	itiative. The Ilion Housing Authority will actively promote a culture of "continuous learning" and personal growth fo
commission	ers, employees and residents.
1.	
2.	Employees attend 24 hours of training annually.
3.	
4.	Manage a robust Section 3 Program.
5.	Provide after school programs for reading and computer training.
6.	
	itiative. The Ilion Housing Authority will develop and implement a clear and consistent long term energy program tha ergy conservation and efficiency.
1.	Implement an energy plan.
2.	
3.	1 60
-	itiative. The Ilion Housing Authority will actively pursue community relationships that promote economic vitality, improve services and strengthen brand recognition.
1.	
2.	Encourage commissioner/employee participation with local agencies.
	nitiative. The Ilion Housing Authority will dedicate itself to becoming a viable economic engine by pursuing economi s while developing, leveraging and maximizing our talents.
1.	Develop one new revenue opportunity annually.
2.	
Strategic G	oal: Continue compliance with provisions of the Violence Against Women Act (VAWA)
	Continue to fully comply with the Viciones Against Womer Art (VAWA). Continue to work with other to the
1. covered by V	Continue to fully comply with the Violence Against Women Act (VAWA). Continue to work with others to prevent offense /AWA to the degree we can. Details are in Attachment C .

Goal: Expand the supply of assisted housing.	
Objective	Progress
Reduce public housing vacancies: Strive for a vacancy rate of 5% by Fiscal Year ending 9/30/09	Maintained at or above 98% occupancy since May 2006.
Goal: Improve the quality of assisted housing.	
Objective	Progress
Improve public housing management: (PHAS score) Strive for 90% by Fiscal Year ending 9/30/09	Scored 88%
Increase customer satisfaction: Strive for 90% in this component of PHAS by Fiscal Year ending 9/30/09	Improved score to 90%
Renovate or modernize public housing units: Continue renovations using available CFP funds.	About 90% completion with replacing kitchen cabinets, sinks a countertops and energy efficient toilets. Anticipate finishing a remaining work in 2011. Replaced all refrigerators with energ star appliances. Replaced windows in the hi-rise building.
Maintain high performer status under SEMAP	Maintained high performer status.
Goal: Provide an improved living environment.	
Objective	Progress
Implement public housing security improvements: Install security cameras at the developments pending available CFP funds. Install new locks at London Towers.	Installed security cameras in London Towers in FY 2007 and t entire complex in FY 2010. Cancelled lock projects after can installation.
Goal: Promote self-sufficiency and asset development of assisted hou	seholds.
Objective	Progress
Provide or attract supportive services to increase independence for the elderly or families with disabilities.	Initiated agreement with Pathstone to provide employment opportunities to elderly. Opened a computer lab and provided instruction.
Provide or attract supportive services to increase independence for the	Initiated agreement with Pathstone to provide employment opportunities to elderly. Opened a computer lab and provide

6.0	PHA Plan Update
0.0	(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:(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.
	This section not Applicable for small PHAs
	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership
7.0	Programs, and Project-based Vouchers. Include statements related to these programs as applicable.
	This section not Applicable for small PHAs
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.
	See page 5
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund</i> <i>Program Five-Year Action Plan,</i> form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
	See page 5
8.3	Capital Fund Financing Program (CFFP). 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.
	Not Applicable for Ilion Housing Authority
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.
	This section not Applicable for small PHAs
9.1	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.
	This section not Applicable for small PHAs

10.0	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.
	Progress on the Housing Authority's goals was already included in Section 5.2
	(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 Plan:
	A "Substantial Deviation" from the 5-Year Plan is an overall change in the direction of the Authority pertaining to the Authority's Goals and Objectives. This includes changing the Authority's Goals and Objectives.
	Significant Amendment or Modification to the Annual Plan:
	A "Significant Amendment or Modification" to the Annual Plan is a change in a policy or policies pertaining to the operation of the Authority. This includes the following:
	 Changes to rent or admissions policies or organization of the waiting list. Additions of non-emergency work items over \$15,000(items not included in the current Annual Statement or 5-Year Action Plan) or
	change in use of replacement reserve funds under the Capital Fund.
	Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.
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, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)
	(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (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.
	See Attachment A
	(g) Challenged Elements – See Attachment B
	 (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)

OTHER ATTACHMENTS

- Attachment C Violence Against Women Act (VAWA) Statement)
- Attachment D Capital Fund Program Annual Statement FY 2010 Attachment E FY 2009 Capital Fund Program Performance & Evaluation Report
- Attachment F FY 2009 (ARRA Funds) Capital Fund Program Performance & Evaluation Report
- Attachment G FY 2008 Capital Fund Program Performance & Evaluation Report
- Attachment H Capital Fund Program Five-Year Action Plan

Attachment I – Certifications

Attachment A

Ilion Housing Authority

Five-Year Plan Fiscal Years 10/01/2010 – 10/01/2014

Comments of the Resident Advisory Board

Ilion Housing Authority met with the Resident Advisory Board (RAB) on June 4, 2010. In attendance were Wayne Johnson, Ariben Obligenhart, Karla Youker, Nellie Post, Helen Johnson and Allen Krowicki. Also present were the Executive Director, Jeffrey McTiernan and Mod Coordinator, Daniel Waterbury.

Director McTiernan briefed the RAB of on-going projects from the CFP Grants 2008/9/ARRA to include the following:

- a. Window
- b. Cabinets
- c. Parking Lot
- d. Sidewalk
- e. Security System

McTiernan then discussed elements of the PHA Plan Template and the 2010 CFP. The following comments were made RAB members and Housing Authority responses:

Obligenhart asked about exterior lighting that is out and parking during the Fourth of July. Response; Waterbury stated that he would contact the Village Light and McTiernan stated that he would talk to the Police about the Fourth of July.

Obligenhart complained about timeliness in addressing complaints. Response: McTiernan noted that he will do better and also made mention that all complaints should be filed using the IHA Complaint System.

Obligenhart asked about a community watch program, curfews, and parking signs. Response: McTiernan stated that he would send a letter to residents regarding a community watch program and remind them of the curfew. Waterbury stated that he would order the necessary signs.

Johnson asked about moving a temporary maintenance building and repairing the basketball court. Response: Waterbury noted he would see if we could move the building and would repair the court.

Jennison asked about expanding bingo to outside visitor and cleaning of the elevators. Response: McTiernan noted that bingo can be expanded, but should be addressed to the Tenants Association. Waterbury stated that he is in the process of making changes to the elevator.

Post asked about adding an Activity Director and open more activities. Post also asked about the designated areas for dogs.

Response: McTiernan noted that activities are now managed by the Tenants Association who has an Activity Director. Waterbury noted that he would purchase signs to indicate the designated areas for pets and McTiernan said he would send a reminder letters to residents.

Youker asked about designated smoking areas and locking the dumpster. Response: McTiernan stated that he would monitor the situation more closely and post signs.

Krowicki had no comments.

McTiernan recommended the following policy changes. Provide the residents the option of paying the utility allowance over 12 months instead of six months. Increase the maintenance labor rates (average hourly salary), set the late fees as a flat rate and offer cable television to the family units.

The RAB voted favorably on all of these measures.

The RAB members agreed with the overall Plan as presented and no further suggestions or changes were offered by them.

Jeffrey C. McTiernan, Executive Director Ilion Housing Authority June 15, 2010

Attachment B

Ilion Housing Authority

Five-Year Plan Fiscal Years 10/01/2010 – 10/01/2014

Challenged Elements

There were no challenged elements to the Housing Authority's Five-year Plan.

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Jeffrey C. McTiernan, Executive Director Ilion Housing Authority June 15, 2010

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Attachment C

Ilion Housing Authority

Five-Year Plan Fiscal Years 10/01/2010 – 10/01/2014

Violence Against Women Act Report

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

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

Through cooperation with the local domestic violence agency and the City of Ilion Police Department, any cases of violence as described are referred for assistance. The local domestic violence agency is Catholic Charities.

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

The above listed agency's program staff is aware of our housing programs and makes client referrals to our office. Apparently eligible clients are placed on our waiting list.

For persons already living in a Housing Authority unit who become victims as described, these are referred to police and the local domestic violence agency for assistance. If the management becomes aware of any violator who may be restricted through an order of protection, that person is prohibited from the premises and is considered a trespasser subject to arrest and removal. The Police Department is cooperative and supportive in cases such as this, and willingly responds and enforces the protective orders.

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

The same methods as described herein are used, making referrals to the Catholic Charities for counseling and support services, and attempting to enforce orders of protection with the cooperation of Police Department personnel.

Ilion Housing Authority has the following procedures in place to assure applicants, residents and participants are aware of their rights and responsibilities under the Violence Against Women Act:

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

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

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

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

Part I:	Part I: Summary					Expires 4/30/2011
PHA Name:	Vame:	Grant Type and Number				FFY of Grant:
		rogram Grant	NY06S05950110	Replacement Hou	Replacement Housing Factor Grant No:	2010
llion	llion Heusing Authority	Date of CFFP: 2010		0		FFY of Grant Approval: 2010
Type 0	Type of Grant	i i i i i i i i i i i i i i i i i i i				
<	Original Annual Statement	Keserve Ior Disasters/Emergencies	cies	Revised Annual Sta	Revised Annual Statement (revision no:	
	Fertormance and Evaluation Report for Period Ending:	od Ending:		Final Performance	Final Performance and Evaluation Report	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost	ual Cost ¹
		Original	inal	Revised ²	Obligated	Expended
1	Total non-CFP Funds					
Ċ	1406 Operations (may not exceed 20% of line 21) ³	£(
3	1408 Management Improvements		2,000.00			
+	1410 Administration (may not exceed 10% of line 21)	e 21)	20,428.00			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
6	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment - Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment		184,951.00			
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs		-			
17	1499 Development Activities ⁴					
18a	1501 Collateralization or Debt Service paid by the PHA	e PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	ystem of Direct				
19	1502 Contingency (may not exceeds 8% of line 20)	(0				
20	Amount of Annual Grant: (sum of line 2 - 19)		207,379.00	0.00	0.00	0.00
21	Amount of line 20 Related to LBP Activities					
ci ci	Amount of line 20 Related to Section 504 Activities	es				
23	Amount of line 20 Related to Security - Soft Costs	s				
24	Amount of line 20 Related to Security - Hart Costs	S				
25	Amount of line 20 Related to Energy Conservation Measures	n Measures				
	¹ To be completed for the Performance and Evaluation Renort.	ation Report.				

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ⁵ 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

Part I: Summary						
PHA Name:	Grant Type and Number					FFY of Grant:
-	rogram Grant	NY06S05950110		Replacement Housing Factor Grant No:	0:	2010
Ilion Housing Authority	Date of CFFP: 2010			0		FFY of Grant Approval:
						2010
Type of Grant						
V Original Annual Statement	Reserve for Disasters/Emergencics	rgencies	Revis	Revised Annual Statement (revision no:		
Performance and Evaluation Report for Period Ending:	od Ending:		Final	Final Performance and Evaluation Report	port	
Line Summary by Development Account		Total Estimated Cost	ted Cost		Total Actual Cost	ial Cost ¹
		Original	Revised ²	1 ² Obligated	ited	Expended
Signature of Executive Director	Date		Signature of Put	Signature of Public Housing Director		Date
M M Z		10				

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

OMB No. 2577-0226	Expires 4/30/2011

Part II: Supporting Pages								
	Grant Type	Grant Type and Number					Federal	Federal FFY of Grant:
	Capital Fun Replacemer	Capital Fund Program Grant No: Replacement Housing Factor Grant No:	NY06S05950110 nt No: 0	950110	CFFP (Ycs/No):	Yes		2010
General Description of Major Work Categories	jor Work	Development Account No.	Quantity	Total Esu	Total Estimated Cost	Total A	Total Actual Cost	Status of Work
				Original	Revised ⁻	Funds Obligated ²	Funds Expended ²	
Administration Salaries		1410		20.428	~			
CFP Training Course/Certification	ation	1408	1	2,000				
Non Dwelling Equipment		1475						
Energy Recovery/Roof Top Fans	ans		1	184,951				
							-	
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 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.

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

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1 1 2 2									Expires 4/30/2011	=
Part I:	rart I: Summary									
PHA Name: Ilion Hous	PHA Name: Ilion Housing Authority	Grant Type and Number Capital Fund Program Grant No: Date of CFFP: 200	6	NY06P05950109		Replacement Hou 0	Replacement Housing Factor Grant No: 0		FFY of Grant: 2009 FFY of Grant Approval: 2009	al:
Type 0	Type of Grant Original Annual Statement	Reserve for Disasters/Emergencies	ers/Emergencies	L]	<u>چ</u>	vised Annual Sta	Revised Annual Statement (revision no:	-		
x	Performance and Evaluation Report for Period Ending:	d Ending:	3/31/2010		E	ial Performance	Final Performance and Evaluation Report			
Line	Summary by Development Account			Total Estimated Cost	Cost		L	Total Actual Cost	al Cost	
			Original		Revised ²	sed ²	Obligated		Expended	
1	Total non-CFP Funds									
ы	1406 Operations (may not exceed 20% of line 21) ³	ر ا								
m	1408 Management Improvements			3,000.00						
Ħ	410 Administration (may not exceed 10% of line 21)	s 21)		20,428.00						
o.	[411 Audit					-			:	
6	415 Liquidated Damages									
7	1430 Fees and Costs									
8	1440 Site Acquisition									Γ
6	1450 Site Improvement		:	78,819.00						
10	1460 Dwelling Structures			91,082.00				24.951	C)	24.951
11	1465.1 Dwelling Equipment - Nonexpendable									
12	1470 Non-dwelling Structures									
13	1475 Non-dwelling Equipment			16,000.00						
14	1485 Demolition									
15	1492 Moving to Work Demonstration									
16	1495.1 Relocation Costs					-				
17	1499 Development Activities ⁴									
18a	1501 Collateralization or Debt Service paid by the PHA	PHA SHA								
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	ystem of Direct								
19	1502 Contingency (may not exceeds 8% of line 20)	()								
20	Amount of Annual Grant: (sum of line 2 - 19)			209,329.00		0.00		24,951.00	24,9	24,951.00
21	Amount of line 20 Related to LBP Activities									Γ
52	Amount of line 20 Related to Section 504 Activities	cs								
23	Amount of line 20 Related to Security - Soft Costs	8								
24	Amount of line 20 Related to Security - Hart Costs	s								
25	Amount of line 20 Related to Energy Conservation Measures	n Measures								
	¹ To be completed for the Derformance and Evaluation Derve	tion Denort								

10 De compreted for the renormance and evaluation report.
²To 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

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U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

					Exnires 4/30/2011
Part I: Summary					1107/00/E \$2 Hdyn
PHA Name:	Grant Type and Number				FFY of Grant:
	rogram Grant	NY06P05950109	Replacement Hou	Replacement Housing Factor Grant No:	2009
mon nousing Aumority	Date of CFFP: 2009			0	FFY of Grant Approval:
					2009
Type of Grant					
Original Annual Statement	Reserve for Disasters/Emergencies	<u>د</u>	Revised Annual Sta	Revised Annual Statement (revision no:	
X Performance and Evaluation Report for Period Ending:	od Ending: 3/31/2010		Final Performance	Final Performance and Evaluation Report	
Line Summary by Development Account		Total Estimated Cost	ost	Total A	Total Actual Cost
	Original	la	Revised ²	Obligated	Expended
				x	

Date

Signature of Public Housing Director

Date 2/3/

Signature of Executive Director

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Page 2 of 6

Annual Statement/Performance and Exaluation Report Capital Fund Program. Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

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U.S. Department of Itousing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Authority Carant Type and Number NY06P03930109 att Capital Fund Foguan Grant No. NY06P03930109 Replacement Mossing Factor Grant No. Replacement Mossing Factor Grant No. Original Nide Account No. Account No. Original PI Operations 1406 Original Management Improvements 1406 0 0 Management Improvements 1410 20428 Administration 1410 20428 Administration 1410 20438 Fees and Costs 1430 20408 Signage 1 20	rart II: Supporting rages	g rages								
thorety: Capital Frand Fragram Grant No: Replacement Huusing Factor Grant No: Categories Categorie	PHA Name:		Grant Type	and Number					Federal	Federal EEV of Grant:
t General Description of Major Work Development Quantity Total Estimate ide Categories Account No. Original 0 1 Operations 1406 0 0 Management Improvements 1406 0 0 Management Training 1410 20.428 Management Training 1410 20.428 Fees and Cots 1430 0 Eres and Cots 1430 0 Event Loree Act 1450 0 Event Loree Act 1450 1 Event Loree Act 1450 1 Event Loree Act 1450 1 Event Loree Act 1 20.000 Stornage 1 1 20.000 Event Loree Act 1450 1 20.000 Event Loree Act 1450 1 20.000 Event Loree Act 1450 1 20.000 Stornage Stornage 1 20.000 Event Loree Act 1450 1 20.000 Stornage Stornage 1 20.000 Stornage Stornage 1 20.000 Stornage I 1 20.000 Stor	llion Housing Auth	ority	Capital Fund Replacement	Program Grant No: Housing Factor Gra	nt No:		CFFP (Yes/No):	No	19 ISDS-1	2009
It Ceneral Description of Major Work Development Quantity Total Estimate 1 Categories Account No. Original Original 1 Operations 1406 0 0 1 Operations 1410 20.428 0 1 Administration 1410 20.428 0 1 Scientify System 12.000 0 0 1 Scientify System 12.000 1 20.428										
1 Original Original Anagement Improvements 1406 0 Management Improvements 1408 3.000 CFP Management Training 3.000 3.000 CFP Management Training 3.000 3.000 Fees and Costs 1410 20,428 Fees and Costs 1430 0 Fees and Costs 1430 0 Parking Lot and Sidewalk Repair Ferce Act 1430 0 Site Improvement 1450 1.5 6.000 Parking Lot and Sidewalk Repair Ferce Act 1 2.000 Signage 1 2.000 1 2.000	Development Number Name/PHA-Wide Activities		or Work	Development Account No.	Quantity	Total Estir	nated Cost	Total A	Total Actual Cost	Status of Work
Operations 1406 Management Improvements 1406 Management Training 1410 CFP Management Training Administration 1410 Administration 1410 Fees and Costs 1430 Fees and Costs 1430 Frees and Costs 1430 Free Structures 1450 Parking Lot and Sidewalk Repair - Force Act 1450 Signage 1.5. Signage 1.5. Parking Lot and Sidewalk Repair - Force Act 1450 Security System 1.5. Parking Lot and Sidewalk Repair - Force Act 1.5. Security System 1.5. Parking Lot and Sidewalk Repair - Force Act 1.5. Security System 1.5. Data Repair - Force Act 1.5. Security System 1.5. Make-up Air/Roof Cabients. Fauces) - Force 32 Make-up Air/Roof Top Fans 1.475	NY-059 AMP 1					Original	Revised ¹	Funds Obligated ²	Funds Evended 2	
Management Improvements 1408 CFP Management Training 1410 CFP Management Training 1410 Administration 1410 Fees and Costs 1430 Fees and Costs 1430 Parking Lot and Sidewalk Repair - Force Act 1450 Signage 1 Signage 1 Parking Lot and Sidewalk Repair - Force Act 1 Signage 1 Signage 1 Signage 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Signage 1 Socurity System 1 Parking Lot and Sidewalk Repair - Force Act 1 Signage 1 Socurity System 1 Doors 32 Doors 20 Make-up Air/Roof Top Faus 1	HA Wide	Operations		1406		0		Congarca	rapanda	
Administration 1410 Fees and Costs 1430 Fees and Costs 1430 Free and Costs 1430 Parking Lot and Sidewalk Repair - Force Act 1450 Signage 1.1 Signage 1.1 Sternity System 1 Parking Lot and Sidewalk Repair - Force Act 1.450 Signage 1.1 Security System 1.1 Parking Lot and Sidewalk Repair - Force Act 1.1 Security System 1.1 Derking Lot and Sidewalk Repair - Force Act 1.1 Security System 1.1 Derking Lot and Sidewalk Repair - Force Act 1.460 Security System 1.1 Derking Lot and Sidewalk Repair - Force Act 1.460 Security System 1.2 Make-up Air/Roof Top Fains 1.460 Make-up Air/Roof Top Fains 1.475	łA Wide	Management Improvem CFP Management Training	ents	1408		3,000				
Fees and Costs 1430 Fees and Costs 1430 Parking Lot and Sidewalk Repair Ferrec Act 1450 Signage 1 Signage 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Signage 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Parking Lot and Sidewalk Repair - Force Act 1 Security System 1 Security System 1 Signage 1 Signage 1460 Signage 32 Doors 20 Make-up Air/Roof Top Fains 1475	fA Wide	Administration		1410		20,428				
Site Improvement 1450 Parking Lot and Sidewalk Repair -Force Act 1450 Signage 1 Signage 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Parking Lot and Sidewalk Repair - Force Act 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act 1 Signage 1 Signage 1 Signage 1 Signage 1 Signage 1 Sourity System 1 Marchen Upgrades (Cabients, Faucest) - Force 20 Doors 20 Make-up Air/Roof Top Fans 1475 Make-up Air/Roof Top Fans L.S.	IA Wide	Fees and Costs		1430		0				
Parking Lor and Sidewalk Repair -Force Act L.S. Signage 1 Security System 1 Parking Lot and Sidewalk Repair - Force Act L.S. Parking Lot and Sidewalk Repair - Force Act L.S. Parking Lot and Sidewalk Repair - Force Act L.S. Security System 1 Parking Lot and Sidewalk Repair - Force Act L.S. Signage 1 Signage 1 Signage 1 Security System 1460 Security System 32 Doors 20 Doors 20 Make-up Air/Roof Top Fans 1475	VY-059 AMP-1	Site Improvement		1450						
Signage 1 Security System 1 Parking Lot and Sidewalk Repar - Force Act 1 Security System 1 Parking Lot and Sidewalk Repar - Force Act 1 Security System 1 Signage 1 Stemuly System 1 Signage 1 Signage 1460 Krichen Upgrades (Cabients.Fauceus) - Force 20 Doors 20 Doors 20 Make-up Air/Roof Top Fans 1475	VY059-1	Parking Lot and Sidewalk Repair -For-	ce Act		L.S.	6,000				
Security System Image: Force Act Image: Force Act Image: Force Act Parking Lot and Sidewalk Repair - Force Act Security System Image: Force Act Signage L.S. Image: Force Act Image: Force Act Signage Signage Image: Force Act Image: Force Act Signage Signage Image: Force Act Image: Force Act Signage Dwelling Structures Image: Force Act Image: Force Act Doors Dwelling Eduints: Fauces: - Force Image: Force Act Image: Force Act Make-up Air/Roof Top Fans Image: Force Image: Force Image: Force		Signage			1	2,000				
Parking Let and Sidewalk Repair - Force Act L.S. Security System 1 Signage L.S. Signage 1 Security System 1 Security System 1 Signage 1460 Stather Upgrades (Cabients.Faucers) - Force 1460 Matchen Upgrades (Cabients.Faucers) - Force 20 Matchen Upwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.		Security System			Ι	12,701				
Sccurity System 1 Parking Lot and Sidewalk Repair - Force Act L.S. Estimage 1 Signage 1 Scurity System 1 Security System 1460 Wrichen Upgrades (Cabients, Faucets) - Force 32 Doors 20 Make-up Air/Roof Top Fans 1475 Make-up Air/Roof Top Fans L.S.	IY-059-2	Parking Lot and Sidewalk Repair - For	ce Act		L.S.	8,000				
Parking Lot and Sidewalk Repair - Force Act L.S. Signage 1 Signage 1 Security System 1 Security System 1 Matchin Upgrades (Cabients Faucets) - Force 1460 Noors 32 Doors 20 Matc-up Air/Roof Top Fans 1475 Matc-up Air/Roof Top Fans 1.5.		Security System			1	21,000				
Signage 1 Security System 1 Security System 1 Dwelling Structures 1460 Kitchen Upgrades (Cabients Fauces) - Force 32 Doors 32 Doors 20 Non-Dwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.	4Y-059-3	Parking Lot and Sidewalk Repair - For	ce Act		L.S.	6,118				
Security System 1 Dwelling Structures 1460 Kitchen Upgrades (Cabients, Faucess) - Force 32 Doors 32 Doors 20 Make-up Air/Roof Top Fans 1475		Signage				2,000				
Dwelling Structures 1460 Kitchen Upgrades (Cabients Fauces) - Force 32 Doors 32 Non-Dwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.		Security System			-	21,000				
Kirchen Upgrades (Cabients, Faucers) - Force 32 Doorts 20 Non-Dwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.	IY-059 AMP-1	Dwelling Structures		1460						
Doors 20 Non-Dwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.	(Y-059-2	Kitchen Upgrades (Cabients Faucets) -	Force		32	71,082		24.951	24.951	
Non-Dwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.	۲۲-059-3	Doors			20	20,000				
Non-Dwelling Equipment 1475 Make-up Air/Roof Top Fans L.S.							:			
Make-up Air/Roof Top Fans L.S.	1Y-059 AMP-1	Non-Dwelling Equipm	ent	1475						
	Y-059-1	Make-up Air/Roof Top Fans			L.S.	16,000				
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 $^{-1}$ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. 2 To be completed for the Performance and Evaluation Report.

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

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Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund Fin	ancing Program				
PHA Name: Ilion Housing Authority						Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Datc	Reasons for Revised Target Dates ¹	Target Dates ¹
NY-059 AMP 001	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End	Actual Expenditure End Date		
		-				

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

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

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

						Ext	Expires 4/30/2011
Part I: S	Part I: Summary						
PHA Name:	ne:	Grant Type and Number Capital Fund Program Grant No: NY06S05950109	VY06S05950109			FFY of Grant: 2009 FFY of Grant Appr	FFY of Grant: 2009 FFY of Grant Approval: 2009
	mon monsing controlity	Replacement Housing Factor Grant No: Date of CFFP:	nt No:			(ARRA)	
Type of Grant	nnual Statement	Receive for Disasters/Emergencies		Designed Approal Statement /-			
🛛 Perfo	on Repor	nding: 3/31/2010	ſ	Final Performance and Evaluation Report	Evaluation Report		
Line	Summary by Development Account		Total Es	Total Estimated Cost		Total Actual Cost '	
	Total non-CFP Funds		Original	Revised ²	Obligated	Expended	
2	1406 Operations (may not exceed 20% of line 21) ³	ne 21) ³					
ωi	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)	of line 21)					
S	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs		15,000			15.000	3 000
8	1440 Site Acquisition					- 7	
9	1450 Site Improvement						
10	1460 Dwelling Structures		244,018	ľ		244.018	42.966
11	1465.1 Dwelling Equipment-Nonexpendable	sle					
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment		0		i		
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities *						
18a	1501 Collateralization or Debt Service paid by the PHA	by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)	ne 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	19)	259,018		2	259,018	45,966

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

Part I: Summary	mary				Expires 4/30/2011
a LIA Naille:		Grant Type and Number		V > P > +	
Ilion Housing Authority		Capital Fund Program Grant No: NY06S05950109 Replacement Housing Factor Grant No: Date of CFFP:		EFY of Grant Approval: 2009 FFY of Grant Approval: 2009 (ARP 4)	
Type of Grant					
□ Original A ⊠ Performar	 Original Annual Statement Reserve for Disasters/Emerg Performance and Evaluation Report for Period Endine: 3/31/2010 	□ Reserve for Disasters/Emergencies	Revised Annual Statement (revision no:1)	nt (revision no:1)	
Line Su	Summary by Development Account		Final Performance	Final Performance and Evaluation Report	
		Original	Jouar Estimated Cost		Total Actual Cost
21 Ar	Amount of line 20 Related to LBP Activities		Neviscu	Ubligated	Expended
22 Ar	Amount of line 20 Related to Section 504 Activities	04 Activities			
23 An	Amount of line 20 Related to Security - Soft Costs	Soft Costs			
24 An	Amount of line 20 Related to Security - Hard Costs	Hard Costs			
25 An	Amount of line 20 Related to Energy Conservation Measures	onservation Measures			
Signature of Executiv Date March 31, 2010	Signature of Executive Director Jeffrey C. Marthernan Date March 31, 2010	λ	Signature of Public Housing Director	g Director	Date
	To be completed for the Pert	¹ To be completed for the Performance and Evaluation Report.			

² To be completed for the Verterment equation report. ³ PHAs with under 250 units in management may use 100% of CFP Grants for operations. ⁴ RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

NY-059-1 LT	NY059-2 RP	NY059-1 LT		Development Number Name/PHA-Wide Activities	Part II: Supporting Pages PHA Name: Ilion Housing Authority
Fees and Costs 1430 Architech Fees	Cabinets- Force Account	Dwelling Structures 1460 Windows		General Description of Major Work Categories	
1430	1460	1460		Replacement Housing Factor Grant No: Vork Development Quat Account No. Quat	Grant Type and Number Capital Fund Program Grant No: NY06S05950109 CFFP (Yes/No): No
L.S.	25	0		ant No: Quantity	: NY06S05950
15,000	47.518	206,325	Original	Total Estimated Cost	109
			Revised	ed Cost	Federal
15,000	47,518	206,325	Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2009
3,000	-0-	42,966	Funds Expended ²	Cost	
In progress	In progress	In progress		Status of Work	Expires 4/30/2011

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.

Page 3

PHA Name: Ilion Housing Authority Part III: Implementation Schedule for Capital Fund Financing Program Capital Fund Financing Program Development Number Name/PHA-Wide Activities **Obligation End** Original Date All Fund Obligated (Quarter Ending Date) Actual Obligation End Date Original Expenditure End Date All Funds Expended (Quarter Ending Date) Actual Expenditure End Date U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Part III Not Applicable the Capital Fund Financing Program llion Housing Authority is not participating in Federal FFY of Grant: 2009 (ARRA) Reasons for Revised Target Dates Expires 4/30/2011

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

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.

Page 4

form HUD-50075.1 (4/2008)

Annua	Annual Statement/Performance and Evaluation Report				
Capital	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/C	ent Housing Factor		FPRHF) Part I: Summary	
PHA Name:	ne:	Grant Type and Number			Federal FV of Crants
Hon Ho	lhon Housing Authority	Capital Fund Program Grant No. NY06P059 501 08	rant No: NY06P059	501 08	2008
□ Origii	Original Annual Statement Reserve for Disasters/ Emergencies R	evised Annual Statement (revision -	ICION VIAIR NO:		
Perfor	Report for Period Ending: 3/31/10	Final Performance and Evaluation	ia (revision no Valuation Report		
Line No.	Summary by Development Account	Total Esti	Cotal Estimated Cost	Total A	Fotal Actual Cost
		Original	Revised	Obligated	Expended
1-1	Total non-CFP Funds			a	
2	1406 Operations				
ω	1408 Management Improvements				
4	1410 Administration	20.428	20.428	0	
S	1411 Audit		4		
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
∞	1440 Site Acquisition				
9	1450 Site Improvement	44.219	16 555	310 37	210.27
10	1460 Dwelling Structures	186,68	112.645	111 894 70	111 204 70
1	1465.1 Dwelling Equipment—Nonexpendable		3		111,077,70
12					
13	1475 Nondwelling Equipment	50.000	55 000	<3 N88 5N	51 000 50
14	1485 Demolition		0000	00.000	JJ,000.JU
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 - 20)	204.628	204 628	165 202 57	165 207 27
22				10-402-01	103,302.37
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

ZULU report Replacement Housing Factor (CFP/CF Grant Type and Number Capital Fund Program Grant No: NY06P059 50 Replacement Housing Factor Grant No: Dev. Acct Dev. Acct Quantity Total Estimate No. L.S. Original 1406 L.S. 20,428 1410 L.S. 20,428 1410 1450 12,000 1450 27,000 5,219				16,555	44,219			Subtolal Acet 1450	
ted Evaluation Report Fatter (CFP/CFPRHF) Fatter (CFP/CFPRHF) Fatter (CFP/CFPRHF) Grant Type and Number Fatter (CFP/CFPRHF) Capital Fund Number Fatter (CFP/CFPRHF) Replacement Housing Factor (Cnent No. Power Fatter IVO of Crant: Cono Major Work Dev. Accel Outling Factor Cnent No. Total Estimated Cost Total Actual Cost Subtotal Actel 1400 Cono Original Revised Funds Subtotal Acct 1410 L.S. 20,428 20,428 Colspan="2">Colspan="2">Subtotal Acct 1410 L.S. 20,428 20,428 Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan= 20,428 Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan= 20,428 Colspan="2">Colspan="2">Colspan= 20,428 Colspan= 20,428 Colspan= 20,428 Colspan= 20,428 Colspan= 20,428 Colspan= 20,428 Colspan=				c				Subtatal Apat 1420	
Gen March 31, 2010 rid Evaluation Report Grant Type and Number Capital Fund Program Gant No: NY06P059 501 08 Federal FV of Grant: Capital Fund Program Gant No: NY06P059 501 08 constraint Dev. Accer Quantity Total Estimated Cost Total Actual Cost gories Dev. Accer Quantity Total Estimated Cost Funds Funds stations L.S. 20,428 20,428 Obligated Funds Funds Subtoal Acet 1410 L.S. 20,428 20,428 00 0 Subtoal Acet 1410 L.S. 20,428 20,428 39,17 319,37 319,37 ore Account 1450 27,000 0 0 39,1 319,37 319,37 1430 22,19 0 0 0 0 0 0				0 8722				Sidewalk Repair - Force Account Parking Lot Repair Stairwell Paint and Seal	London Lowers
rec March 31, 2010 Grant Type and Number Capital Fund Program Grant No: NY06P059 501 08 Replacement Housing Factor (CFP/CFPRHF) ion of Major Work Grant Type and Number Capital Fund Program Grant No: NY06P059 501 08 Replacement Housing Factor Grant No: No. Cell Program Grant No: NY06P059 501 08 Replacement Housing Factor Grant No: No. Cell Program Grant No: NY06P059 501 08 Replacement Housing Factor Grant No: No. Cell Program Grant No: NY06P059 501 08 Revised Federal FV of Grant: 2008 ion of Major Work Dev. Accell No. Cell Status No. Cell Program Grant No: NY06P059 501 08 Revised Total Actual Cost Funds Total Actual Cost Funds istration 1406 L.S. 20,428 20,428 Funds Farended sibiotal Acet 1400 L.S. 20,428 20,428 Subtotal Acet 1410 It 10 It 12,000 0 sibiotal Acet 1410 L.S. 20,428 20,428 It 13,0 Ji 13,937 Ji 9,37 sibiotal Acet 1410 It 10 It 12,000 0 Ji 13,937 Ji 9,37 Ji 9,37 sibiotal Acet 1410 It 50 27,000 0 Ji 9,37 Ji 9,37 Ji 9,37 sibiotal Acet 1410 It 50 27,000 0 Ji 9,37 Ji 9,37 Ji 9,37 Ji 9,37 <tr< td=""><td></td><td></td><td></td><td>0</td><td>5,219</td><td></td><td>1450</td><td>Landscaping</td><td>NY 059-1</td></tr<>				0	5,219		1450	Landscaping	NY 059-1
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Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages		Grant:	Federal FY of G 2008		o: NY06P059 Grant No:	and Number 1 Program Grant N t Housing Factor C	Grant Type Capital Fund Replacement	Housing Authority	PHA Name: Ilion
Annual Statement/Defense				CFPRHF)	actor (CFP/C	nt Housing Fa	oort Replacemer	norenormance and Evaluation Kep ogram and Capital Fund Program 1 ting Pages	Capital Fund Pr Part II: Suppor
HUUSING FACTOR FACE DATED March 31, 2010									Annual State
							010	actor i & dated Maren 31, 2	T ZITICNOTT

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor P&E dated March 31. 2010

		NY-059-3 Ilion Heights							Remington Park					London Towers	NV 050 1	Nevelopment Number Name/HA-Wide Activities	PHA Name: Ilion	Annual Statement/Perforn Capital Fund Program and Part II: Supporting Pages	7. Capital Fund Housing Factor
Paint Projects and Cycle Painting	Carpet	Dwelling Structures (1460)			Subtotal Acct 1460	Bathroom Upgrades – Force Account Toilets Faucets	Paint Projects and Cycle Painting	Carpet	Dwelling Structures (1460)	Subtotal Acct 1460	Projects and Cycle Painting	Bathroom Upgrades - Force Account Toilets Faucets	Kitchen Upgrades – Force Account Cabinets Faucets	Dwelling Structures (1460)		General Description of Major Work Categories	PHA Name: Ilion Housing Authority	Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/C Part II: Supporting Pages	<u>Capital Fund Program Annual Statement/Performance and Evaluatious using Factor P&E dated March 31, 2010</u>
1460	1460				i	1460	1460	1460			1460		1460			Dev. Acct No.	Grant Type Capital Fund Replacemen	oort Replacemei	<u>ment/Perf</u> 2010
10	ω		Ĭ			20	10	ω			10	106	33 3			Quantity	Grant Type and Number Capital Fund Program Grant No: NY0 Replacement Housing Factor Grant No:	nt Housing I	ormance a
4,200	6.990						4000	1669		65,800	6,819	0	58,981		Original	Total Esti	Grant Type and Number Capital Fund Program Grant No: NY06P059 5 Replacement Housing Factor Grant No:	actor (CFP/	nd Evalua
0	0			7401	0401	9401	0	0		103,244	0	25,523	77,721		Revised	Total Estimated Cost	501 08	CFPRHF)	tion Repor
				0000	0220	8650				103,244		25,523	77,721		Funds Obligated	Total A	Federal FY of Grant: 2008		n Report and Replacement
				0.08	0/20	8650				103.244		25,523	77,721	•	Funds Expended	Total Actual Cost	Grant:		acement
						On-going						Complete	Complete			Status of Work			

			NY-059-1 London Towers	NY-059-3 Ilion Heights		NY-059-2 Remington Park			NY-059-1 London Towers				Activities	Name/HA-Wide	Number		Capital Fund Program and Part II: Supporting Pages PHA Name: Thin Housing A	Annual Statemer	7. Capita Housing F
	Subtotal Acct 1465.1	Tractor/back hoe Roof top fans	Non-Dwelling Equipment (1475) Generator Truck	Dwelling Structures (1465.1)	Subtotal Acct 1465.1	Dwelling Structures (1465.1)		Subtotal Acct 1465.1	Dwelling Equipment (1465,1)		Subtotal Acct 1460			0	General Description of Major Work		Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/C) Part II: Supporting Pages PHA Name: Ilion Housing Authority.	Annual Statement/Performance and Evaluation Report	7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor P&E dated March 31, 2010
			1475											HQ.	Dev. Acct	Capital Fund Replacemen	Replacemer	ort	nent/Perf
		1	·												Quantity	Capital Fund Program Grant No: NY0 Replacement Housing Factor Grant No:	nt Housing H		ormance a
5000	50 000	0	50,000				-			11,170	11 100	Original			Total Esti	Cranic Type and Number Capital Fund Program Grant No: NY06P059 501 08 Replacement Housing Factor Grant No:	actor (CFP/		nd Evalua
33,000	22 000	28,687.50 24,401 1,911.50	0		-					2,200		Revised			Total Estimated Cost	0 501 08	CFPRHF)		tion Repor
33,000.3U	27 000 EN	28,687.50 24,401									nom9110.0	Funds			Total <i>E</i>	Federal FY of Grant: 2008			t and Repl
53,088.50	23 000 20					-					Typying	Funds			Total Actual Cost	fGrant:			acement
		CFN/	Generator											Work	Status of				

7. Capital Fund Program Annual Statement/Performance and Evaluation Re Housing Factor P&E dated March 31, 2010	Program A P&E dated	<u>I March 3</u>	<u>itement/P</u> 1, 2010	erformance	and Evalua	tion Repor	eport and Replacement
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule	ation Sched	and Evalua ital Fund P _l ule	rogram Re	t placement Ho	using Factor (CFP/CFPRH	(F)
llion Housing Authority	Ŷ	Capit	Capital Fund Program No Performance Interior	Panlagmant Lype and Number Capital Fund Program No: NY06P059 501 08	501 08		Federal FY of Grant: 2008
Development Number	All	Fund Ohligat	nighted				
Name/HA-Wide Activities	(Qua	(Quarter Ending Date))ate)	Au (Qu	All runds Expended (Quarter Ending Date)	e) d	Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
HA Wide	09/30/10			09/30/12			
NV 050-1	00/30/10						
London Towers				09/30/12			
NY 059-2	09/30/10			CUVCIUU			
Remington Park	07/20/10			09/30/12			
NY 059-3	09/30/10		-	C1/00/00			
Ilion Heights				21/00/20			

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	Funds	Housing Factor	Renlacement		planning	for 5-year	CFP Funds Listed	Ilion Heights	NY 059-3	Remington Park	NY 059-2	London Towers	NY 059-1	HA Wide			Number/Namc/ HA-Wide	Ilion Housing Authority	PHA Name:	Capital Fund Program Five-Year Action Plan Part I: Summary
															Abritist		Year 1	ority		gram Five-Y
							204,628		58,318		71,096		54.786	20,428		FFY Grant: 2009 PHA FY: 10/1/2009	Work Statement for Year 2			ear Action Plan
							204.628		56.700		56 000		71 500	20.428		FFY Grant: 2010 PHA FY: 10/1/2010	Work Statement for Year 3			
				-			204 628	c				184,200	184 200	20 428		FFY Grant: 2011 PIIA FY: 10/1/2011	Work Statement for Year 4	Revision No: 1		
						020,002	012 100	/2,100	100	/ 2,100	77 100	40,000	20,420	001 70		FFY Grant: 2012 PHA EV: 10/1/2012	Work Statement for Year 5			

8. Capital Fund Program Five-Year Action Plan

11 100	Subtated Acat (1460)	_	130.668	Subtotal Acct (1460)		
26,700	Faucets	Ilion Heights			CHIRIT HOUL	
	Kitchen Upgrades-Cabinets,	NY-059-3	29,572	Kitchen Upgrades-Cabinets, Faucets	NY-USY-3 Nian Heighte	
	Faucets				NV 050 2	
18,000	Kitchen Upgrades-Cabinets,	Remington Park	_		Nennington Park	
		NY-059-2	71,096	Kitchen Upgrades-Cabinets, Faucets	NY-059-2	
0		London Towers		Nitchen Upgrades-Cabinets Faucets	Lonuon 1 owers	
	Dwelling Structures (1460)	NY-059-1	30,000	Dwelling Structures (1460)	NY-059-1	
	Subtotal Acct (1450)		48,532	Subtotal Acct (1450)		
		llion Heights			Curdiant month	
		NY-059-3	28,746	Parking Lot, Sidewalks	INY-USY-3	
		Remington Park			ANY OF A	
		NY-059-2	0	Parking Lot, Sidewalks	NY-059-2	
				Project		
		London Towers	19,786		London Towers	
	Site Improvement (1450)	NY-059-1		Site Improvement (1450)	NY-059-1	
	Subtotal Acct (1430)					
		Ilion Heights				
	Fees and Costs (1430)	NY-059-3				
20.428	Total HA Wide		20,428	Iotal HA Wide		
	administration of CFP			THE STOCK WITCH OF OT I		
20,428	Prorated salaries & benefits for		20,428	administration of CEP		
	Administration (1410)	HA Wide	10 A A	Prorated calaries & benefits for		
		TT / TT - 1		Administration (1410)	HA Wide	Skateneer
	r n Operations					
				P H Operations		
COST	Onerations (1406)	HA Wide		Operations (1406)	HA Wide	
Estimated	Major Work Categories	Name/Number	Cost	the of the second se	Name/Number	
	11/1 1.10/1/2010 - 9/30/2011		Fatimated	Mainr Work Catarorias	Development	
	UA EV. 10/1/2010 0/2010	D		PHA FY: 10/1/2009 - 9/30/2010		Year 1
	FFV Grant: 2010			FFY Grant: 2009		tor
	Activities for Year 3			Activities for Year: 2		Activities
				Activity of the second se	ippor ung i ages	
				Capital Fund Flografic Five-Year Action Plan	innorting Decor	Capital I u Part II - Su
					nd Decomon Fi	Canital En

Subtotal Acct (1460)

130,668

London Towers

Ranges

NY-059-1

Subtotal Acct (1460) Dwelling Equipment (1465.1)

26,700 44,700

26,500

l∞ **Capital Fund Program Five-Year Action Plan**

	London Towers	NIV 050 1			HA WIGE	TTA WELL		HA Wide	Name/Number	Development		Part II: Support	Capital Fund Pr											
Subtotal Acct (1430)	Fees and Costs (1430) Architecture Fees (Windows)		Total I	administration of CFP	Administration (1410) Prorated valaries & benefits for		P II Operations	Operations (1406)	IVIAJOF WORK Categories	PHA FY: 10/1/2011 - 9/30/2012	FFY Grant: 2011	Part II: Supporting Pages-Work Activities	Capital Fund Program Five-Vear Action Plan	Total CFP Ferimated Cost	S					NY-059-1 Nondwelling Equipment (1475)				
ct (1430) 20,000	20,000		Total HA Wide 20,428	20,428					s Estimated				m		Subtotal Acct (1475) 5.000									
		-		Pronadmi	HA Wide		HA WIDE		Development Name/Number	РНА			20		Õ	NY-059-3 Ilion Heights	The second se	NY-059-2 Reminaton Part	London Towers				NY-059-3	NY-059-2 Remington Park
Subtotal Acct (1430)	Fees and Costs (1430)		Total HA Wide	Prorated salaries & benefits for administration of CFP	Administration (1410)		Operations (1406)		Major Work Categories	Т	Activities for Year: 5 FFY Grant: 2012		Total CFP Estimated Cost	Subtotal Acct (1475)	Subtatal Acad (1477)	Tractor and Hoe					SUDIOTAL ACCT (1465.1)	Nanges		k Ranges
		20,428	01100	20,428				Cost	Estimated				204,628	100,000		25,000	30,000		20,000		39,500	+	0,000	8 000

8. Capital Fund Program Five-Year Action Plan

Total CFP F			Ilion Heights Playgro	NY-059-3	Remington Park Playgro	NY-059-2	ers Furt	NY-059-1 No		Ilion Heights	NY-059-3	Remington Park	NY-059-2	ers Windo	NY-059-1					Hion Heights Sidewa	NY-059-3				Remington Park Water/Sewer	1-620-X N
Total CFP Estimated Cost		Subtotal Acct (1450)	Playground Equipment		Playground Equipment		iture	ndwelling Equinment (1475)	Subtatal Apat (1450)					VS	Dwelling Structures (1460)		Subtotal Acct (1450)	Subtatal Apat (1450)		Sidewalks/Parking Lot Improvements			Support and a pot unprovements	lke/ Parking I of Improvements		Site Improvement (1450)
\$204.628								164,200						164.200			0	,								
		Subtotal Acct (1450)		CILIZIATE HART	Nion Heights	NV 050 3	Reminaton Dark		IIION Heights	NY-059-3	Neimigton Park	Dominator Bart	NV 050 7	London Towers	NV_050_1				Weinington 1 al K	Dominaton Daul				Lion Heights	NY-059-3	AVE7 0=0 3
					Security System	Security System	Nondwelling Equipment (1475)	Subtotal Acct (1460)		Bathroom Upgrades	Bathroom Upgrades		Damitoon opgrades	Bathroom I hound on United (1400)	Duralling Grand Adda		Subtatal Acet (1450)	Playground	Lanuscaping	Picnic Area	2	Playground	Landscaping	Picnic Area	Site Improvement (1450)	
	50,000				25,000	25,000		80,200		20,100	20,100		40,000			34,000		15,000	2,000	10,000		15,000	2,000	10,000		

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program - Five Year Action Plan

<u> </u>	Part I: Summarv					
2						
Σ	PHA Name/Number Ilion Housing Authority/NY-059	g Authority/NY-059	Locality (City/County & State) Ilion/Herkimer.NY	te) Ilion/Herkimer.NY	X Original 5-Vear Dlan	
<u> </u>	A. Name	Work Statement for Year 1	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 Work Statement for Year 4 Work Statement for Year 5 FFY 3013	Work Statement for Year 4	Work Statement for Year 5
	Ilion Housing	FFY 2010			CT07 1 11	FFY 2014
	Aumorny/AMP-001					
B.	Physical Improvements Subtotal	Arnual Statement	184 051			
<u>ن</u>	C. Management Improvements			100,901	156,300	186,951
	D. [PHA-Wide Non-dwelling		2,000	2,000		
	Structures and Equipment					
щ	Administration		9CV UC		100,05	
н. Н	Other			50,428	20,428	20.428
IJ	G. Operations					
Н.	Demolition					
ц.	Development					
Ľ.	Capital Fund Financing - Debt					
	Service					
Ϋ́	Total CFP Funds		207.379	207 379	066 200	
	Total Non-CFP Funds	0	0	C	610,102	201,3/9
Σ	M. Grand Total	0	207.379	078 700		0
					6/0.102	6/2/07

form HUD-50075.2 (4/2008)

1 of 6

Part I: Summary (Continuation)	ation)				
PHA Name/Number Ilion Housing Authority/NY-059	ng Authority/NY-059	Locality (City/County & State) Ilion/Herkimer,NY	te) Ilion/Herkimer,NY	X Original 5-Vear Plan	\vdash
Development Number and Name Ilion Housing	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 2Work Statement for Year 3Work Statement for Year 4Work Statement for Year 5FFY2011FFY2012FFY2013FFY
Authority/AMP-001					
	Annual Statement	207.379	075 706		
				201.3/9	207,379
		207,379	207,379	207,379	207 379
	0	0	0	0	C
	0	207,379	207.379	207,379	207 379

form HUD-50075.2 (4/2008)

2 of 6

Capital Fund Program - Five Year Action Plan

	Part II: Si	Part II: Supporting Pages - Physical Needs Work	Statement(s)	()			
Fry Development for Year A Great Development Number/Name Outnity Estimated Cost Development Number/Name Outnity Estimated Great Development Number/Name L-S 20.428 Administration L-S Quantity Estimated Administration L-S 20.428 Administration L-S Quantity Estimated Administration L-S 20.428 Administration L-S Quantity Estimated Administration L-S 20.428 Administration L-S Quantity Estimated Strends 1 2.00.0 Instructions L-S 2.00.0 Estimated T/Stores L-S 2.000 Less control T/Stores L-S 2.000 Less control T/Stores L-S 2.000 Less control T/Stores L-S Control L-S C	Work	Work Statement for Vear	ſ				
Development Number/Name General Description of Major Work Categories Quantity Estimated Estimated General Description of Major Work Categories LS 20.428 Administration Development Number/Name General Description of Major Work Categories Quantity Estimated Administration LS 20.428 Administration I.S Quantity Estimated Administration LS 20.428 Administration I.S Quantity Estimated CiP Training 1 2.000 I training 2.000 Sciences 1 2.001 Site Improvement (1450) 3 300 Sciences Site Improvement (1450) 1 1 Site Improvement (1450) 1 2.000 I training 1 7 Flows 1 1 Site Improvement (1450) 30 5000 Sciences 2.5000 I training 1 1 1 1 Exercine Fluid 3 15.000 Sciences LS 3.000 Sciences LS 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 <td>Statement fo</td> <td></td> <td>4</td> <td></td> <td>Work Statement for Year</td> <td>3</td> <td></td>	Statement fo		4		Work Statement for Year	3	
Greneral Number Name Quantity Fstimated Cost Development Number Name Quantity Estimated Cost Development Number Name Quantity Estimated Cost Development Number Name Liss Carterial	Year I FFY						
AdministrationL.S. 20438 AdministrationL.S.Management Improvements (1410)1 2.000 IraningL.S.CF P Training1 2.000 Iraning1File Improvements (1460)1 2.000 Iraning 1.5 Site Improvement (1450)1 2.000 Iraning 1.5 Exclusion Log1 3.7950 Carpet $7.Floors$ Stevalks1.S. 3.7950 SidewalksL.S.Exterior Pain Projects2.S. 5.5000 EastwalksL.S.Exterior Pain Projects2.S. 5.5000 EastwalksL.S.Exterior Pain Projects2.S. 5.5000 EastwalksL.S.Exterior Pain ProjectsL.S. 5.5000 EastwalksL.S.Daveling Equipment (1465.1) 9.000 Dwelling Equipment (1455.1) 2.00 Bathroom Upgrades 100 Dwelling Equipment (1465.1) 2.00 Dors 5.000 $2.3.001$ Dwelling Equipment (1455.1) 2.00 Bathroom Upgrades 100 Dwelling Equipment (1465.1) 2.00 Dors 5.000 $2.3.001$ 0.000 0.000 Dors 5.000 0.000 0.000 0.000 Dors 0.000 0	2010		Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
management improvements (1410) management improvements (1410) L.S. CFP Training 1 2.000 Training 1 CFP Training 1 2.000 Training 1 Parking Lous 3 3.799 Garpet $7.Floors$ 1.5 Parking Lous 1.5 3.7990 Garpet $7.Floors$ 1.5 Stetriculation 1.5 3.7000 Exterior 1.5 $7.Floors$ Stetriculation 1.5 3.7000 Exterior 1.5 1.5000 Stetriculation 1.5 5.000 Exterior 1.5 1.5000 Disperson 1.5 0.000 Exterior 1.5 1.5000 Bathroom Upgrades 1.5 0.000 Exterior 1.5 1.5 Dorsin 5.0000 Exterior 1.5 1.5 1.5 Bathroom Upgrades 1.5 0.000 0.0000 0.0000 1.5 1.5 Dorsin	See	Administration					-
Management Improvements (1410)Management Improvements (1410)1 CFP Training12.000Training1 CFP Training337.590Site Improvement (1450)1 $Site Improvement (1450)337.590Carpet.7.FloorsSite values237.590Carpet.7.Floors1.S.Sitevalues23.7.590Carpet.7.Floors1.S.Sitevalues22.S.000Envertement (1450)3.71.S.Pastronucter (1400)31.S.000Envertement (1460)3.7Bathroom Upgrades2.S.000Envertement (1460)3.72.S.Bathroom Upgrades30.000Dwelling Structures (1460)3.7Doors2.S.0002.S.001Bathroom Upgrades (ub resurfacing)3.7Doors2.S.000Dwelling Structures (1460)3.72.0Bathroom Upgrades3.0.00Dwelling Structures (1460)3.7Doors2.S.000Dwelling S$			L.3.	20.428	Administration	L.S.	20,428
CfP I rating 1 2.000 Iraining 1 7 Floors 1 Site Improvement (1430) 3 3/950 Site Improvement (1430) 7 Floors 2 Paking Lots 3 3/950 Site Improvement (1430) 7 Floors 2 Paking Lots 1.5 3/950 Site Improvement (1430) 7 2 2 Paking Lots 1.5 3/950 Iandscaping 1.5 2 10 1 7 10 Everitor Paint Projects 1.5 3 3/00 Iandscaping 1.5 1 7 1		Management Improvements (1410)			Manacommut Immediate		
Site Improvement (1450) z conditionality z state Improvement (1450) T Floors 2 state Improvement (1450) T Floors <th< td=""><td></td><td>CFP Training</td><td>†- </td><td>000 6</td><td></td><td></td><td></td></th<>		CFP Training	†- 	000 6			
Site Improvement (1450)Site Improvement (1450)Site Improvement (1450)FloorsEventing Lots 2 $37,950$ Garpet 7 Floors 7 FloorsStewalls 2 $2,500$ Garpet 7 Floors 1 Stewalls 2 $2,500$ Innetsemping 1 1 Eventor Paint Projects L_S 5000 Innetsemping L_S 7 Eventor Paint Projects L_S 5000 Innetsemping L_S 7 Eventor Paint Projects L_S 5000 Innetsemping L_S 1 Eventor Paint Projects L_S 5000 Innetsemping L_S 1 Eventor Paint Projects L_S 3000 Innetsemping L_S L_S Dwelling Structures (1460) 50 22.801 Bathroom Upgrades (ub resurfacing) 37 Bathroom Upgrades S $30,000$ Dwelling Equipment (1465.1) 20 Doors $32,200$ Doors D D L_S 20 Bathroom Upgrades 106 $34,200$ D D L_S 20 Doors 23.200 Doors D D L_S 20 Doors 106 $34,200$ D D L_S 20 Doors D D D D L_S 20 Doors D D D D L_S 20 Doors D D D D D L_S 20 Doors D D D D D D D D Doors D	Annual			2,000	1 raimng	1	2,000
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	Statement	Site Improvement (1450)			Cito Immunet (1120)		
ls 15.000 Standard Thoose und Equipment/Print Area L.S. 15.000 Endexplass T.S. Latin Projects L.S. 25.000 Landscaping L.S. L.S. Latin Projects L.S. 3.000 Pinit Areas L.S. L.S. Latin Projects L.S. 3.000 Pinit Areas L.S. L.S. Diveling Structures (1460) So 23.00 Dwelling Structures (1460) 37 m Upgrades 50 22.80 Bathroom Upgrades (ub resurfacing) 37 m Upgrades 50 20.000 Dwelling Equipment (1465.1) 37 Dwelling Equipment (1465.1) 106 34.200 Dwelling Equipment (1465.1) 20 Dwelling Equipment (1465.1) 106 34.200 Dwelling Equipment (1475) 20 Dwelling Equipment (1465.1) 106 34.200 Subot Dwelling Equipment (1475) 20 Dwelling Equipment (1465.1) 106 34.200 Subot Dwelling Equipment (1475) 20 Dwelling Equipment (1465.1) 106 Subot Dwelling Equipment (1475) L.S. Dwelling Equipment (1465.1) 106 Subot Dwelling Equipment (1475) L.S. Dwelling Equipment (1465.1) 106 Subot Dwelling Equipment (Parking Lots	ſ	37 950			
und Equipment Pinic Area 2 5.000 Datasepting L.S. Faun Projects L.S. 5.000 Princ Areas L.S. Lor repair scaling L.S. 5.000 Princ Areas L.S. Dwelling Structures (1460) Do Dwelling Structures (1460) 37 M. Upgrades 50 22.801 Bathroom Upgrades (ub resurfacing) 37 Dwelling Equipment (1465.1) 106 34.200 Dwelling Equipment (1465.1) 20 Dwelling Equipment (1465.1) 106 34.200 Dwelling Equipment (1475) 20 Dwelling Equipment (1465.1) 106 34.200 Dwelling Equipment (1475) 20 Dwelling Equipment (1465.1) 106 34.200 $Mon-Dwelling Equipment (1475) 20 Dwelling Equipment (1465.1) 106 23.200.900 Mon-Dwelling Equipment (1475) 1.S. Dwelling Equipment (1465.1) 106 1000 1000 1000 Dweling Equipment (1465.1) 1000 10000<$		Sidewalks		15 000	Culput	7 Floors	20,000
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Lot repair scalingLot repair scalingLot repair scalingLot reprint repr		Exterior Paint Projects	* J	20,000	Landscaping	L.S.	10,000
Dwelling Structures (1460) D Dwelling Structures (1460) 0 0 m Upgrades 50 22.801 Bathroom Upgrades (ub resurfacing) 37 7 m Upgrades 52 30.000 Dwelling Equipment (1465.1) 37 7 Dwelling Equipment (1465.1) 106 34.200 Dwelling Equipment (1465.1) 20 Dwelling Equipment (1465.1) 106 34.200 Non-Dwelling Equipment (1455) 20 Dwelling Equipment (1465.1) 106 34.200 Non-Dwelling Equipment (1455) 20 Dwelling Equipment (1465.1) 106 34.200 Non-Dwelling Equipment (1455) 20 Dwelling Equipment (1465.1) 106 34.200 Non-Dwelling Equipment (1455) 20 Dwelling Equipment (1465.1) 106 100 Water Hardware 1.5 20 Dwelling Equipment (1465.1) 106 1.5 20 20 Dwelling Equipment (1455.1) 1.5 1.5 20 Dwelling Equipment (1475) 1.5 20 20 Dwelling Equipment (1475) 1.5 20		Parking I of renair sealing		000°C	runc Areas	L.S.	5.100
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form HUD-50075.2 (4/2008)

Capital Fund Program - Five Year Action Plan

Part II: Si	Part II: Supporting Pages - Physical Needs Work	Statement(s)	(s)			
w UK Statement for	Work Statement for Year	4			5	
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form HUD-50075.2 (4/2008)

4 of 6

Disclosure of Lobbying Activities

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse side for Instructions and Public Reporting burden statement)

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a. contract a. b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance	Status of Federal Action a. bid/offer/appl b. initial award c. post-award			For Mate year (yy	Type initial filing material change erial Change Only yy) <u>N/A</u> quarter ast report (mm/dd/yyyy)	N/A
4. Name and Address of Reporting Entity X Prime Subawardee Tier	, if known:	5. If Report of Prime		n No. 4 is Su	ibawardee, enter Name	and Address
llion Housing Authority London Towers 100 West Main Street Ilion, NY 13357		N/A				
Congressional District, if known		Congres	sional Distr	ri ct, if known	N/A	
6. Federal Department/Agency Department of Housing and Urban Develop		7. Federal		ame/Descript		
		CFDA N	u mber , if apj	plicable <u>N/A</u>		
8. Federal Action Number, if known N/A		9. Award A \$	mount, if kn	iown	N/A	the summary state of
10a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI) N/A	ľ		el s Performi r e, first name,		ncluding address if different fr	rom No. 10a.)
	(attach continuation she	ot(a) if papage				
11. Amount of Payment (check all that apply)	(attach continuation she		•••	check all that	apply)	
\$N/A actual	planned	г 1	retainer			
12. Form of Payment (check all that apply)		b	one-time fe	ee		
a. cash		c.	commissio	n		
b. in-kind; specify: nature <u>N/A</u>		d	contingent	fee		
value	N/A	e	deferred			
		f.	other (spec	ify)_N/A	······	
14. Brief Description of Services Performed or to be for Payment Indicated in Item 11 N/A	Performed and Date(s) of Service	, including o	officer(s), en	nployee(s), or Member(:	s) contacted,
15. Continuation sheets attached Yes X	(attach continuation she	et(s) if necess	ary)			
 Information requested through this form is au Pub. L. 101-121, 103 Stat. 750, as amended by 65, Stat. 700 (31 U.S.C. 1352). This disclosure is a material representation of fact upon which 	sec. 10; Pub. L. 104 of lobbying activities reliance was placed	_ Signatu s d Print Na	loff	rey McTierr	nan	
by the above when this transaction was made disclosure is required pursuant to 31 U.S.C. 13 will be reported to the Congress semiannually	352. This information	Title	Exe	cutive Dire	ctor	
for public inspection. Any person who fails disclosure shall be subject to a civil penalty of r	to file the required not less than \$10,000	J Telepho	ne No		315 894-2159	
and not more than \$100,000 for each such fail	ure.	Date (m	m/dd/yyyy)_	·····	6/15/2010	
Federal Use Only:					Authorized for Local R Standard For	

Instructions for Completion of SF-LLL, Disclosure of Lobbying Activities

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

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

- 9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- 10. (a) Enter the full name, address, city, state and zip code of the registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).

- 11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
- 12. Check the appropriate box (es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
- 13. Check the appropriate box (es). Check all boxes that apply. If other, specify nature.
- 14. Provide specific and detailed description of the services that the lobbist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just the time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
- 15. Check whether or not a continuation sheet(s) are attached.
- 16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public Reporting Burden for this collection of information is estimated to average 30 minutes 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. Please do not return your completed form to the Office of Management and Budget; send it to the address provided by the sponsoring agency.

Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

Authorized for Local Reproduction Standard Form-LLL (7/97)

Certification for a Drug-Free Workplace

Applicant Name

llion Housing Authority

Program/Activity Receiving Federal Grant Funding

HUD PHA Plan (Operating Fund/Capital Fund/Section 8 Program)

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

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

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

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

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

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

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

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

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

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will --- (1) Abide by the terms of the statement; and

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

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

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

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

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

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

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

London Towers 100 West Main Street Ilion, NY 13357

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

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

Name of Authorized Official	Title	
Jeffrey McTiernan	Executive Director	
Signature	Date	
x	6/15/2010	

Certification of Payments to Influence Federal Transactions

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

Applicant Name Ilion Housing Authority

Program/Activity Receiving Federal Grant Funding HUD PHA Plan (Operating Fund/Capital Fund/Section 8 Program)

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

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

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions. (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

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

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

(10 0.0.01, 1010, 1012, 010.0.0123, 0002)	
Name of Authorized Official	Title
Jeffrey McTiernan	Executive Director
Signature	Date
×	6/15/2010

Previous edition is obsolete

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, Lapprove the submission of the \times 5-Year and/or — Annual PHA Plan for the PHA fiscal year beginning 10/1/2010, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

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

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

Ilion Housing Authority	NY059
PHA Name	PHA Number/HA Code
X 5-Ycar PHA Plan for Fiscal Years 20 <u>10</u> - 20 <u>1</u> Annual PHA Plan for Fiscal Years 20 20	4

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

Name of Authorized Official	Title
Beverlyan Tutty	Chairperson
Signature Denerlyan Tuttey	Date 6/15/2010