

<b>PHA 5-Year and Annual Plan</b>	<b>U.S. Department of Housing and Urban Development Office of Public and Indian Housing</b>	<b>OMB No. 2577-0226 Expires 4/30/2011</b>
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<b>1.0</b>	<b>PHA Information</b> PHA Name: <u>Westbrook Housing Authority</u> PHA Code: <u>ME015</u> PHA Type: <input type="checkbox"/> Small <input checked="" type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/2011</u>				
<b>2.0</b>	<b>Inventory</b> (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>83</u> Number of HCV units: <u>805</u>				
<b>3.0</b>	<b>Submission Type</b> <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only				
<b>4.0</b>	<b>PHA Consortia</b> <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program
	PHA 1:				PH HCV
	PHA 2:				
	PHA 3:				
<b>5.0</b>	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 only at 5-Year Plan update.				
<b>5.1</b>	<b>Mission.</b> State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:				
<b>5.2</b>	<b>Goals and Objectives.</b> Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <b>See Attachment I for revised goals for 2010 5-Year Plan.</b>				
<b>6.0</b>	<b>PHA Plan Update</b> (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: <b>See Attachment II below.</b> (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.  <div style="display: flex; justify-content: space-around;"><div style="text-align: center;"><b>Westbrook Housing 30 Liza Harmon Drive Westbrook, ME 04092</b></div><div style="text-align: center;"><b>and</b></div><div style="text-align: center;"><b>City of Westbrook 2 York Street Westbrook, ME 04092</b></div></div>				
<b>7.0</b>	<b>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers.</b> <i>Include statements related to these programs as applicable.</i>				
<b>8.0</b>	<b>Capital Improvements.</b> Please complete Parts 8.1 through 8.3, as applicable.				
<b>8.1</b>	<b>Capital Fund Program Annual Statement/Performance and Evaluation Report.</b> As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.				
<b>8.2</b>	<b>Capital Fund Program Five-Year Action Plan.</b> As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.				
<b>8.3</b>	<b>Capital Fund Financing Program (CFFP).</b> <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.				

9.0	<p><b>Housing Needs.</b> Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.</p>
9.1	<p><b>Strategy for Addressing Housing Needs.</b> Provide a brief description of the PHA’s strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. <b>Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</b></p>
10.0	<p><b>Additional Information.</b> Describe the following, as well as any additional information HUD has requested.</p> <p>(a) <b>Progress in Meeting Mission and Goals.</b> Provide a brief statement of the PHA’s progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) <b>Significant Amendment and Substantial Deviation/Modification.</b> Provide the PHA’s definition of “significant amendment” and “substantial deviation/modification”.</p>
11.0	<p><b>Required Submission for HUD Field Office Review.</b> In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. <b>Note:</b> Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

**See below for Attachments I & II**

**Attachment I**  
**5.2 Revised Goals for 2010 5-Year Action Plan**

**p.5.... Other PHA Goals and Objectives:**

The Westbrook Housing Authority (WHA) is still interested to seek funding for the modernization of its' oldest senior community, Riverview Terrace (30 years in December 2004). This updating is needed for a variety of reasons and will bear many positive end results. It is our wish to take the 20 efficiency side-by-side units and over time to combine two efficiencies into one, one bedroom unit, thus, in time reducing the total units from 60 to 50. As part of this process, the new units would take on a universal design, meeting general accessibility requirements. The lesser number of households would establish a lesser demand for parking spaces, solving a current parking problem (no more available spots to assign and no room to expand the lot). The redesign would also allow for the reconfiguration of some extra common space which is in short supply at this community. A re-design of the major community area is also being considered, utilizing some wasted space, reconfiguring two bathrooms into one handicapped accessible bathroom and creating a more private office space for the nurse, mental health professionals and other support service providers to be stationed. The overall utility or function of the redesign warrants serious consideration of this goal. Additionally Westbrook Housing will be investigating the option of transitioning our public housing units to Project Based Section 8 through the Demolition Disposition Program or the yet to be approved Transition To Rental Assistance Program to secure a more stable funding mechanism for large scale modernization and capitalization of building renovations.

With HUD funds becoming more and more scarce, WHA is seeking alternative funding mechanisms to continue to provide affordable housing options to the residents of the community. Having just completed a 29 unit tax credit project for seniors in a partnership with the City, WHA is looking to expand opportunities for workforce housing. WHA currently is in the process of renovating 10 – 12 units of rental assistance on Main Street in Westbrook, and has just received confirmation from City Hall on the purchase of an old elementary school that will be turned into one and two bedroom affordable condominium units.

A closer working relationship with the City is helping to create more opportunities for WHA to partner up City, or with referrals received through the City to be on the cutting edge of the affordable housing market in our area.

## **Attachment II**

### **6.0 (a)**

#### **Plan Element Changes**

##### HCV – Administrative Plan (completed)

- The change to the “insufficient funding” section reflected how Westbrook Housing would handle a shortage of funds to support the vouchers issued. There were two alternatives listed:
  - a)* The PHA will determine the families with the lowest HAP; take those families off the HAP roll and pay their HAP out of PHA funds. The number of families will be determined by the HCV funding shortfall (if applicable), the number of units over-issued (if applicable) and the PHA resources.
  - b)* A lottery for the Section 8 HCV will be used in the event that the Section 8 HCV program is over-utilized or under-funded and a reduction in the number of HCV participants is needed to bring the program into compliance with ACC allocation or funding restraints.

##### ACOP (completed or in the pipeline to be updated)

- Changes to deferred disability benefits from the VA
- Changes required for verifications
- Additional citations under Assistance Animals
- Guidance on the use of Up-Front income verifications (UIV)
- Use of HUD EIV system
- Verification of SS and SSI benefits
- Verifying SS numbers
- Update Community Service policy
- Census Bureau added to Temporary, Nonrecurring or Sporadic Income

## **2010 Westbrook Housing ME015 VAWA Statement**

Westbrook Housing (WH) is committed to assisting individuals and families who have been victims of domestic violence, dating violence, sexual assault, or stalking by ensuring compliance with all aspects of the Violence Against Women Act.

### **Goals, Objectives, Policies and Programs**

The goals and objectives of Westbrook Housing's policies and procedures as they relate to victims of domestic violence, dating violence, sexual assault, or stalking is to help victims obtain or maintain housing, prevent domestic violence, and enhance survivor safety.

By taking advantage of several regional training opportunities Westbrook Housing has ensured that staff has the knowledge to effectively administer and comply with all provisions of the Violence Against Women Act.

Westbrook Housing staff works closely with the representatives of Westbrook Police Department and Family Crisis Services to support victims of domestic violence, dating violence, sexual assault, or stalking. Family Crisis Services accepts referrals, offers individual counseling, and group prevention programs to Westbrook Housing staff and tenants. Information about the programs and services are posted prominently in the lobby at all WH facilities.

Westbrook Housing also employs a variety of methods to directly assist victims of domestic violence, dating violence, sexual assault, or stalking to maintain their housing including: evicting the perpetrator so the victim and family can remain in their current apartment, and/or transferring the victim to another public housing unit. All residents are informed of all resources available to victims of domestic violence, dating violence, sexual assault, or stalking at the time of their annual recertification.

Westbrook Housing has:

Amended leases/assistance contracts to reflect provisions of Sections 6(l) and 8(d).

- The Housing Choice Voucher program administered through Westbrook Housing adopted the revised Tenancy Addendum (HUD-52641-A) as soon as it was made available in 1/2007.

Amended Housing Assistance Payment contracts (HAPc).

- The Housing Choice Voucher program administered through Westbrook Housing adopted the revised HAPc (HUD-52641) as soon as it was made available in 1/2007.

Amended the Administrative Plan.

- The Administrative Plan has been revised to include language throughout as to how Westbrook Housing will manage the new provisions of the act.

Obtained and disseminates certification form HUD-50066

- Notified tenants of rights and owners and managers of rights and obligations.

- Westbrook Housing has mailed documentation to both Public Housing Tenants and Section 8 participants and owners.
- Westbrook Housing posts information pertaining to VAWA in the lobby of all Westbrook Housing properties.

## **Westbrook Housing Resident Advisory Board (RAB) Comments**

The public comment period on the proposed 2011 Westbrook Housing's Annual Plan began on August 6, 2010 and ended on September 22, 2010 with a public meeting. There were no attendees at the meeting, nor were there any written and/or verbal conversations regarding the plan with anyone during the comment period.

The Resident Advisory Board met on August 25, 2010 to review the plan, had no concerns or challenges to the plan as presented.

**Challenged Elements  
Westbrook Housing  
2011 Annual Plan**

There were no challenges to elements of the agency's 2011 Annual Plan.





October 1, 2010

Mr. Howard Schindler, Division Director  
U. S. Department of Housing and Urban Development  
Office of Public Housing, New England  
Thomas P. O'Neill, Jr. Federal Building  
10 Causeway Street  
Boston, MA 02222-1092

RE: ME015 – 2011 Annual Plan Certifications

Dear Mr. Schindler;

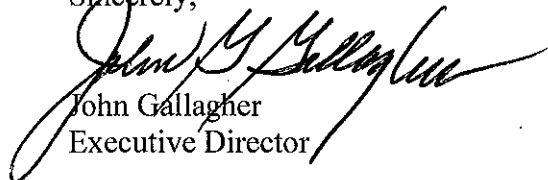
Enclosed please find the following documents in support of our 2011 Westbrook Housing Annual Plan:

- Form HUD-50077: Certifications of Compliance**
- Form HUD 50077cr: Civil Rights Certification**
- Form HUD 50077 sl: Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan**
- Form HUD-50070: Certification for a Drug-Free Workplace**
- Form HUD-50071: Certification of Payments to Influence Federal Transactions**
- Form SF-LLL: Disclosure of Lobbying Activities**
- Form SF-LLL-A: Disclosure of Lobbying Activities Continuation Sheet**

The Plan itself (50075, 50075.1, 50075.2, RAB Comments, Challenge Elements and VAWA statement) will be submitted electronically within the next few days.

Please contact me with questions at (207) 854-6805; or, [jgallagher@westbrookhousing.org](mailto:jgallagher@westbrookhousing.org).

Sincerely,

  
John Gallagher  
Executive Director

cc. Eileen Morgan



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

*Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and/or X Annual PHA Plan for the PHA fiscal year beginning 01/11, 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.

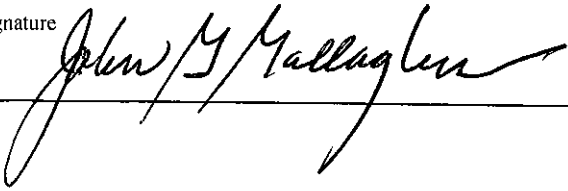
Westbrook Housing Authority  
PHA Name

ME015  
PHA Number/HA Code

       5-Year PHA Plan for Fiscal Years 20       - 20      

  X   Annual PHA Plan for Fiscal Years 2011 - 2012

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
John Gallagher	Executive Director
Signature	Date
	Oct 1, 2010

**Civil Rights Certification**

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

**Civil Rights Certification****Annual Certification and Board Resolution**

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


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

Westbrook Housing Authority

ME015

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)			
Name of Authorized Official	Lewis Emery	Title	Board Chair
Signature		Date	9/22/10

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

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

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

I, Colleen Hilton the Mayor certify that the Five Year and  
Annual PHA Plan of the Housing Authority of the City of Westbrook is consistent with the Consolidated Plan of  
City of Westbrook, Maine prepared pursuant to 24 CFR Part 91.

Colleen Hilton Mayor 10-6-10

Signed / Dated by Appropriate State or Local Official

# Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name

Westbrook Housing Authority ME015

Program/Activity Receiving Federal Grant Funding

Public Housing

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

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

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

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

- (1) The dangers of drug abuse in the workplace;
- (2) The Applicant's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

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

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

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

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

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

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

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

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

30 Liza Harmon Drive, Westbrook, Cumberland County, Maine 04092

10 Liza Harmon Drive, Westbrook, Cumberland County, Maine 04092

21 Knight Street, Westbrook, Cumberland County, Maine 04092

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 John Gallagher	Title Executive Director
Signature <i>John Y. Gallagher</i>	Date Oct 1, 2010

# Certification of Payments to Influence Federal Transactions

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

Applicant Name

Westbrook Housing Authority ME015

Program/Activity Receiving Federal Grant Funding

Public Housing

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

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

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

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

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

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

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

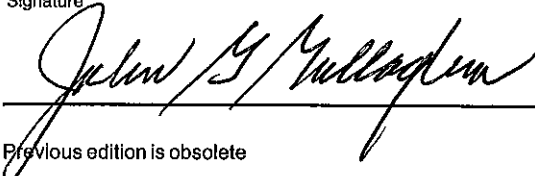
Name of Authorized Official

John Gallagher

Title

Executive Director

Signature



Date (mm/dd/yyyy)



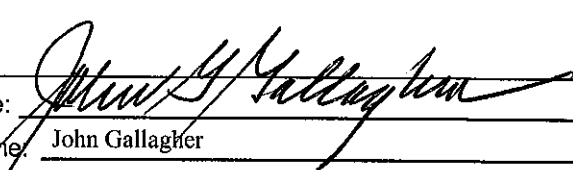
Previous edition is obsolete

form HUD 50071 (3/98)  
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

## DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352  
(See reverse for public burden disclosure.)

Approved by OMB  
0348-0046

<b>1. Type of Federal Action:</b> <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	<b>2. Status of Federal Action:</b> <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	<b>3. Report Type:</b> <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change <b>For Material Change Only:</b> year _____ quarter _____ date of last report _____
<b>4. Name and Address of Reporting Entity:</b> <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known:  Weatbrook Housing Authority 30 Liza Harmon Drive Westbrook, ME 04092 Congressional District, if known: First	<b>5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime:</b>  N/A  <b>Congressional District, if known:</b>	
<b>6. Federal Department/Agency:</b> Housing and Urban Development	<b>7. Federal Program Name/Description:</b>  CFDA Number, if applicable: _____	
<b>8. Federal Action Number, if known:</b>	<b>9. Award Amount, if known:</b> \$	
<b>10. a. Name and Address of Lobbying Registrant</b> (if individual, last name, first name, MI):	<b>b. Individuals Performing Services</b> (including address if different from No. 10a) (last name, first name, MI):	
<b>11.</b> Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.	Signature:  Print Name: John Gallagher Title: Executive Director Telephone No.: 207-854-6805      Date: 11-01	
<b>Federal Use Only:</b>		Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)



**DISCLOSURE OF LOBBYING ACTIVITIES  
CONTINUATION SHEET**

Approved by OMB  
0348-0046

Reporting Entity: Westbrook Housing Authority Page \_\_\_\_\_ of \_\_\_\_\_

N/A

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

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

**Part I: Summary**

PHA Name: **Westbrook Housing Authority**

Grant Type and Number: \_\_\_\_\_  
 Capital Fund Program Grant No: ME36P015501-02 Replacement Housing Factor Grant No: \_\_\_\_\_  
 Date of CFPF: \_\_\_\_\_


FFY of Grant: 2002  
 FFY of Grant Approval: \_\_\_\_\_

Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		28,800	28,800	28,800	28,800
3	1408 Management Improvements		22,712	22,712	22,712	22,712
4	1410 Administration (may not exceed 10% of line 21)		11,356	11,356	11,356	11,356
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		45,000	45,000	45,000	45,000
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment					
14	1483 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)		5,692	5,692	5,692	5,692
20	Amount of Annual Grant: (sum of lines 2 – 19)		113,560	113,560	113,560	113,560
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

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

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

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

<b>Part I: Summary</b>						
PHA Name: Westbrook Housing Authority	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-02 Replacement Housing Factor Grant No: Date of CFFP: _____					
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account	FFY of Grant: 2002 FFY of Grant Approval:					
<input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	<input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended
Signature of Executive Director		Original	Date	Signature of Public Housing Director	Date	
			12/02/09			

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

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

Part II: Supporting Pages											
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-02 CFFP (Yes/No): no Replacement Housing Factor Grant No:			Federal FFY of Grant: 2002						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work			
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>				
HA Wide	Operations	1406		28,800		28,800	28,800			100%	
	Management Improvements	1408		22,712		22,712	22,712			100%	
	Administration	1410		11,356		11,356	11,356			100%	
	Rehab Unit/Modernization	1460		45,000		45,000	45,000			100%	
	Contingency	1502		5,692		5,692	5,692			100%	
	Total			113,560		113,560	113,560			100%	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



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

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Westbrook Housing Authority					Federal FFY of Grant: 2002
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	5/31/04	5/30/04	5/31/06	11/30/04	
15-1 Riverview Terrace	5/31/04	5/30/04	5/31/06	11/30/04	

<sup>1</sup> 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.

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Westbrook Housing Authority					Federal FFY of Grant: 2002	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		

<sup>1</sup> 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.

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

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

**Part I: Summary**

PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-008 Replacement Housing Factor Grant No: Date of CFPP: _____		FFY of Grant: 2003	FFY of Grant Approval:
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	17,368.00	52,049.00	52,049.00	52,049.00
3	1408 Management Improvements	18,688.00	17,649.00	17,649.00	17,649.00
4	1410 Administration (may not exceed 10% of line 21)	9,344.00	9,344.00	9,344.00	9,344.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	48,036.00	14,394.00	14,394.00	14,394.00
11	1465.1 Dwelling Equipment---Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	93,436.00		93,436.00	93,436.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security -- Soft Costs				
24	Amount of line 20 Related to Security -- Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

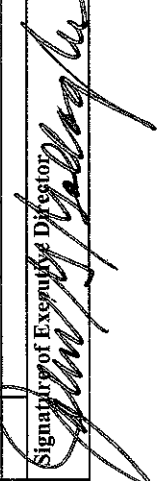
<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.



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

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

<b>Part I: Summary</b>	
PHA Name: Westbrook Housing Authority	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-03 Replacement Housing Factor Grant No: Date of CFPP: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	FFY of Grant: 2003 FFY of Grant Approval:
Line Summary by Development Account	Total Estimated Cost
Signature of Executive Director 	Revised <sup>2</sup>
Date 12/02/09	Obligated
	Expended
	Total Actual Cost <sup>1</sup>

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

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

**Part II: Supporting Pages**

PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-03 CRFP (Yes/No): no			Federal FFY of Grant: 2003			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA Wide	Operations	1406		52,049.00		52,049.00		
	Management Improvements	1408		17,649.00		17,649.00		
	Administration	1410		9,344.00		9,344.00		
	Rehab Unit/Modernization	1460		14,929.23		14,929.23		
	Total			93,436.00		93,436.00		

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



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

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

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Westbrook Housing Authority					Federal FFY of Grant: 2003
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	09/16/05	01/31/06*	09/16/07	02/21/06	*90% of funds obligated by 9/16/05
15-1 Riverview Terrace	09/16/05	01/31/06*	09/16/07	02/21/06	*90% of funds obligated by 9/16/05

<sup>1</sup> 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.

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

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Westbrook Housing Authority Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2003 Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> 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.

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

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

Part I: Summary		FFY of Grant: 2003 FFY of Grant Approval:	
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-502-0- Replacement Housing Factor Grant No: Date of CFFP:	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Estimated Cost	Total Actual Cost <sup>1</sup>
Line	Original	Revised <sup>2</sup>	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	13,035.00	13,035.00
3	1408 Management Improvements	3,724.00	3,724.00
4	1410 Administration (may not exceed 10% of line 21)	1,862.00	1,862.00
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvement		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities <sup>4</sup>		
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	18,621.00	18,621.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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

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

<sup>4</sup> RHF funds shall be included here.

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

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

<b>Part I: Summary</b>			
PHA Name: <b>Westbrook Housing Authority</b>		Grant Type and Number Capital Fund Program Grant No.: ME36-P015-502-03 Replacement Housing Factor Grant No: Date of CFFP: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Line Summary by Development Account	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Original	Revised <sup>2</sup>
Signature of Executive Director <i>John J. Gallagher</i>		Date 12/02/09	Signature of Public Housing Director Date
		Obligated	Expended

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

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

**Part II: Supporting Pages**

PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-502-03 CHFP (Yes/No): no			Federal FFY of Grant: 2003		Status of Work	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA Wide	Operations	1406		13,035		13,035	13,035	
	Management Improvements	1408		3,724		3,724	3,724	
	Administration	1410		1,862		1,862	1,862	
	Total			18,621		18,621	18,621	

<sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>2</sup> To be completed for the Performance and Evaluation Report.



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

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

Part II: Supporting Pages		Grant Type and Number Capital Fund Program Grant No: ME36-P015-502-03 CFFP (Yes/ No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2003			
PHA Name: Westbrook Housing Authority	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work	
Development Number Name/PHA-Wide Activities				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>

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

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

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

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Development Number Name/PHA-Wide Activities	Westbrook Housing Authority				Federal FFY of Grant: 2003	Reasons for Revised Target Dates <sup>1</sup>
	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)			
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	2/12/06	12/28/05	2/12/08	02/21/06		

<sup>1</sup> 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.

**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Westbrook Housing Authority	Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2003	Reasons for Revised Target Dates <sup>1</sup>
		Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		

<sup>1</sup> 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.

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

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

Part I: Summary		Grant Type and Number		FFY of Grant:	
PHA Name:		Capital Fund Program Grant No. ME36-P015-501-08 Replacement Housing Factor Grant No:		2008	
Westbrook Housing Authority		Date of CFFP:		FFY of Grant Approval:	
Type of Grant		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no: )	
Original Annual Statement		Original		Revised <sup>1</sup>	
Performance and Evaluation Report for Period Ending:		Total Estimated Cost		Total Actual Cost <sup>1</sup>	
Line	Summary by Development Account	Original	Revised <sup>1</sup>	Obligated	Expended
1	Total non-CFFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	101,926			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures		101,926	101,926	101,926
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				
18a	1501 Collateralization of Debt Service paid by the PHA				
18ba	9000 Collateralization of Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	101,926	101,926	101,926	101,926
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

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

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

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

<b>Part I: Summary</b>		FFY of Grant: 2008	
PHA Name: Westbrook Housing Authority		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No.: ME36-P015-501-08 Replacement Housing Factor Grant No:			
Date of CFFP: _____			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report	
Line	Total Estimated Cost	Revised <sup>2</sup>	Total Actual Cost <sup>1</sup>
	Original	Obligated	Expended
Signature of Executive Director <i>John P. Kelly</i>		Signature of Public Housing Director	
Date 12-01-09		Date	

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

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

**Part II: Supporting Pages**

PHA Name: Westbrook Housing Authority	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-08 Replacement Housing Factor Grant No:	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Federal FFY of Grant: 2008	Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories							
HA Wide	Unit Repairs and Improvements	1460		101,926	101,926	101,926	101,926	100 %

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

Part II: Supporting Pages									
PHA Name: Westbrook Housing Authority			Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-08 CFFP (Yes/No):			Federal FFY of Grant: 2008			
Development Number Name/PHA - Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		

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

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

U.S. Department of Housing and Urban Development  
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Part III: Implementation Schedule for Capital Fund Financing Program

Development Number Name/PHA-Wide Activities	Westbrook Housing Authority			All Funds Expended (Quarter Ending Date)	Federal FFY of Grant: 2008		
	All Fund Obligated (Quarter Ending Date)		Original Expenditure End Date		Actual Expenditure End Date	Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date					
HA Wide	06/12/2010		06/12/2012				

<sup>1</sup> 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.



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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
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**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Westbrook Housing Authority				Federal FFY of Grant: 2008	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> 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.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

Part I: Summary		Grant Type and Number		FFY of Grant:			
PHA Name:		Capital Fund Program Grant No.:		2009			
Westbrook Housing Authority		ME36-P015-501-0 Replacement Housing Factor Grant No.:		FFY of Grant Approval:			
Date of CFFP:							
Type of Grant		Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:1 )			
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report		<input type="checkbox"/> Revised Annual Statement (revision no:1 ) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Revised <sup>2</sup>	Obligated	Total Actual Cost <sup>1</sup>	Expended	
Original		Revised <sup>2</sup>		Total Actual Cost <sup>1</sup>		Expended	
1	Total non-CFFP Funds						
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	103,954					
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities <sup>4</sup>						
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 – 19)	103,954					
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security – Soft Costs						
24	Amount of line 20 Related to Security – Hard Costs						
25	Amount of line 20 Related to Energy Conservation Measures						

<sup>1</sup> To be completed for the Performance and Evaluation Report.


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

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

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

U.S. Department of Housing and Urban Development  
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<b>Part I: Summary</b>		FFY of Grant: 2009	
PHA Name: Westbrook Housing Authority		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No.: ME36-P015-501-09 Replacement Housing Factor Grant No: Date of CFFP: _____			
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account	<input type="checkbox"/> Revised Annual Statement (revision no: 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Total Estimated Cost	Revised <sup>2</sup>	Total Actual Cost <sup>1</sup>
Signature of Executive/ Director 	Original Date 12/02/09	Obligated	Expended
		Signature of Public Housing Director	
		Date	

**Part II: Supporting Pages**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-09 Replacement Housing Factor Grant No:	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					CFPP (Yes/No): no		Federal FFY of Grant: 2009		
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
HA Wide	Operations		1406	103,954					

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

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

U.S. Department of Housing and Urban Development  
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Part II: Supporting Pages

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Federal FFY of Grant: 2009		Status of Work
				Original	Revised <sup>1</sup>	Funds Obligated <sub>2</sub>	Funds Expended <sub>2</sub>	

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

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Westbrook Housing Authority	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2009	Reasons for Revised Target Dates <sup>1</sup>
Development Number Name/PHA-Wide Activities	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
HA Wide	9/30/2011		9/30/2013			

<sup>1</sup> 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.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Westbrook Housing Authority	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2009
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Development Number Name/PHA-Wide Activities					Reasons for Revised Target Dates <sup>1</sup>

<sup>1</sup> 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.

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 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

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

**Part I: Summary**

PHA Name: **Westbrook Housing Authority**

Grant Type and Number: **Capital Fund Program Grant No. ME36-P015-501-19** Replacement Housing Factor Grant No: \_\_\_\_\_  
 Date of CFFP: \_\_\_\_\_

FFY of Grant: **2010**  
 FFY of Grant Approval: \_\_\_\_\_


Line	Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: Summary by Development Account	Reserve for Disasters/Emergencies <input type="checkbox"/>	Revised Annual Statement (revision no:1 ) <input checked="" type="checkbox"/> Final Performance and Evaluation Report		Total Actual Cost <sup>1</sup>	
			Total Estimated Cost	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFF Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		105,000	65,000		
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures			20,000		
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment			20,000		
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 – 19)		105,000	105,000		
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

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



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

U.S. Department of Housing and Urban Development  
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<b>Part I: Summary</b>		FFY of Grant: 2010	
PHA Name: Westbrook Housing Authority		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-09 Replacement Housing Factor Grant No: Date of CFFP: _____			
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no. 1 ) <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost <sup>1</sup>
		Revised ?	Obligated Expended
Signature of Executive Director 		Signature of Public Housing Director	
Date 8/1/10		Date	

Part II: Supporting Pages									
PHA Name: Westbrook Housing Authority			Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-10 CFFP (Yes/No): no				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
HA Wide	Operations	1406		105,000	65,000				
ME 015-1	Dwelling Structure Unit Improvements	1460		0	20,000				
ME 015-1	Non-Dwelling Eq. Generator	1470		0	20,000				

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

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

U.S. Department of Housing and Urban Development  
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Part II: Supporting Pages

PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:		Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Status of Work
				Original	Revised <sup>1</sup>	
				Funds Obligated <sub>2</sub>	Funds Expended <sup>2</sup>	

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

Part III: Implementation Schedule for Capital Fund Financing Program				Federal FFY of Grant: 2010	
PHA Name: Development Number Name/PHA-Wide Activities	Westbrook Housing Authority All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA Wide	9/30/2012		9/30/2014		

<sup>1</sup> 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.

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

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
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**Part III: Implementation Schedule for Capital Fund Financing Program**

PHA Name: Westbrook Housing Authority  Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2010  Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>1</sup> 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.

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

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

**Part I: Summary**

PHA Name: **Westbrook Housing Authority**

Grant Type and Number: **Capital Fund Program Grant No: ME36-P015-501-10** Replacement Housing Factor Grant No: \_\_\_\_\_  
 Date of CFFP: \_\_\_\_\_

FFY of Grant: **2011**  
 FFY of Grant Approval: \_\_\_\_\_

Line	Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies <input type="checkbox"/>	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>		76,6000			
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement		6,000			
10	1460 Dwelling Structures		20,000			
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures		2,400			
13	1475 Non-dwelling Equipment					
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities <sup>4</sup>					
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 – 19)		105,000			
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security – Soft Costs					
24	Amount of line 20 Related to Security – Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					

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

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

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

<b>Part I: Summary</b>			
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-09 Replacement Housing Factor Grant No: Date of CFFP: _____	
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Summary by Development Account		<input type="checkbox"/> Revised Annual Statement (revision no. 1 ) <input type="checkbox"/> Final Performance and Evaluation Report	
Line	Total Estimated Cost	Revised ?	Total Actual Cost <sup>1</sup>
	Original	Obligated	Expended
Signature of <i>[Signature]</i> Public Housing Director	Date 8/1/10	Signature of Public Housing Director Date	

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

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

Part II: Supporting Pages													
PHA Name: Westbrook Housing Authority			Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-10 CFFP (Yes/No): NO			Federal FFY of Grant: 2011							
Development Number/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work					
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>						
HA Wide	Operations	1406			76,600								
ME 015-1	Dwelling Structure Unit Improvements	1460			10,000								
ME 015-1	Non- Dwelling Handicapped Ramp	1470			6,000								
ME 015-3	Dwelling Structure Unit Improvements	1460			10,000								
ME 015-3	Non Dwelling Laundry Room	1470			2,400								

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





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

U.S. Department of Housing and Urban Development  
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Part III: Implementation Schedule for Capital Fund Financing Program					Federal FFY of Grant: 2011
PHA Name: Westbrook Housing Authority	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
Development Number Name/PHA-Wide Activities  HA Wide					

<sup>1</sup> 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.

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  
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**Part III: Implementation Schedule for Capital Fund Financing Program**

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Federal FFY of Grant: 2011	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		

<sup>1</sup> 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—Five-Year Action Plan**

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

<b>Part I: Summary</b>					
PHA Name/Number	Westbrook Housing Authority	Locality (City/County & State)	Westbrook, Cumberland, ME	<input checked="" type="checkbox"/> Original 5-Year Plan	Revision No:
A. Development Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
B. Physical Improvements Subtotal	Annual Statement	34,600	50,000	46,000	50,000
C. Management Improvements					
D. PHA-Wide Non-dwelling Structures and Equipment					
E. Administration					
F. Other					
G. Operations		76,600	55,000	59,000	55,000
H. Demolition					
I. Development					
J. Capital Fund Financing -- Debt Service					
K. Total CFP Funds		105,000	105,000	105,000	105,000
L. Total Non-CFP Funds					
M. Grand Total		105,000	105,000	105,000	105,000

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 4/30/20011

Part I: Summary (Continuation)

PHA Name/Number Westbrook Housing Authority and Name	Work Statement for Year 1 FFY _____	Locality (City/county & State) Westbrook, Cumberland, ME	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY 2013	Original 5-Year Plan		Revision No:	
					<input checked="checked" type="checkbox"/> Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015	<input type="checkbox"/> Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____
	Annual Statement							
HA Wide			105,000	105,000	105,000		105,000	





Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing  
OMB No. 2577-0226  
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Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY 2013		
Sec	Development Number/Name General Description of Major Work Categories	Development Number/Name General Description of Major Work Categories	Estimated Cost	Estimated Cost
Annual Statement				
	Subtotal of Estimated Cost		\$ 0	
		Subtotal of Estimated Cost		\$ 0



**Capital Fund Program—Five-Year Action Plan**

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

<b>Part III: Supporting Pages -- Management Needs Work Statement(s)</b>				
Work Statement for Year 1 FFY 2011	Work Statement for Year 4 FFY 2014		Work Statement for Year 5 FFY 2015	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
Sec				
Annual Statement				
Subtotal of Estimated Cost		\$ 0		
			Subtotal of Estimated Cost \$ 0	