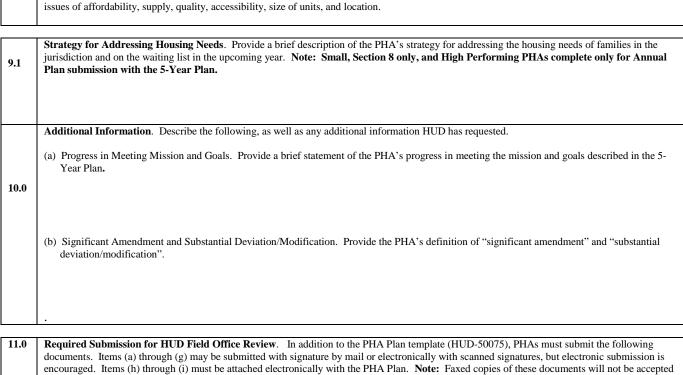
PHA 5-Year and Annual Plan

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

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

1.0	PHA Information					
	PHA Name:Westbrook Housin				ode:ME0	015
		h Performing		☐ HCV (Section 8)		
	PHA Fiscal Year Beginning: (MM/YYYY)):01/201	11			
2.0	T 4 4 1 4 6 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1	EX.1 ' '	. 10 1			
2.0	Inventory (based on ACC units at time of		g in 1.0 above)		0.5	
	Number of PH units:83			Number of HCV units:8	ມວ	
3.0	Submission Type					
3.0	5-Year and Annual Plan	X Annual	Plan Only	5-Year Plan Only		
		<u> </u>	T min om;			
4.0	PHA Consortia	PHA Consort	ia: (Check box if submitting	a joint Plan and complete table b	elow.)	
			<u> </u>		No. of Uni	its in Each
	Participating PHAs	PHA	Program(s) Included in the		Program	its iii Lacii
	Tarterpating 1117 to	Code	Consortia	Consortia	PH	HCV
	PHA 1:					
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 c	only at 5-Year	Plan update.			
<i>5</i> 1	Mission. State the PHA's Mission for serv	ina tha naada	of law in some years law in a	ome and autnomaly law in come	familias in the 1	DITA's
5.1	jurisdiction for the next five years:	ing the needs	of low-income, very low-inc	one, and extremely low income	rannines in the i	TIA S
	junisaleus i isi ilie ilelie iive yellisi					
5.2	Goals and Objectives. Identify the PHA's					
	low-income, and extremely low-income far	milies for the	next five years. Include a rep	port on the progress the PHA has	made in meetin	g the goals
	and objectives described in the previous 5-		110 5 Veer Dless			
	See Attachment I for revised go	oais for 20	oro 3- rear Plan.			
	PHA Plan Update					
				~		
6.0	(a) Identify all PHA Plan elements that ha					
	(b) Identify the specific location(s) where the elements, see Section 6.0 of the instructions		y obtain copies of the 5-Year	and Annual PHA Plan. For a co	mplete list of Pl	HA Plan
	elements, see Section 6.6 of the instructions	5.				
	Westbrook Hou	ısing	(City of Westbrook		
	30 Liza Harmo	_		2 York Street		
	Westbrook, MI			Westbrook, ME 04092		
	Wester ook, Wi	2 0 10 2 2		Wester out, WIE 04072		
7.0	Hope VI, Mixed Finance Modernization	or Developn	nent, Demolition and/or Dis	position, Conversion of Public	Housing, Home	ownership
	Programs, and Project-based Vouchers.				_	_
0.0	C. MIT	D (0.1.1	1 0 2 1' 11			
8.0	Capital Improvements. Please complete	Parts 8.1 thro	ugn 8.3, as applicable.			
0.4	Capital Fund Program Annual Statemen	t/Performan	ce and Evaluation Report.	As part of the PHA 5-Year and	Annual Plan, an	nually
8.1	complete and submit the Capital Fund Pro-					
	open CFP grant and CFFP financing.					
	Constal Frond Document D' No. A. C.	. Dl			444	C : 4 -1 E - 1
8.2	Capital Fund Program Five-Year Action Program Five-Year Action Plan, form HUI					
	for a five year period). Large capital items				Tent year, and a	dd iaiest year
	Zango capital nomb	50 111011		***		
8.3	Capital Fund Financing Program (CFFF	P).				
0.5	Check if the PHA proposes to use any p	ortion of its (Capital Fund Program (CFP)/	Replacement Housing Factor (R)	HF) to repay del	ot incurred to
	finance capital improvements.					



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

documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. **Note:** Faxed copies of these documents will not be accepted by the Field Office.

- (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
- (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
- (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
- (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
- (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
- (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
- (g) Challenged Elements
- (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

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)

- o Changes to deferred disability benefits from the VA
- o Changes required for verifications
- o Additional citations under Assistance Animals
- o Guidance on the use of Up-Front income verifications (UIV)
- o Use of HUD EIV system
- Verification of SS and SSI benefits
- o Verifying SS numbers
- o Update Community Service policy
- o 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(1) and 8(d).

o 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.

o 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.

 O 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

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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.

Sincerely,

John Gallagher

Executive Director,

cc. Eileen Morgan





PHA Certifications of Compliance with PHA Plans and Related Regulations

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

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:

Previous version is obsolete

- (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	
I hereby certify that all the information stated herein, as well as any information provid prosecute false claims and statements. Conviction may result in criminal and/or civil pe	ed in the accompaniment herewith, is true and accurate. Warning: HUD will nalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Name of Authorized Official	Title
John Gallagher	Executive Director
Signature Jew / Mallaglen	Date Oct 1, 2010

Page 2 of 2

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 Au	ıthority		ME015
PHA Name	······································	Pŀ	IA Number/HA Code
I hereby certify that all the information stated herei prosecute false claims and statements. Conviction r	n, as well as any information pro nay result in criminal and/or civi	vided in the	the accompaniment herewith, is true and accurate. Warning: HUD will s. (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

[,	Colleen Hilton	the	Mayor		certify	that th	e Five	Year	and
Annual	PHA Plan of the	Housing Authority of the	City of Westbrook	is consiste	nt with	the Cor	solidat	ed Pla	n of
City of \	Westbrook, Maine	prepared pu	arsuant to 24	CFR Part	91.				

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 Authorize the Department of Housing and Urban Development (HUD) regard	ed Official, I make the following certifications and agreements to ding 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 un-	(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
a. Publishing a statement noritying 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.	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.
b. Establishing an on-going drug-free awareness program to inform employees	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,
(1) The dangers of drug abuse in the workplace;(2) The Applicant's policy of maintaining a drug-free workplace;	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;
(3) Any available drug counseling, rehabilitation, and employee assistance programs; and	f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	to any employee who is so convicted (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the
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.;	requirements of the Rehabilitation Act of 1973, as amended; or (2) Requiring such employee to participate satisfacto-
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	rily in a drug abuse assistance or rehabilitation program ap- proved 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.
	ages) the site(s) for the performance of work done in connection with the mance shall include the street address, city, county, State, and zip code. ogram/activity receiving grant funding.)
30 Liza Harmon Drive, Westbrook, Cumberland County, Mai	ne 04092
10 Liza Harmon Drive, Westbrook, Cumberland County, Mai	ne 04092
21 Knight Street, Westbrook, Cumberland County, Maine 04	092
Check hereif there are workplaces on file that are not identified on the atta	· · · · · · · · · · · · · · · · · · ·
Thereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction ma (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	formation provided in the accompaniment herewith, is true and accurate. y result in criminal and/or civil penalties.
Name of Authorized Official	Title
John Gallagher	Executive Director
Signature / Melle (un)	Date Def 1 2010

form **HUD-50070** (3/98) ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

Certification of Payments to Influence Federal Transactions

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

Westbrook Housing Authority ME015	
Program/Activity Poppings Endored Cross Counting	
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.

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(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

[Titl

John Gallagher

Executive Director

Signature

Date (mm/dd/yyyy)

Oct 1 2010

Revious edition is obsolete

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

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 for public burden disclosure.)

4 Type of Federal Astions	0.04-4	1.4	12 2	
	2. Status of Federa		3. Report Type:	
a. contract		ffer/application	a. initial fi	
b. grant	└──¹b. initia		b. materia	
c. cooperative agreement	c. post-	award	For Material	Change Only:
d. loan		•	year	quarter
e. loan guarantee			date of la	st report
f. loan insurance				· · · · · · · · · · · · · · · · · · ·
4. Name and Address of Reporting	g Entity:	5. If Reporting En	tity in No. 4 is a S	Subawardee, Enter Name
Prime Subawardee	•	and Address of		,
Tier_ ,	if known:			
		N/A		
•	•			
Weatbrook Housing A	uthority			
Weatbrook Housing A 30 Liza Harmon Driv	'e			
Curgressional DistHet, Philona		Congressional I	District, if known:	
6. Federal Department/Agency:	· · ·	7. Federal Progra		ion:
Housing and Urban Development				
		CFDA Number i	if applicable:	
		J. Brittambor, 7	горричино.	
8. Federal Action Number, if known	7:	9. Award Amount	if known:	
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12 11 12 11		<u> </u>		
10. a. Name and Address of Lobby				(including address if
(if individual, last name, first n	ame, MI):	different from N	•	
		(last name, first	: name, MI):	
		- (6)	· MA	11 1
11 Information requested through this form is authorized		Signature:	W/ In	lagun
"" 1352. This disclosure of lobbying activities is a mal upon which reliance was placed by the tier above when	this transaction was made	, , , , , , , , , , , , , , , , , , ,	Gallagher	
or entered into. This disclosure is required pursuan information will be available for public inspection. An	t to 31 U.S.C. 1352. This	· · · · · · · · · · · · · · · · · · ·	-	/
required disclosure shall be subject to a civil penalty of		Title: Executive Dir	ector	
not more than \$100,000 for each such failure.		Telephone No.: 20	7-854-6805	Date: /// - 0.
Massage Server and Company Company of the Company o	a nijiri kangugan Silenfalengan alemp			
Federal Use Only:				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	
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	N/A		
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			:

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

Part I:	Part I: Summary						
PHA Name:	яте:	Grant Type and Number	or No. ME36P01550	pe and Number	or Grant No:	FFY of Grant: 2002	
Westb	Westbrook Housing Authority	Capital runt riogiam or Date of CFFP:	Idill NO.	Surgical Hamiltonia		FFY of Grant Approval:	
Type of	Type of Grant Original Annual Statement Original Annual Statement Original Annual Finding:	Disasters/Emergencies		☐Revised Annual Statement (revision no: 1 Final Performance and Evaluation Report	iion no:1) on Report		
	Commany by Develonment Account		Total Esti	Total Estimated Cost		Total Actual Cost ¹	
TOTAL	Summer of article and article article and article article and article article article and article		Original	Revised 2	Obligated	Expended	
-	Total non-CFP Funds					28 800	
7	1406 Operations (may not exceed 20% of line 21) 3	28,	28,800	28,800	28,800	20,000	
60	1408 Management Improvements	22,	22,712	22,712	44.356	11.75	
4	1410 Administration (may not exceed 10% of line 21)		11,356	11,356	000,11	000,11	
5	1411 Audit						
9	1415 Liquidated Damages						
7	1430 Fees and Costs						
~	1440 Site Acquisition						
6	1450 Site Improvement			000	45 000	45,000	
10	1460 Dwelling Structures	4	45,000	43,000			
11	1465.1 Dwelling Equipment-Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities 4						
18a	1501 Collateralization or Debt Service paid by the PHA	HA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct	em of Direct					
	Payment		000	F 600	5.692	5,692	
19	1502 Contingency (may not exceed 8% of line 20)		2,092	350,0 413 RBO	113.560	113,560	
20	Amount of Annual Grant: (sum of lines 2 – 19)	11	113,560	000,01			
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	Measures					

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.

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Part I: Summary					·
PHA Name:	Grant Type and Number ME36-P0	ype and Number		FFY of Grant: 2002	
Vestbrook Housing Authority	Capital runa rrogiam Grant No.	Treplacellelit Housing Lavior		FFY of Grant Approval:	
Original Annual Statement Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies eriod Ending:	Revised Annual Statement (revision no: 1	n no: 1) n Report		
Line Sammary by Develonment Account		Total Estimated Cost	Total	Total Actual Cost 1	
	Original	Revised 2	Obligated	Expended	
Signature of Executive Broken	Date	Signature of Public Housing Director	Director	Date	
JAM ZI JARDANA	12/02/09				

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

PHA Nume: Capital Fund Program Grant No. ME36-P015-501-02 CFFP (Yes/No): no Replacement Housing Factor Grant No. Number Categories Account No. Account No. Activities Account No. Account No. Activities Activities Activities Account No. Account No. Activities Acti	Part II: Supporting Pages								
Development Account No. Total Estimated Cost Total Actual Cost Account No. Account No. Total Estimated Cost Funds Funds 1406 28,800 28,800 28,800 1408 22,712 22,712 22,712 1408 22,712 22,712 22,712 1400 45,000 45,000 45,000 1460 45,000 45,000 5,692 5,692 1502 5,692 5,692 5,692 5,692 113,560 113,560 113,560 113,560	Aut		Number gram Grant No: ME ising Factor Grant N	:36-P015-50 No:	1-02 CFFP (Y	es/ No): NO	Federal FFY of 2002	Grant:	
Original Revised Funds Funds Punds Cas,800 1406 28,800 28,800 28,800 22,712 22,	9	eneral Description of Major Work Categories	Development Account No.	Quantity	Total Estin	nated Cost	Total Ac	tual Cost	Status of Work
1406 28,800 28,800 28,800 1408 22,712 22,712 22,712 1410 11,356 11,356 11,356 1460 45,000 45,000 45,000 1502 5,692 5,692 5,692 113,560 113,560 113,560					Original	Revised 1		Funds Expended ²	
1406 28,800 28,800 28,800 1408 22,712 22,712 22,712 1410 11,356 11,356 11,356 1460 45,000 45,000 45,000 1502 5,692 5,692 5,692 113,560 113,560 113,560									
1408 22,712 22,712 1410 11,356 11,356 1460 45,000 45,000 1502 5,692 5,692 113,560 113,560		Operations	1406		28,800		28,800	28,800	100%
1410 11,356 11,356 1460 45,000 45,000 1502 5,692 5,692 1503 113,560 113,560 113,560		Management Improvements	1408		22,712		22,712	22,712	100%
1460 45,000 45,000 1502 5,692 5,692 173,560 113,560 113,560		Administration	1410		11,356		11,356	11,356	100%
1502 5,692 5,692 113,560 113,560 113,560 113,560		Rebab Unit/Modernization	1460		45.000		45,000	45,000	100%
113,560 113,560 113,560 113,560		Contingency	1502		5,692		5,692	5,692	100%
					113 560		113 560	113.560	100%
		I Otal			200	=	3		
	<u>.</u>								

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

Part II: Supporting Pages	Pages								
PHA Name: Westbrook Housing Authority	g Authority	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-02 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Number tram Grant No: M sing Factor Grant D	E36-P015-5	01-02 CFFP (Y	es/ No):	Federal FFY of Grant: 2002	ant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	of Major Work ies	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ıal Cost	Status of Work
					Original	Revised ¹	Funds Obligated	Funds Expended ²	
				:					

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

Part III: Implementation Schedule for Capital Fund Financing Program	Westbrook Housing Authority	ment Number All Fund Obligated All Funds Expended Reasons for Revised Target Dates PHA-Wide (Quarter Ending Date) trivities	Original Obligation Actual Obligation Original Expenditure Actual Expenditure End Date End Date End Date End Date		A Wide 5/31/04 5/30/04 5/31/06 11/30/04	erview Terrace 5/31/04 5/30/04 5/31/06 11/30/04					
Part III: Implementation	PHA Name: Westbroom	Development Number Name/PHA-Wide Activities			HA Wide	15-1 Riverview Terrace					

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.

Part III: Implementation Schedule for Capital Fund Financing Program	Federal FFY of Grant: 2002	All Fund Obligated (Quarter Ending Date)	Original Obligation Actual Obligation Chiganal Expenditure End Date End Date End Date End Date End Date End Date								
Part III: Implementation Sched	PHA Name: Westbrook Housing Authority	Development Number Name/PHA-Wide Activities									

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.

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

Part I.	Part I: Summary						
PHA Name:	Vame:	Grant Type and Number	lumber	ype and Number Ennel Progress (Scott No. ME36-P015-501-03, Danjoosment Housing Engley (Scott No.	of or Ground Mo.	FFY of Grant:	
Westb	Westbrook Housing Authority	Date of CFFP:	Adam Craut INC.	The statement invising La	COL CLAME INC.	FFY of Grant Approval:	
Type of Original Perfection	Type of Grant Original Annual Statement Performance and Evaluation Report for Period Ending:	Reserve for Disnsters/Emergencies eriod Ending:		☐ Revised Annual Statement (revision no:1 ▼Final Performance and Evaluation Report	ision no:1) tion Report		
Line	Summary by Development Account		Total Est	Total Estimated Cost		Total Actual Cost	
			Original	Revised 2	Obligated	Expended	
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³		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						
9	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
6	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						
1.7	1499 Development Activities ⁴						
18a	1501 Collateralization or Debt Service paid by the PHA	Ą					
18ba	9000 Collateralization or Debt Service paid Via System of Direct	n of Direct					
0	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	asures					

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.

Part I: Summary					
PHA Name:	Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-03 Replacement Housing Factor Grant No:	15-501-03 Replacement Housing Factor	Grant No:	FFY of Grant: 2003	
Westplook Housing Addionly	Date of CFFF:	1		EFY of Grant Approval:	
Type of Grant					
nual Statement	Reserve for Disasters/Emergencies	Revised Annual Statement (revision no:1)	n no:1)		
Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation Report	ı Report		
Line Summary by Development Account	Total	Total Estimated Cost	Tot	Total Actual Cost 1	
	Original	Revised 2	Obligated	Expended	
Signature of Exemple Diffector	Date	Signature of Public Housing Director	irector	Date	
John Made of the	12/02/09				

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

Part II: Supporting Pages	Pages							
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-03 CFFP (Yes/ No): no Replacement Housing Factor Grant No:	36-P015-5(lo:	31-03 CFFP (Ye	% No); no	Federal FFY of Grant: 2003	Grant:	
Development Number Name/PHA-Wide Activities	General Description o Categorie	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Ac	Total Actual Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations Management Improvements	1406		52,049.00		52,049.00	52,049.00 17 6/9 00	
	Administration	1410		9,344.00		9,344.00	9,344.00	
	Rehab Unit/Modernization	1460		14,929.23		14,929.23	14,929.23	
	Total			93,436.00		93,436.00	93,436.00	

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

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

Part II: Supporting Pages	Pages								
PHA Name: Westbrook Housing Authority	g Authority	Grant Type and I Capital Fund Prog Replacement Hou	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-03 CFFP (Yes/No): Replacement Housing Factor Grant No:	IE36-P015-5	01-03 CFFP ((es/ No):	Federal FFY of Grant: 2003	ant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	of Major Work ies	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	al Cost	Status of Work
					Original	Revised ¹	Funds Obligated	Funds Expended ²	
						·			
						-			

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.

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

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.

Part III: Implementation Schedule for Capital Fund Financin	chedule for Capital Fund F	inancing Program			
PHA Name: Westbrook Housing Authority	ority				Federal FFY of Grant: 2003
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	bligated ing Date)	All Funds (Quarter Er	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	The state of the s
					1997
	, , , , , , , , , , , , , , , , , , , ,				
The state of the s					

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.

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

Part I:	Part I: Summary						
PHA Name:	ane:	Grant Type and Number	er rant No.ME36-P015-502	Grant Type and Number Canital Fund Practam Grant No. ME36-P015-502-04. Bendacement Housing Bacter Grant No.	or Grant No.	FFY of Grant:	
Westb	Westbrook Housing Authority	Date of CFFP:		··· · 爾 ······························	or Crame 190.	FFY of Grant Approval:	[#
Type of	Type of Grant Original Annual Statement Performance and Evaluation Report for Period Ending:	Reserve for Disasters/Emergencies	N M M	☐ Revised Annual Statement (revision no:1 ▼Final Performance and Evaluation Report	ion no:1) on Report		
Line	Summary by Development Account		Total Estimated Cost	ated Cost		Total Actual Cost 1	
			Original	Revised 2	Obligated	Expended	ed
	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	13,0	13,035.00		13,035.00	13,035.00	00.5
3	1408 Management Improvements	3,7	3,724.00		3,724.00	3,724.00	00
4	1410 Administration (may not exceed 10% of line 21)	1,86	1,862.00		1,862.00	1,862,00	00
5	1411 Audit						
9	1415 Liquidated Damages						
7	1430 Fees and Costs						
∞	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						
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	,A					
18ba	9000 Collateralization or Debt Service paid Via System of Direct	m of Direct					
	Payment						
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 – 19)	31. 18	18,621.00		18,621.00	18,621.00	00
21	Amount of line 20 Related to LBP Activities						
77	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	easures					

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.

Part I: Summary				
PHA Name:	Grant Type and Number ME38-D015.	202-03	*	FFY of Grant:
Westbrook Housing Authority	Capital Fund Program Grant No: " Control of Control of CFFP:	Ver 55 Replacement Housing Factor G	rant No:	FFY of Grant Approval:
Type of Grant				
nual Statement	Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: 1	no:1)	
☐ Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation Report	Report	
Line Summary by Development Account	Total Est	Total Estimated Cost		Total Actual Cost 1
	Original	Revised 2	Obligated	Expended
Signature of Ekeputive Director	Date	Signature of Public Housing Director	ector	Date
John / Jallagher	12/02/09			
1) (1)				

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

Part II: Supporting Pages	Pages	Survey of the County of the Co						
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No. ME36-P015-502-03 CFFP (Yes/ No): no Replacement Housing Factor Grant No:	36-P015-50	2-03 CFFP (Ye	ss/ No): no	Federal FFY of Grant: 2003	Grant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Ao	Total Actual Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations	1406		13,035		13,035	13,035	
ALL CONTRACTOR OF THE CONTRACT	Management Improvements	1408		3,724		3,724	3,724	
	Administration	1410		1,862		1,862	1,862	
	Total			18,621		18,621	18,621	
	The state of the s							THE RESERVE THE PROPERTY OF TH

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.

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

Part II: Supporting Pages	Pages							
PHA Name:		l Number	E38 D015 5	02-03		Federal FFY of Grant:	ant:	
Westbrook Housing Authority		ogram Grant No: Wo	No:	UZ-US CFFP (Yes/ No):	2003		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	f Major Work Development Quantity Total Estimated Cost	Quantity	Total Estimated Cost	iated Cost	Total Actual Cost	al Cost	Status of Work
				Original	Revised 1	Funds Obligated	Funds Expended ²	
	A CONTRACTOR OF THE PROPERTY O							
					:			
		·						

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

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

Part III: Implementation Schedule for Capital Fund Financing Program	chedule for Capital Fund F	inancing Program			
PHA Name: Westbrook	Westbrook Housing Authority				Federal FFY of Grant: 2003
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	oligated ing Date)	All Funds Expended (Quarter Ending Date)	Expended Iding Date)	Reasons for Revised Target Dates ¹
	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	
	Transfer to the to				

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 5 of 6

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

Part III: Implementation S	Part III: Implementation Schedule for Capital Fund Financing Program	inancing Program			
PHA Name: Westbrook Housing Authority	ority				Federal FFY of Grant: 2003
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	bligated ing Date)	All Funds Expended (Quarter Ending Date)	Expended iding Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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.

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

PHTA Name: Capacit Funds Capacit Plans		Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program	ion Report m Replacemei	nt Housing Factor and		U.S. Depa	rtment of Housir Office of)	U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011	opment ousing 7-0226
Vestbrook Housing Authority Capital Funds Program Grant No ME36-P015-501-08 Replacement Housing Factor Grant No. Project Capital Funds Program Grant No ME36-P015-501-08 Replacement Housing Factor Grant No. Project Gran	Part I	: Summary							
Propertion of Grant Total Actual Statement □ Resident of Cast Total Actual Statement Total Actual Cast Performance and Evaluation Report for Period Ending: Simmary by Development Account Total Actual Cast Original Performance and Evaluation Report Total Actual Cast Total Long-CPP Bunds 1401 non-CPP Bunds 101,926 Revised 3 Obligated 1408 Management Insprovements 1408 Management Insprovements 1401 cast and Costs 1401 cast and Costs 1401 cast and Costs 1411 Audit Landarde Dannages 1440 Site Acquisition 1401 cast and Costs 1401 cast and Costs 1401 cast and Costs 1440 Site Acquisition 1400 Site Acquisition 1401 cast and Costs 1401 cast and Costs 1401 cast and Costs 1440 Site Acquisition 1400 Site Acquisition 1400 cast and Costs 1400 cast and Costs 1401 cast and Costs 1401 cast and Costs 1452 Non-dwelling Structures 1400 Site Acquisition 1400 cast and Costs 1400 cast and Costs 1400 cast and Costs 1452 Non-dwelling Structures 1400 Site Acquisition 1400 cast and Costs 1400 cast and Costs 1452 Non-dwelling Structures 1400 cast and Costs 1400 cas	рна _N Wes	lame: tbrook Housing Authority	Grant Type an Capital Fund P Date of CFFP:	d Number rogram Grant No: ME36-P01	5-501-08 Replacement F	dousing Factor Grant	Ño:	FFY of Grant: 2008 FFY of Grant Approv	al;
Total non-CFP Funds Total Actumit Cost	Type o	nual Statement e and Evaluation Report for Pe	Disasters/Emerg	encies	Revised Annual State	ment (revision no:			
Total non-CPP Funds 1406 Operations (may not exceed 20% of line 21)	Line	Summary by Development Account		Total	Stimated Cost	Targettion we had		Actual Cost	
Total non-CPP Thursts 1408 Management Improvements 1401 Management Improvements 1402 Management Improvements 1403 Management Improvements 1403 Management Improvements 1415 Liquidated Damages 1415 Liquidated Dam				1_			1		ded
1406 Operations (may not exceed 20% of line 21)		Total non-CFP Funds	:						
1408 Management Improvements 1408 Management Improvements 1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 1411 Addit 1411 Addit 1411 Addit 1411 Addit 1411 Addit 1415 Equidated Damages 1445 Site Aquisition 1450 Site Improvement 1450 Sit	2	1406 Operations (may not exceed 20% of line 21) ³		101,926					
1410 Audit 141	2	1408 Management Improvements							
141 Audit		1410 Administration (may not exceed 10% of line 21)	(
1415 Liquidated Damages 1415 Liquidated Damages 1415 Liquidated Damages 1410 Fees and Costs 1440 Fees and Costs 1440 Fees and Costs 1440 Experiment 1440 Davelling Structures 1460 Davelling Structures 1460 Davelling Equipment —Nonexpendable 1470 Non-davelling Equipment 1485 Demoistration 1485 Demoistration 1485 Demoistration 1485 Demoistration of Debt Service paid by the PHA	5	1411 Audit							
1420 Fees and Costs 1450 Site Acquisition	9	1415 Liquidated Damages							
1440 Site Acquisition 1450 Site Acquisition 1450 Site Acquisition 1450 Site Acquisition 1450 Site Improvement 1450 Site Improvement 1450 Site Improvement 1451 Dwelling Equipment 1451 Dwelling Equipment 1452 Dwelling Equipment 1453 Dwelling Equipment 1454 Dwelling Equipment 1454 Dwelling Equipment 1454 Dwelling Equipment 1455	7	1430 Fees and Costs							
1450 Site Improvement 1450 Site Improvement 1451 Site Improvement 1451 Dwelling Structures 14651 Dwelling Structures 14651 Dwelling Structures 14651 Dwelling Structures 14651 Dwelling Equipment 1470 Non-dwelling Equipment 1470	~	1440 Site Acquisition							
1460 Dwelling Structures 1404 Dwelling Structures 1465. Dwelling Structures 147.926 707.926 1475. Non-dwelling Equipment 147.0 Non-dwelling Equipment 147.0 Non-dwelling Equipment 1485. Demolition 1485 Demolition 1485 Demolition 1492. Moving to Work Demonstration 1492 Moving to Work Demonstration 1485 Demolition 1492. Moving to Work Demonstration 1495 Moving to Work Demonstration 1495 Moving to Work Demonstration 1 492. Moving to Work Demonstration 1495 Moving to Work Demonstration 1495 Moving to Work Demonstration 1 501. Collateralization or Debt Service paid by the PHAA 24000 Collateralization or Debt Service paid by the PHAA 2 4 502. Contingency (may not exceed 8% of line 20) 101,926 101,926 Amount of Ine 20 Related to Section 504 Activities 101,926 101,926 Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Energy Constrainton Measures Amount of line 20 Related to Energy Constrainton Measures		1450 Site Improvement					700000000000000000000000000000000000000		
1465. I Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 1475 Non-dwelling Structures 1482 Demolition 1482 Demolition 1492 Moving to Work Demonstration 1492 Development Activities 1502 Confugency (may not exceed 8% of line 20) 1502 Confugency (may not exceed 8% of line 20) Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Soft Conservation Measures Amount of line 20 Related to Security - Soft Conservation Measures	10	1460 Dwelling Structures			101,926		101,926	101 93	9
1470 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 1485 Demolition 1492 Moving to Work Demonstration 1492 Moving to Work Demonstration 1492 Moving to Work Demonstration 1495 Development Activities 1 Sol Collateralization or Debt Service paid by the PHA a Solo Collateralization or Debt Service paid Via System of Direct Payment 1502 Contingency (may not exceed 8% of line 20) Amount of line 20 Related to LBP Activities Amount of line 20 Related to Security — Soft Costs Amount of line 20 Related to Security — Branch Costs Amount of line 20 Related to Security — Branch Costs Amount of line 20 Related to Energy Conservation Measures	=	1465.1 Dwelling Equipment—Nonexpendable							
1455 Non-dwelling Equipment 1445 Demoistration 1445 Demoistration 1445 Demoistration 1445 Demoistration 1445 Development Activities 1495 In Relocation Costs 1495 Development Activities 1501 Collateralization or Debt Service paid Via System of Direct 1502 Contingency (may not exceed 8% of line 20) 1502 Contingency (may not exceed 8% of line 20) 1502 Contingency (may not exceed 8% of line 20) 1502 Contingency (may not exceed 8% of line 20) 1502 Contingency (may not exceed 8% of line 20) 1603 Description Social Activities 1603 Description Social Amount of line 20 Related to Security — Hard Costs 1603 Description Description Description Direct 1603 Description D	12	1470 Non-dwelling Structures							
1485 Demolition 1492 Moving to Work Demonstration 1492 Moving to Work Demonstration 1495 I. Relocation Costs 1495 Leocation Costs 1495 Leocation Costs 1499 Development Activities of Direct 1800 Collateralization or Debt Service paid Via System of Direct Payment or Debt Service paid Via System of Direct Payment or Debt Service paid Via System of Direct Payment of Lines 2 – 19) 101,926 Amount of line 20 Related to Line 2 Leosin Sold Activities Amount of line 20 Related to Security – Bard Costs Amount of line 20 Related to Security – Hard Costs Amount of line 20 Related to Security – Hard Costs Amount of line 20 Related to Security – Hard Costs Amount of line 20 Related to Bergy Conservation Measures Amount of line 20 Related to Bergy Conservation Measures	13	1475 Non-dwelling Equipment							
1492 Moving to Work Demonstration 1492 Moving to Work Demonstration 1495 I. Relocation Costs 1499 Development Activities of 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4	1485 Demolition							
1495.1 Relocation Costs 1495.1 Relocation Costs 1499.2 Relocation Costs 1499 Development Activities 1501 Collateralization or Debt Service paid by the PHA 1502 Collateralization or Debt Service paid Via System of Direct Payment 1502 Contingency (may not exceed 8% of line 20) Amount of line 20 Related to LBP Activities Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Both Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Bergy Conservation Measures Amount of line 20 Related to Bergy Conservation Measures Amount of line 20 Related to Bergy Conservation Measures Amount of line 20 Related to Bergy Conservation Measures Amount of line 20 Related to Bergy Conservation Measures 1501 Collateralization Costs 1502 Contingency (may not exceed 8% of line 20) 1503 Contingency (may not exceed 8% of line 20) 1504 Contingency (may not exceed 8% of line 20) 1505 Contingency (may not exceed 8% of line 20) 1506 Collateralization or Debt Service 1507 Contingency (may not exceed 8% of line 20) 1508 Contingency (may not exceed 8% of line 20) 1509 Collateralization or Debt Service 1500 Collater	15	1492 Moving to Work Demonstration						-	,
1499 Development Activities 1501 Collateralization or Debt Service paid by the PHA 1501 Collateralization or Debt Service paid by the PHA 1502 Collateralization or Debt Service paid Via System of Direct 1502 Contingency (may not exceed 8% of line 20) 1502 Contingency (may not exceed 8% of line 20) Amount of line 20 Related to LBP Activities Amount of line 20 Related to Section Activities Amount of line 20 Related to Security — Soft Costs Amount of line 20 Related to Security — Hard Costs Amount of line 20 Related to Beirgy Conservation Measures Amount of line 20 Related to Beirgy Conservation Measures Amount of line 20 Related to Beirgy Conservation Measures Amount of line 20 Related to Beirgy Conservation Measures 1501 Collateralization or Debt Service paid by the PHA 1602 Collateralization or Debt Service paid by the PHA 1603 Collateralization or Debt Service paid by the PHA 1604 Collateralization or Debt Service paid by the PHA 1605 Collateralization or Debt Service paid by the PHA 1606 Collateralization or Debt Service paid by the PHA 1607 Collateralization or Debt Service paid by the PHA 1608 Collateralization or Debt Service paid by the PHA 1608 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization or Debt Service paid by the PHA 1609 Collateralization o	91	1495.1 Relocation Costs							
1501 Collateralization or Debt Service paid by the PHA 2000 Collateralization or Debt Service paid Via System of Direct Payment 1502 Contingency (may not exceed 8% of line 20) Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Beirgy Conservation Measures	17	1499 Development Activities 4							
9000 Collateralization or Debt Service paid Via System of Direct Payment 1502 Contingency (may not exceed 8% of line 20)	8a	1501 Collateralization or Debt Service paid by the PH	[A						
1502 Contingency (may not exceed 8% of line 20)	l 8ba	9000 Collateralization or Debt Service paid Via Syste.	m of Direct						
Amount of Annual Grant: (sum of lines 2 – 19) :101,926 101,926 Amount of line 20 Related to LBP Activities Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Security – Soft Costs Amount of line 20 Related to Security – Hard Costs Amount of line 20 Related to Beergy Conservation Measures Amount of line 20 Related to Beergy Conservation Measures	6	1502 Contingency (may not exceed 8% of line 20)							
Amount of line 20 Related to LBP Activities Amount of line 20 Related to Security — Soft Costs Amount of line 20 Related to Security — Hard Costs Amount of line 20 Related to Security — Hard Costs Amount of line 20 Related to Brergy Conservation Measures	2	Amount of Annual Grant (sum of lines 2 – 19)		101 926	101 928		101 928	101 026	
	-	Amount of line 20 Related to LBP Activities					27,101	3701.01	
	22	Amount of line 20 Related to Section 504 Activities							
	23	Amount of line 20 Related to Security - Soft Costs						The state of the s	
	24	Amount of line 20 Related to Security - Hard Costs							
	25	Amount of line 20 Related to Energy Conservation Ma	easures						

To be completed for the Performance and Evaluation Report.

To be completed for the Performance and Evaluation Report or a Revised Annual Statement. PHAs with under 250 units in management may use 100% of CFP Grants for operations.

**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

Office of Public and Indian Housing Expires 4/30/2011

U.S. Department of Housing and Urban Development

Expended FFY of Grant Approval: FFY of Grant: Total Actual Cost Date Obligated Grant Type and Number
Capital Fund Program Grant No. ME36-P015-501-08 Replacement Housing Factor Grant No.
Date of CFFP: Revised Annual Statement (revision no: Signature of Public Housing Director Revised 2 **Total Estimated Cost** Date 2 - 01 - 09 Original Reserve for Disasters/Emergencies Type of Grant
Original Annual Statement
Original Control Statement
Performance and Evaluation Report for Period Ending:
Line
Summary by Development Account Westbrook Housing Authority Signature of Exequity Diffector Part I: Summary PHA Name:

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

Part II: Supporting Pages	Pages							A TOTAL CONTRACTOR OF THE PROPERTY OF THE PROP	
PHA Name: Westbrook Ho	Name: Westbrook Housing Authority	Grant Type and Capital Fund Prog	Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-08 CFFP (Yes/No): Replacement Housing Factor Grant No.	E36-P015-50	11-08 CFFP (Y	es/ No):	Federal FFY of Grant: 200	Grant: 2008	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	of Major Work ies	Development Account No.	Quantity	Total Estimated Cost	nated Cost	Total Ac	Total Actual Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA Wide	Unit Repairs and Improvements	mprovements	1460		101,926	101,926	101,926	101,926	100 %

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	ATTION THE PERSON NAMED IN COLUMN TO								
							Triorist Management of the Party of the Part	A CONTRACTOR OF THE PARTY OF TH	

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.

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

Part II: Supporting Pages	Pages				AND THE RESERVE AND THE PROPERTY OF THE PROPER				
PHA Name: Westbrook Housing Authority		Grant Type and I Capital Fund Prog Replacement Hou	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-08 CFFP (Yes/No): Replacement Housing Factor Grant No:	IE36-P015-5	01-08 CFFP (*	(es/ No):	Federal FFY of Grant: 2008	ant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	f Major Work 's	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ıal Cost	Status of Work
					Original	Revised	Funds Obligated	Funds Expended ²	
						CONTRACT LA CONTRACTICA LA CONTRACT LA CONTRACT LA CONTRACT LA CONTRACT LA CONTRACTICA LA CONTRACT LA			
				CONTRACTOR OF THE PROPERTY.				4-Tecamental Control of the Control	Assessment and a second

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

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

THE REST WAS ASSESSED.	Federal FFY of Grant: 2008	nded Reasons for Revised Target Dates ¹ Date)	Actual Expenditure End Date								
entra de la vivolação de la viv		All Funds Expended (Quarter Ending Date)	Original Expenditure A End Date			06/12/2012					
inancing Program		bligated ing Date)	Actual Obligation End Date	-							
hedule for Capital Fund F	Westbrook Housing Authority	All Fund Obligated (Quarter Ending Date	Original Obligation End Date			06/12/2010					
Part III: Implementation Schedule for Capital Fund Financi	PHA Name: Westbrook	Development Number Name/PHA-Wide Activities				HA Wide					

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.

Part III: Implementation Schedule for Capital Fund Financing Program	chedule for Capital Fund F	inancing Program	ANT COMMENTER OF THE CONTRACT		
PHA Name: Westbrook Housing Authority	iority				Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	bligated ing Date)	All Funds Expended (Quarter Ending Date)	Expended ding Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
- Application	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE				And the first of t
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Expires 4/30/2011

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

Part I:	Part I: Summary	POLYWERS				
PHA Name:	ame:	Grant Type and Number	15 E E E E E E E E E E E E E E E E E E E		FFY of Grant:	
Westb	Westbrook Housing Authority	Capital Fund Program Grant No. W. 2021 Comment Replacement Housing Factor Grant No. Date of CFFP:		Grant No:	FFY of Grant Approval:	
Type of Soring	Type of Grant Original Annual Statement Reserve for Disasters/E Performance and Evaluation Report for Period Ending:	Disasters/Emergencies	Revised Annual Statement (revision no:1	n no:1) Report		
Line	Summary by Development Account	Total	Total Estimated Cost		Total Actual Cost 1	
		Original	Revised 2	Obligated	Expended	
_	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21) 3	103,954				
3	1408 Management Improvements					
4	1410 Administration (may not exceed 10% of line 21))			The state of the s	
5	1411 Audit					
9	1415 Liquidated Damages					
7	1430 Fees and Costs			E		
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					
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	IA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	of Direct				
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	leasures				

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 PRAs 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

Expires 4/30/2011

FFY of Grant: 2009 FFY of Grant Approval: Expended Total Actual Cost Date Obligated Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-09 Replacement Housing Factor Grant No: Date of CFFP: Revised Annual Statement (revision no:1) Signature of Public Housing Director Total Estimated Cost 12/02/09 Original Date ☐Reserve for Disasters/Emergencies Performance and Evaluation Report for Period Ending: Summary by Development Account Westbrook Housing Authority Signature of Executive Director Type of Grant Part I: Summary PHA Name: Line

Part II: Supporting Pages	Pages	A CONTRACTOR OF THE CONTRACTOR						
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-09 CFFP (Yes/No): no	36-P015-50	11-09 СЕFP (Y	es/ No): no	Federal FFY of Grant: 2009	Grant:	
Development Number Name/PHA-Wide	Description of Categorie	Replacement roughly raciol Grant No. [Major Work Development Q. Account No.	Quantity	Total Estimated Cost	nated Cost	Total Ac	Total Actual Cost	Status of Work
CONTAINT				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations	1406		103,954				
							,	

 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.

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

Part II: Supporting Pages	Pages	A STREET OF THE STREET WAS IN THE STREET OF	o construction of the facility and the second second records			a de maria de la facilita de la faci	of the property of the propert		
PHA Name: Westbrook Housing Authority	7	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Number gram Grant No: M sing Factor Grant D	E36-P015-5	01-09 CFFP (Yes/ No):	Federal FFY of Grant: 2009	ant:	indeed this are also
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	of Major Work ies	Development Account No.	Quantity	Total Estimated Cost	nated Cost	Total Actual Cost	ıal Cost	Status of Work
					Original	Revised ¹	Funds Obligated	Funds Expended ²	
									-
		-							

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

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

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.

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

				_							
	Federal FFY of Grant: 2009	Reasons for Revised Target Dates ¹									
		Expended iding Date)	Actual Expenditure End Date								
		All Funds Expended (Quarter Ending Date)	Original Expenditure End Date								
inancing Program		bligated ing Date)	Actual Obligation End Date								
hedule for Capital Fund F	ority	All Fund Obligated (Quarter Ending Date)	Original Obligation End Date								
Part III: Implementation Schedule for Capital Fund Financin	PHA Name: Westbrook Housing Authority	Development Number Name/PHA-Wide Activities									

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.

Part I:	Part I: Summary						
PHA Name:	lame:	Grant Type and Number	Number Pram Grant No. ME36-P015-	ype and Number Finne Program Grant No. ME36-P015-501-19. Replacement Housing Factor Grant No.	Grant No.	FFY of Grant: 2010	
Westb	Westbrook Housing Authority	Date of CFFP:	Stant Country of	Total Guirmort strattgandari		FFY of Grant Approval:	
Type o	Type of Grant Original Annual Statement Performance and Evaluation Report for Period Endine:	Reserve for Disasters/Emergencies			no:1) Report		
Line	Summary by Development Account		Total Es	Total Estimated Cost		Total Actual Cost 1	
			Original	Revised 2	Obligated	Expended	
-	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) 3		105,000	65,000			
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)	1)					
5	1411 Audit						
9	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
6	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 4						
18a	1501 Collateralization or Debt Service paid by the PHA	HA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct	tem 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	Vieasures					

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.

Part I: Summary					
PHA Name:	Grant Type and Number	501-09 Replacement Housing Factor	reart No:	FFY of Grant:	
Westbrook Housing Authority	Capital Fully Florida Date of CERP:	TOPING THOMAS TOPING TOPING TOPING	Junt 140.	FFY of Grant Approval:	
Type of Grant Cloriginal Annual Statement	Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: 1)	n no:1)		
n Report for P		Final Performance and Evaluation Report	Report		
Line Summary by Development Account	Total Est	Total Estimated Cost	To	Total Actual Cost	
	Original	Revised 2	Obligated	Expended	
Signature of Executive Divertor / 1/2, 11/2 all.	Date	Signature of Public Housing Director	irector	Date	
Jan John Sales	S/1/10				

Part II: Supporting Pages	Pages								
PHA Name: Westbrook Housing Authority	g Authority	Grant Type and Number Capital Fund Program Grant No. ME36-P015-501-10 CFFP (Yes/ No): no Replacement Housing Factor Grant No:	Number gram Grant No: ME using Factor Grant N	:36-P015-50 to:	11-10 CFFP (Ye	s/ No): no	Federal FFY of Grant: 2010	Grant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	of Major Work ies	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Ac	Total Actual Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA Wide	Operations	suo	1406		105,000	65,000			
ME 015-1	Dwelling Structure Unit Improvements	nit Improvements	1460		0	20,000			
ME 015-1	Non- Dwelling Eq. Generator	q. Generator 🖪	1470		0	20,000			
				-					

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

Part II: Supporting Pages	Pages							
PHA Name:		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-10 CFFP (Yes/ No):	E36-P015-5	01-10 CFFP (Yes/ No):	Federal FFY of Grant:	ant:	
Westplook Housing Authority		using Factor Grant D	vo:		`	2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	lated Cost	Total Actual Cost	al Cost	Status of Work
				Original	Revised 1	Funds Obligated	Funds Expended ²	

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.

al Fund Financing Program	rity Federal FFY of Grant:	All Fund Obligated All Funds Expended Reasons for Revised Target Dates (Quarter Ending Date)	igation Actual Obligation Original Expenditure Actual Expenditure End Date End Date End Date		9/30/2014					
ncing Program			Obligation d Date	0(20(2044	9/50/20/8					
Part III: Implementation Schedule for Capital Fund Financing Program	Westbrook Housing Authority	All Fund Oblig (Quarter Ending	Original Obligation A End Date	010010010	8/30/2012					
Part III: Implementation Sc	PHA Name: Westbrook	Development Number Name/PHA-Wide Activities		- F 341 4 1 1	HA WIGE					

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.

All Fund Obligated (Quarter Ending Date) (End Date) (En	Part III: Implementation Schedu	Part III: Implementation Schedule for Capital Fund Financin PHA Name:	inancing Program			Federal RFY of Grant:	
Original Obligation Actual Obligation Original Expenditure End Date	velopment Number Name/PHA-Wide		oligated ing Date)	All Funds. (Quarter En	Expended iding Date)	Reasons for Revised Target Dates	ı
		Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		_
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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.

Part I	Part I: Summary						
PHA Name:	Agme:	Grant Type a	pe and Number	Grant Type and Number Conical Broad Desirant County Mes MF38-P015-501-10, Deadlessment Manicing Eactor Grant Mes	Grant No.	FFY of Grant:	:
Westb	Westbrook Housing Authority	Capital Fund P	Frogram Crant Inc. 1915 615		Oldal INO.	FFY of Grant Approval:	proval:
Type o	Type of Grant Conginal Annual Statement Performance and Evaluation Renort for Period Ending:	Reserve for Disasters/Emergencies	gencies	Revised Annual Statement (revision no: 1	n no:1) 1.Report		
Line	Summary by Development Account		Total E.	Total Estimated Cost		Total Actual Cost	
			Original	Revised 2	Obligated	1	Expended
	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21)		76,6000				
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit						
9	1415 Liquidated Damages						
7	1430 Fees and Costs						
œ	1440 Site Acquisition						
6	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 4						
18a	1501 Collateralization or Debt Service paid by the PHA	НA					
18ba	9000 Collateralization or Debt Service paid Via System of Direc	em of Direct					
	rayment					-	
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	feasures					

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

Part I: Summary				
PHA Name:	Grant Type and Number Capital Find Program (Frant No. ME36-P015-501-09 Replacement Housing Factor Grant No.	501-09 Renlacement Housing Factor (Grant No:	FFY of Grant: 2011
Westbrook Housing Authority	Date of CFFP:	2		FFY of Grant Approval:
Time of Cront				
nual Statement	Reserve for Disasters/Emergencies	Revised Annual Statement (revision no: 1)	no:1)	
Performance and Evaluation Report for Period Ending:		Final Performance and Evaluation Report	Report	
Line Summary by Development Account	Total Est	Total Estimated Cost	Tot	Total Actual Cost 1
M. M. M.	" Original	Revised 2	Obligated	Expended
Signature of Extentive Director Joyn Illa sell.	Date	Signature of Public Housing Director	irector	Date
The state of the s	Mesencontransation of the State			

Part II: Supporting Pages	; Pages	:						
PHA Name: Westbrook Housing Authority		Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-10 CFFP (Yes/No): NO Replacement Housing Factor Grant No:	:36-P015-50	11-10 CFFP (Y.	ss/ No): no	Federal FFY of Grant: 2011	Grant:	
Development Number Name/PHA-Wide Activities	General Description of Categories	Development Account No.	Quantity	Total Estimated Cost	lated Cost	Total Ac	Total Actual Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
4 F 3 8 7 8 1 -	on of james of	4406		75 500				
	Dwelling Structure Unit Improvements			10.000				
	Non- Dwelling Handdicapped Ramp			6,000				
ME 015-3	Dwelling Structure Unit Improvements			10,000				
ME 015-3	Non Dwelling Laundry Room	1470		2,400				
								1

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

Part II: Supporting Pages	Pages								
PHA Name: Westbrook Housing Authority		Grant Type and I Capital Fund Prog Replacement Hou	Grant Type and Number Capital Fund Program Grant No: ME36-P015-501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:	E36-P015-5	01-10 CEFP (res/ No):	Federal FFY of Grant: 2011	ant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	of Major Work es	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	ıal Cost	Status of Work
		,			Original	Revised ¹	Funds Obligated	Funds Expended ²	
							•		

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

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

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Westbrook Housing Authority Development Number (Quarter Ending Date) Activities Original Obligation Actual Obligati End Date HA Wide 9/30/2013	Westbrook Housing Authority Thumber A.Wide A.Wide A.Wide Couarter Ending Date) End Date End Date Find Fin	nancing Program ligated ng Date) Actual Obligation End Date	All Funds Expended (Quarter Ending Date) Original Expenditure Actual E End Date End 9/30/2015	Expended ding Date) Actual Expenditure End Date	Federal FFY of Grant: Reasons for Revised Target Dates

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.

Part III: Implementation Schedule for Capital Fund Financing Program	chedule for Capital Fund F	inancing Program			
PHA Name: Westbrook Housing Authority	ority				Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	bligated ing Date)	All Funds Expended (Quarter Ending Date)	Expended iding Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	and the second s
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					THE PROPERTY OF THE PROPERTY O

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.

Par	Part I: Summary				-	
PHA	Name/Number Westbrook h	Housing Authority	Locality (City/County & State)	PHA Name/Number Westbrook Housing Authority Locality (City/County & State) Westbrook, Cumberland, ME	XOriginal 5-Year Plan	Revision No:
∀	Development Number and	Work Statement for Year 1	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4 FFV 2014	Work Statement for Year 5
		FFY 2011				4 4 4
B.	Physical Improvements Subtotal	Annual Statement	34,600	50,000	46,000	50,000
Ü	Management Improvements					
Ü	PHA-Wide Non-dwelling Structures and Equipment			-		
Ë	Administration		And Administratives and the second se			And the state of t
14	Other					
Ċ	Operations		76,600	55,000	59,000	55,000
H.	Demolition (1)					
Ţ.	Development					
J.	Capital Fund Financing —					
	Debt Service		-			
K.	Total CFP Funds		105,000	105,000	105,000	105,000
T.	Total Non-CFP Funds					
M.	Grand Total		105,000	105,000	105,000	105,000

. . .

Capital Fund Program-Five-Year Action Plan

Part	Part I: Summary (Continuation)	tion)				
PHA	Name/Number Westbrook F	Housing Authority	Locality (City/county & State)	PHA Name/Number Westbrook Housing Authority Locality (City/county & State)Westbrook, Cumberland, ME	XOriginal 5-Year ₽	X Original 5-Year Plan Revision No:
	Development Number and Name	Work Statement for	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
		Year 1 FFY		,		
		Annual Statement				
					A A A A A A A A A A A A A A A A A A A	entrational territories and a second territories and territori
	HA Wide		105,000	105,000	105,000	105,000
						and the second s
					Windows	

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

		Estimated Cost													0
	e				;										£5
	r Year: 2013	Quantity													timated Cos
	Work Statement for Year: FFY 2013	Development Number/Name General Description of Major Work Categories													Subtotal of Estimated Cost
(s)	:	Estimated Cost									•				0
s Statement	2	Quantity													Cost
Part II: Supporting Pages - Physical Needs Work Statement(s)	Work Statement for Year 7	Development Number/Name General Description of Major Work Categories													Subtotal of Estimated Cost
Part II: Supr	Work Statement for	Year 1 FFY 2011	eaS	Annual	Statement										

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

		Estimated Cost							- Andrew of the state of the st		- Constitution of the Cons					0
	2	Quantity														Cost
	Work Statement for Year: FFY 2015	Development Number/Name General Description of Major Work Categories														Subtotal of Estimated Cost
		Estimated Cost								ī						0
atement(s)		Quantity														st
Part II: Supporting Pages - Physical Needs Work Statement(s)	Work Statement for Year 4 FFY 2014	Development Number/Name General Description of Major Work Categories										Land to promise the second sec				Subtotal of Estimated Cost
Part II: Supp	Work Statement for	Year 1 FFY 2011	See	Annual	Statement	The second second second										

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

Work Statement for Year 1 FFY	Work Statement for Year 2			
Statement for Year 1 FFY 2011	TOTAL COMMISSION OF THE COMMIS		Work Statement for Year: 3	
Year 1 FFY 2011	FFY 2012		FFY 2013	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
			180 - A A A A A A A A A A A A A A A A A A	
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	Subtotal of Estimated Cost	0	Subtotal of Estimated Cost	0

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-6226
Expires 4/30/20011

Capital Fund Program-Five-Year Action Plan

Part III: Sup	Part III: Supporting Pages - Management Needs Work Sta	ork Statement(s)		
Work	Work Statement for Year 4		Work Statement for Year: 5	
Statement for	FFY 2014		FFY 2015	
Year 1 FFY 2011	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Ammual				
Statement				
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	A CANADA MANAGEMENT AND A CANA			
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	. Subtotal of Estimated Cost	0	Subtotal of Estimated Cost	0
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