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: The Housing Authority of the PHA Type: ☐ Small ☐ High PHA Fiscal Year Beginning: (MM/YYYY):	Performing	ord PHA Code: <u>CT-00</u> ⊠ Standard	HCV (Section 8)		
2.0	Inventory (based on ACC units at time of F Number of PH units:			umber of HCV units:2	2136	
3.0	Submission Type ☑ 5-Year and Annual Plan	Annual l	Plan Only	5-Year Plan Only		
4.0	PHA Consortia	HA Consortia	a: (Check box if submitting a joi	nt Plan and complete table b	elow.)	
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Uni Program	ts in Each
	DVA 1		Consortia	Consortia	PH	HCV
	PHA 1: PHA 2:	CT-003				-
	PHA 3:					+
5.0	5-Year Plan. Complete items 5.1 and 5.2 on	ly at 5-Year	_l Plan update.			
5.1	Mission. State the PHA's Mission for serving jurisdiction for the next five years:	ng the needs	of low-income, very low-income	e, and extremely low income	families in the P	'HA's
	jurisdiction for the next five years:					
	See Attached					
5.2	Goals and Objectives. Identify the PHA's low-income, and extremely low-income fam and objectives described in the previous 5-Y See Attached	ilies for the n				
6.0	PHA Plan Update (a) Identify all PHA Plan elements that hav (b) Identify the specific location(s) where the elements, see Section 6.0 of the instruction See Attached	e public may			omplete list of PF	IA Plan
7.0	Hope VI, Mixed Finance Modernization of Programs, and Project-based Vouchers.				Housing, Home	ownership
8.0	Capital Improvements. Please complete Pa	arts 8.1 throu	gh 8.3, as applicable.			
8.1	Capital Fund Program Annual Statement complete and submit the <i>Capital Fund Prog</i> open CFP grant and CFFP financing.					
8.2	Capital Fund Program Five-Year Action Program Five-Year Action Plan, form HUD for a five year period). Large capital items r	-50075.2, and	l subsequent annual updates (on	a rolling basis, e.g., drop cur		
8.3	Capital Fund Financing Program (CFFP) ☐ Check if the PHA proposes to use any po- finance capital improvements.		apital Fund Program (CFP)/Repl	lacement Housing Factor (RI	HF) to repay deb	t incurred to
9.0	Housing Needs. Based on information prov data, make a reasonable effort to identify the the jurisdiction served by the PHA, including other families who are on the public housing issues of affordability, supply, quality, access See Attached	housing nee g elderly fam and Section	ds of the low-income, very low- ilies, families with disabilities, a 8 tenant-based assistance waitin	income, and extremely low-indhouseholds of various rac	ncome families ves and ethnic gre	who reside in oups, and

9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.
	See Attached
10.0	Additional Information. Describe the following, as well as any additional information HUD has requested.
	(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.
	(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
	See Attached

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

 (g) Challenged Elements
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

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

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

Instructions form HUD-50075

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

1.0 PHA Information

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

2.0 Inventory

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

3.0 Submission Type

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

4.0 PHA Consortia

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

5.0 Five-Year Plan

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

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

PHA Plan Elements. (24 CFR 903.7)

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

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

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

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

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

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

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

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

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

8.2 Capital Fund Program Five-Year Action Plan

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

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

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

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

5.1 MISSION

It is the mission of the Housing Authority of the City of Hartford (HACH) to be a fiscally sound agency that provides safe, decent, and affordable high quality housing and homeownership choices. The HACH strives to become closer to our residents and community partners while being a positive catalyst for the creation of economic opportunities and independence in diverse communities. The HACH will provide a positive work environment for our employees and value added supportive services to all of our residents.

5.2 GOALS & OBJECTIVES

It is the Housing Authority of the City of Hartford's (HACH's) goal to rebuild each community to achieve high quality of life expectations through lower densities and modern housing quality standards.

HACH Goal: Provide an Improved Living Environment

Objectives: Implement measures to deconcentrate poverty by bringing higher income

public housing households into lower income developments.

Implement measures to promote income mixing in public housing by

assuring access for lower income families into higher income

developments.

Implement Public Housing security improvements.

Designate developments or buildings for particular resident groups (elderly, persons with disabilities).

HACH Goal: Promote Self-Sufficiency and Asset Development of Assisted Households

Objectives: Increase the number and percentage of employed persons in assisted

families.

Provide or attract supportive services to improve assistance recipients'

employability.

Provide or attract supportive services to increase independence for the

elderly or families with disabilities.

HACH Goal: Rebuild Each Community to Achieve High Quality of Life Expectations through

Lower Densities and Modern Housing Quality Standards

Objectives: During this new cycle, the HACH shall continue to assist a larger number

of families to move from renting to leasing with the option to purchase or homeownership. In its efforts to encourage public housing residents to become more involved in the management of public housing units, the HACH continues to support resident participation through resident council activities, and participate in key committees regarding the development of

and rehabilitation of units.

HACH, as a part of the HOPE VI Dutch Point Project, shall incorporate additional acquired units to be used either as homeownership, lease with the option to own, or rental by the end of 2012. These units shall be low maintenance and utilize the most recent technology for energy

conservation and cost effectiveness.

HACH will continue its efforts to identify and locate partners, non-profit or for-profit, locally or nationally based. These partners will work with the Authority on the acquisition, improvement, and/or development of additional housing opportunities for public housing income eligible families in a mixed financing mode.

Other Goals:

- HACH will look into the possibility of developing a wellness facility for families with children that need supportive services.
- Through the use of the Resident Service Coordinators, the HACH will continue to explore all resources that will support, encourage and strengthen families with public housing, including, for example, the healthy marriage program, parents in institutions, and grand families taking care of grandchildren. In addition, the Resident Service Coordinators will continue to explore the possibility of developing capacity in house to address the human/social needs of public housing residents associated with providing supportive services.
- HACH will explore the possibility of a not-for-profit organization and an in-house program that will train and prepare tenants for business development opportunities under the Section 3 program.

6.a

13. Asset Management

NO REVISION

NO REVISION

14. Violence Against Women Act (VAWA)

PHA Plan Elements 1. Eligibility, Selection, and Admissions Policies, including Deconcentration and Wait List Procedures REVISED 2. Transfer Policy **REVISED** 3. Financial Resources **REVISED** 4. Rent Determination **REVISED** 5. Operation and Management **REVISED** 6. Grievance Procedures **REVISED** 7. Designated Housing for Elderly and Disability Families NO REVISION 8. Community Service and Self-Sufficiency **NO REVISION** 9. Safety and Crime Prevention **NO REVISION** 10. Pets **REVISED** 11. Civil Rights Certification **NO REVISION** 12. Fiscal Year Audit REVISED

6.b POSTING OF THE PHA PLAN

The Housing Authority of the City of Hartford 180 Overlook Terrace Hartford, CT 06106

Mary Shepard Place 15 Pavilion Street Hartford, CT 06120

Dutch Point Housing 137 Wyllys Street Hartford, CT 06106

Betty Knox Apartments 141 Woodland Street Hartford, CT 06105

Percival C. Smith Tower 80 Charter Oak Avenue Hartford, CT 06106

Mary Mahoney Village 73 Vine Street Hartford, CT 06105

Kent Apartments 188 Sigourney Street Hartford, CT 06105

Housing Authority of the City of Hartford Website: hartfordhousing.org

COMPLIANCE WITH THE VIOLENCE AGAINST WOMEN'S ACT (VAWA)

Domestic Violence

In accordance with the Violence Again Women and Justice Department Reauthorization Act, the Authority has adopted a preference that recognizes and protects tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them. The Authority has also adopted an admission preference for individuals that are residing in a situation of domestic violence and that are displaced as a result of their situation. The family must provide evidence that documents the domestic violence by providing a police report that verifies their claim.

The following also applies:

- The domestic violence must be recent and individual must provide evidence of an established pattern either by utilizing HUD Form 50066, Certification of Domestic Violence, Dating Violence, or Stalking or local police record or court record, documentation signed and attested to by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional from whom the victim has sought assistance.
- Must provide evidence of an established relationship along with a lease agreement confirming co-habitation.
- The family must agree to sign a restraining order against the offender.
- The family must certify that the person who resident with them that engages in such domestic violence will not reside with the family upon placement. If the family is admitted, the Authority may deny or terminate assistance to the family for breach of this certification.
- The family will be required to sign a document stating they will not release the location of their new residents to the party responsible for the abuse and threats.
- The Authority will require that the family sign a Memorandum of Agreement (MOA), to participate in a Social Service Program for Domestic violence.

If the family is determined eligible for ht aforementioned "Domestic Violence Preference" and is housed, the family will not be eligible for a transfer into another Authority unit if it is determined that the family was responsible for the release of their whereabouts to the offender, as it will result in a financial burden to the Authority. A current family in residence with the Authority will only b entitles to one transfer.

Furthermore, the Authority will not evict a tenant for criminal activity relating to verified incidents of actual or threatened domestic violence, dating violence, or stalking.

The Authority may request a tenant under such threat of eviction to certify that the incidents in question are bona fide incidents of abuse by producing either (1) a Federal, State, tribal, territorial, or local police or court record or (2) s sworn statement, also signed by the tenant, from (a) a victim service provider; (b) an attorney; or (c) a medical professional verifying the validity of the incidents. If the certification is not received by the Authority within 14 days, the Authority may proceed with the eviction. The Authority, however, has the discretion of extending the 14-day period

All information provided to the Authority in such certification shall be retaining in confidence, except to the extent disclosure is (i) requested or consented to by the tenant in writing; (ii) required for use in an eviction proceeding; or (iii) otherwise required by applicable law.

If it is verified that the tenant is a victim of actual or threatened domestic violence, dating violence, or stalking engaged in by a member of the tenant's household, or any guest or other person under the tenant's control, the Authority may bifurcate the lease in order to evict **only** the tenant or lawful occupant engaging in these criminal acts, without evicting or otherwise penalizing the victim who is also a tenant or lawful occupant.

7.0 DEMOLITION AND DISPOSITION

Demolition/Disposition Activity Description

1a. Development name and address:**

Nelton Court, Hartford, CT 06120

- 1b. Development (project) Number: CT-003-001
- 2. Activity Type: Demolition
- 3. Application Status: Approved on May 17, 2010
- 4. Date application approved, submitted, or planned for submission:

The application was submitted 6/4/2008 and approved 5/17/2010

- 5. Number of Units Affected: 121
- 6. Coverage of Action: Total Development
- 7. Timeline for Activity:
 - a. Action Project Start Date of Activity for Relocation: May 1, 2010
 b. Action Project Start Date of Activity for Construction: July 15, 2011
 c. Projected End Date of Activity: January 31, 2013

**39 Wadsworth Street, Hartford, CT and 10-12 Wolcott Street, Hartford, CT – There is a plan being developed which may include demolition and disposition.

***17-19 Nelson Street, 21 Nelson Street, 25 Nelson Street, and 36 Putnam Street, Hartford, CT – There is a plan to rehabilitate and/or develop which may also include new construction.

9.0 STATEMENT OF HOUSING NEEDS

HOUSING NEEDS OF FAMILIES IN THE JURISDICTION SERVED BY THE HOUSING AUTHORITY OF THE CITY OF HARTFORD BY FAMILY TYPE

Family Type	Overall	Affordability	Supply	Quality	Accessible	Size	Loc
Income <=30% of AMI	16,101	5	4	3	2	4	City
Income >30% but <=50% of AMI	8,264	5	4	2	2	4	City
Income >50% but <80% of AMI	6,824	2	2	2	1	4	City
Elderly	6,151	2	2	2	1	1	City
Individuals With disabilities	**8,460	NA	NA	NA	NA	NA	NA
White/Not Hispanic	21,677	NA	NA	NA	NA	NA	NA
Black/Not Hispanic	49,412	NA	NA	NA	NA	NA	NA
Hispanic	49,260	NA	NA	NA	NA	NA	NA
Other, Not Hispanic	NA	NA	NA	NA	NA	NA	NA

Code 1-5: One being no impact, five being severe impact

Not Available – NA

Need 1: Shortage of Affordable Housing for All Eligible Populations

<u>Strategy 1</u>: Maximize number of affordable units available to the HACH within its current resources:

- Employ effective maintenance and management policies to minimize the number of public housing units off-line
- Reduce turnover time for vacated public housing units
- Reduce time to renovate public housing units
- Seek replacement of public housing units lost to the inventory through mixed finance development
- Seek replacement of public housing units lost to the inventory through Section 8 replacement housing resources
- Maintain or increase Section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- Undertake measures to ensure access to affordable housing among families assisted by the HACH, regardless of unit size required
- Maintain or increase Section 8 lease-up rates by marketing program to owners particularly those outside of areas of minority and poverty concentration
- Maintain or increase Section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptability of program

<u>Strategy 2</u>: Increase the number of affordable housing units:

- Apply for additional Section 8 units should they become available
- Leverage affordable housing resources in the community through the creation of mixed-finance housing
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- Explore/utilize use of project based housing

Need 2: Specific Family Types: Families at or Below 30% of Median

Strategy 1: Target available assistance to families at or below 30% of AMI

• Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant based Section 8 assistance

Need 3: Specific Family types: Families at or below 50% of Median

Strategy 1: Target available assistance to families at or below 50% of AMI

• Employ admissions preferences aimed at families who are working

It is the HACH strategy and goal to rebuild each community to achieve high quality of life expectations through lower densities and modern housing quality standards.

- The HACH will update its plan for the allocation funds for each development's needs as indicated in its five-year plan.
- The HACH will continue to work with the City of Hartford in its efforts to identify properties to develop additional public housing units including the utilization of project based youchers.

Need 4: Specific Family types: the elderly

<u>Strategy 1</u>: Target available assistance to the elderly

 Apply for special-purpose vouchers targeted to the elderly, should they become available

Need 5: Specific Family Types: Families with Disabilities

<u>Strategy 1</u>: Target available assistance to Families with Disabilities

- Carry out the modifications needed in public housing based on the Section 504 Needs Assessment for Public Housing
- Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- Affirmatively market to local, non-profit agencies that assist families with disabilities

Need 6: Specific Family Types: Races/Ethnicities with Disproportionate Housing Needs

<u>Strategy 1</u>: Increase awareness of HACH resources among families of races and ethnicities with disproportionate needs

 Affirmatively market to races/ethnicities shown to have disproportionate housing needs

Strategy 2: Conduct activities to affirmatively further fair housing

- Counsel Section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- Market the Section 8 Program to owners outside of areas of poverty/minority concentrations

It is the HACH's strategy and goal to rebuild each community to achieve high quality of life expectations through lower densities and modern housing quality standards.

- The HACH will update its plan for the allocation funds for each development's needs as indicated in its five-year plan.
- The HACH will continue to work with the City of Hartford in its efforts to identify properties to develop additional public housing units for public housing families to replace units that were torn down.
- The Dutch Point Homeownership Project shall be constructed to be low maintenance and utilize the most recent technology for energy conservation and cost effectiveness.
- The HACH shall continue its efforts to identify and locate partners, non-profit, or forprofit, locally or nationally based. These partners will work with the Authority on the acquisition, improvement, and/or development of additional housing opportunities for public housing income eligible families.



bathroom remodeling, mechanical systems upgrades, roof replacement, site improvements, plumbing systems upgrades, electrical system upgrades, elevator upgrades, window replacement and exterior repairs. Over the next five years, the HACH intends to continue upgrades in physical and mechanical plan support for all of the following:

- Mary Shepard Place and Scattered Site I (2011): Replacement of windows.
- New Community (COT New Construction 1998): Continue to promote homeownership through sales to existing HACH renters and outside families interested in purchasing affordable housing.
- New Stowe Village (New Construction 2002/2003): Phase 4 will be completed in 2011, consisting of 26 units of replacement housing of three bedrooms each.
- Scattered Sites (1985): Roofs, bathroom remodeling, kitchen remodeling, mechanical upgrades, site lighting, paving, porches, and windows.
- Mary Mahoney Village (1963): Roofs, mechanical upgrades, paving, site lighting, kitchen remodeling, porches, entry doors, windows, and sidewalks.
- Kent Apartments (1970): Roof, kitchen remodeling, mechanical upgrades, paving, windows.
- Smith Towers (1972): Roof, mechanical upgrades, kitchen remodeling, first floor common area improvements, windows, fire sprinklers, security upgrades, new elevator system, and lobby renovations.
- Betty Knox Apartments (1973): Roof, kitchen remodeling, bathroom remodeling, fire sprinklers, windows, reconfiguration of 8 units into 12 ADA accessible units, paving, emergency generator, elevator upgrades. Site lighting/security upgrades.
- Dutch Point Colony Hope VI Revitalization The Housing Authority of the City of Hartford is continuing the redevelopment of Dutch Point Colony in partnership with The Community Builders, Inc. and the neighborhood. The Hope VI application was approved in the amount of \$20 million by HUD in March 2003. The redevelopment program includes not only the Dutch Point site, but includes nine properties, which were acquired to enhance the overall development. The Authority, along with its development partner, relocated all of the residents and the subsequent demolition of the twenty-eight (28) onsite buildings was completed in 2005. Self-sufficiency programs were provided to the residents and the re-occupancy of the rental phases were completed in 2008. The first Phase of the redevelopment, consisting of forty-three (43) Low Income Public Housing units and thirty (30) market rate units was completed in July 2007. Phase 2 which includes forty-seven (47) Low Income Public Housing units and seven (7) market rate units was completed in 2008. The third and final phase of redevelopment consists of fifty-eight (58) single-family homeownership units of which twenty-seven (27) will be affordable and thirty-one (31) will be market rate. Groundbreaking for this third and final phase took place in 2008. As of July 1, 2011, thirteen units have been sold and another five units are under contract for sale.

10b. Significant Amendment and Substantial Deviation/Modification

Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Housing Authority of the City of

Hartford that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners.

11 a.b.c.&d.

See Attached

See Attached

<u>11 g.</u>

No Challenged Elements

<u>11 h.</u>

Capital Fund Annual Statements and Performance and Evaluation Reports Attached

<u>11 i.</u>

Capital Fund Program 5-year Action Plan Attached

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Grand Total	Total Non-CFP Funds	Total CFP Funds	Debt Service	Capital Fund Financing –	Development	Demolition	Operations	Other	Administration	Structures and Equipment	PHA-Wide Non-dwelling	Management Improvements	Physical Improvements Subtotal	Name	Development Number and	PHA Name/Number: Housing Authority of the City of Hartford	Part I: Summary
													Aphyai Statement	for Year 1 FFY: 2012	Work Statement	thority of the	
\$2,224,730.00	0.00	\$2,224,730.00			0.00	0.00	\$222,473.00	\$150,000.00	\$222,473.00	0.00	0.00	\$15,000.00	\$1,614,784.00	FFY ;2013	Work Statement for Year 2	Locality (H	
\$2,224,730.00	0.00	\$2,224,730.00			0.00	0.00	\$222,473.00	\$150,000.00	\$222,473.00	0.00	000	\$40,000.00	\$1,589,784.00	FFY :2014	Work Statement for Year 3	Locality (Hartford, CT.)	
\$2,224,730.00	0.00	\$2,224,730.00			0.00	0.00	\$222,473,00	\$150,000.00	\$222,473.00			\$40,000.00	\$1,589,784.00	FFY :2015	Work Statement for Year 4	☐Original 5-Year Plan ☐Revision No: 1	
\$2,224,730.00	0.00	\$2,224,730.00			0.00	0.00	\$222,473.00	\$260,000.00	\$222,473.00			\$40,000.00	\$1,479,784.00	FFY :2016	Work Statement for Year 5	Revision No: 1	

 Part I: Summary (Co	
(Continuation)	

Davidaniant Mumba					1101010101010
Development Inninber	Work	Work Statement for Year 2	Work Statement for Year 3	Work Statement for Year 4 Work Statemer	Work Statement for Year 5
A. and Name	Statement for	FFY	FFY	FFY	HHY
	Year 1				
	FFY				
_	Ammah				
	Statement				

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

																	Agmad	366		FO.15	Year I FFY 2012	Statement for	Part II: Sup
				;	AMP 24: Fees and Costs	AMP 1 and AMP 15: Fees and Costs	PHA Wide: Administration	PHA Wide: Management Improvements	AMP 15: Operations	AMP 6: Operations	AMP 1: Operations					керіасешень	AMP 1 and AMP 15. SS LIL,IIL: Kitchen	AMP 1 and AMP 15. SS I,II,III,: Roof Replacements	Major Work Categories	General Description of	Development		porting Pages – Physi
Subtotal of Estimated Cost																					Quantity	work Statement for Year:2013 FFY:2013	Part II: Supporting Pages - Physical Needs Work Statement(s)
\$2,224,730.00					\$75,000.00	\$75,000.00	\$222,473.00	\$15,000.00	\$75,000.00	\$75,000.00	\$72,473.00			; ;			\$1,139,784.00	\$475,000.00	,		Estimated Cost	13	ment(s)
			AMP 6 Fees and Costs	AMP 1 Fees and Costs	PHA Wide: Administration	PHA Wide: Management Improvements	AMP 15: Operations	AMP 6: Operations	AMP 1: Operations			Intercom	AMP 6: Smith Tower. Fire Alarm Upgrades and	Replacement	AMP 6: Smith Tower, Roof	Improvements, Doors, Floors, Bathrooms, Kitchen Re-painting	AMP 6: Mary Mahoney Village. Interior		Major Work Categories	Number/Name General Description of	Development		
Subtotal of Estimated Cost																					Quantity	Work Statement for Year: 2014 FFY: 2014	
\$2,224,730.00			\$130,000.00	\$20,000.00	\$222,473.00	\$40,000.00	\$75,000.00	\$75,000.00	\$72,473.00				\$614,636.00	\$250,140.00	\$225 148 00		\$750,000.00				Estimated Cost	14	

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development

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Expires 4/30/20011	ıd Indian Housing	
	Expires 4/30/20011	Office of Public and Indian Housing Expires 4/30/20011

														Statements.	Namual		Year 1 FFY	Statement for	Part II: Sup
Subt			AMP 6 Fees and Costs	AMP 1 Fees and Costs	PHA Wide: Administration	PHA Wide: Management Improvements	AMP 15: Operations	AMP 6: Operations	AMP 1: Operations	Doors and Storm Doors at SS If and III	AMP 15: Posloce Exterior	AMP 6: Kent Apartments: Repoint and Repair Brick	AMP 6: Kent Apartments Upgrade Fire Detection System and Intercom	AMP 6:Smith Tower Replace Kitchen cabinets and Countertops		General Description of Major Work Categories	Development Number/Name		Part II: Supporting Pages - Physical Needs Work Statement(s)
Subtotal of Estimated Cost																	Quantity	Work Statement for Year: 2015 FFY:2015	al Needs Work States
\$2,224,730.00			\$130,000.00	\$20,000.00	\$222,473.00	\$40,000.00	\$75,000.00	\$75,000.00	\$72,473.00	\$175,000.00	\$113,432.00	\$182,136.00	\$350,000.00	\$769,216.00			Estimated Cost	is	nent(s)
Subt		AMP 24 Fees and Costs	AMP 15 Fees and Costs	AMP 6 Fees and Costs	AMP 1 Fees and Costs	PHA Wide: Administration	PHA Wide: Management Improvements	AMP 15: Operations	AMP 6: Operations	AMP 1: Operations	AMP 24 Vacancy Prep		AMP 6 Vacancy Prep	AMP 1 Vacancy Prep	AMP 6: Smith Tower Plumbing Upgrades and Repair. New bathrooms	General Description of Major Work Categories	Development Number/Name	Wc	
Subtotal of Estimated Cost																	Quantity	Work Statement for Year: 2016 FFY:2016	
\$2,224,730.00		\$65,000.00	\$65,000.00	\$65,000.00	\$65,000.00	\$222,473.00	\$40,000.00	\$75,000.00	\$75,000.00	\$72,473.00	\$27,500.00	\$27,500.00	\$27,500.00	\$27,500.00	\$1,369,784.00		Estimated Cost	6	DAPAROS TI OUI AUGUST

										A Aftender H	P-CORP-CETAL TOTAL		Year 1 FFY	Statement for	Work	Part III: Supportin
Subtotal of Estimated Cost									Computer Software	Upgrades to ERP systems including network and Server Enhancements	Computer Hardware	General Description of Major Work Categories	Development Number/Name	FFY: 2013	Work Statement for Year: 2013	Part III: Supporting Pages - Management Needs Work Statement(s)
\$40,000.00									\$15,000.00	\$10,000.00	\$15,000.00	Estillated Cost	Estimated Cost	•)13	k Statement(s)
Subtotal of Estimated Cost										Upgrades to ERP systems including network and Server Enhancements	Computer Software	General Description of Major Work Categories	Davidonnost Virgination / Virginia	FFY :2014	VV/p=1: Statement for V/pp=: OO1	
\$40,000.00									į	\$15,000.00	\$25,000.00	Estimated Cost	Datinatia Cart	1 4		A CONTRACT TO COMMO

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/20011

										Syatoneth	X	860	1 COL 1 1 1 1	Vest 1 FEV	Work Statement for	Part III: Sup
Subtotal of Estimated Cost									Server Enhancements	Upgrades to ERP systems including network and	Computer Software		General Description of Major Work Categories	David Carmont Number Nines	Work Statement for Year :2015 FFY :2015	Part III: Supporting Pages - Management Needs Work Statement(s)
\$40,000.00										\$15,000.00	\$25,000.00		Esumated Cost	5)15	k Statement(s)
Subtotal of Estimated Cost \$40,000.00													General Description of Major Work Categories		Work Statement for Year: 2016	
\$40,000.00									-				Estimated Cost	1	16	

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

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

	16 149	15 149:		13 147.	12 147	11 146:	10 146	9 145	8 144	7 143	6 141:	5 141	4 1410	3 140	2 140	1 Tota		Line Sun	Type of Grant ☐ Original Am ☐ Performance	PHA Name: Hou City of Hartford	Part I: Summary
1499 Development Activities 4	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Damages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Total non-CFP Funds		Summary by Development Account	Type of Grant Original Annual Statement Reserve for Disasters/En Performance and Evaluation Report for Period Ending: 6/30/11	g Authority of the	ary
		ation				onexpendable							ceed 10% of line 21)		120% of line 21) 3			ount	Reserve for Disasters/Emergencies or Period Ending: 6/39/11	Grant Type and Number Capital Fund Program Grant No: CT26P003501-08 Replacement Housing Factor Grant No: Date of CFFP:	
							\$1,625,330.00						\$232,190.00	\$464,380.00			Original	Total		P003501-08	
	\$472,000.00		\$275,000.00				\$990,520.00			\$75,000.00			\$232,190.00	\$45,000.00	\$232,190.00		Revised ²	Total Estimated Cost	 ☑ Revised Annual Statement (revision no:2 ☐ Final Performance and Evaluation Report 		
	\$472,000.00		\$275,000.00				\$990,520.00			\$75,000			\$232,190.00	\$45,000.00	\$232,190.00		Obligated		vision no:2) uation Report		
	\$460,655.20		\$68,741.95				\$918,416.32		-	\$75,000			\$232,190.00	\$2,273.96	\$232,190.00		Expended	Total Actual Cost 1		FFY of Grant 2008 FFY of Grant Approval: 2008	ANTICOLOGY IN CONTROL A

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

						Expires 4/30/2011
Part I: Summary	mmary					ì
PHA Name: Housing Authority of the City of Hartford	thority Capital Fund Program Grant No: CT26P003501-08 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant Approval: 2008	oval: 2008	
Type of Grant	unt .					
Origin	Original Annual Statement Reserve for Disasters/Emergencies	icies	×	Revised Annual Statement (revision no:2	ent (revision no:2	
Perfor	Performance and Evaluation Report for Period Ending: 6/30/11			Final Performance and Evaluation Report	f Evaluation Report	
Line	Summary by Development Account	Ţ	Total Estimated Cost		Total A	Total Actual Cost 1
		Original	Revised ²	42 L	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$2,321,900.00	\$2,321,900.00	0 \$2,246,900.00	900.00	\$1,989,467.43
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signature	ester / h		Signature of Public Housing Director	lousing Director		Date
		2				

form **HUD-50075.1** (4/2008)

^{&#}x27;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.

⁴RHF funds shall be included here.

Part II: Supporting Pages	3 2								
PHA Name: Housing Au	hority of the City of Hartford	Grant Type and Capital Fund Pro CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CT26P003501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:	; CT26P0035	01-08	Federal FI	Federal FFY of Grant: 2008	∞	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	d Cost	Total Actual Cost)ost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1 Nelton Court	Operations		1406		\$53,335.00	\$53,335.00	\$53,335.00	\$53,335.00	
AMP 6 Elderly	Operations		1406		\$13,335.00		\$13,335.00	\$13,335.00	
AMP 15	Operations		1406		\$165,520.00	\$165,520.00	\$165,520.00	\$165,520.00	
PHA Wide	Management Improvements. Emphasys Conversion and Staff Training		1408			\$45,0000.00	\$45,0000.00	\$2,273.96	
PHA Wide	Central Office Management Fees		1410		\$232,190.00	\$232,190.00	\$232,190.00	\$232,190.00	;
AMP 6	A&E Fees and Costs		1430		\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00	
AMP 24	A&E Fees and Costs		1430		\$25,000.00	\$25,000.00	\$25,000.00	\$25,000.00	٠
AMP 15, AMP 24 Scattered Sites II,III/ Mary Shepard Place	Masonry Restoration		1460		0	\$639,177.37	\$639,177.37	\$589,177.37	
AMP 6. Elevator Modifications at Betty Knox			1460			\$24,469.02	\$24,469.02	\$24,469.02	
² To be o	² To be completed for the Performance and Evaluation Report	Penor							

To be completed for the Performance and Evaluation Report.

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

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

3							AMP 1 Nelton Court	AMP 1 Nelton Court		AMP I Nelton Court		Name/PHA-Wide Activities		Part II: Supporting Pages PHA Name: Housing Am
	i						Relocation Costs	Demolition		Fire Alarm Upgrades and Modernization		General Description of Major Work Categories		Part II: Supporting Pages PHA Name: Housing Authority of the City of Hartford
; ;													Capital Fund Pro CFFP (Yes/ No): Replacement Hou	Grant Tvn
							1495	1485		1460		Development Account No.	Capital Fund Program Grant No: CT26P003501-08 CFFP (Yes/ No): Replacement Housing Factor Grant No:	Grant Type and Number
												Quantity); CT26P0035	
							\$472,000.00	\$275,000.00		\$290,520.00	Original	Total Estimated Cost	01-08	
							\$472,000.00	\$275,000.00	·	\$326,873.61	Revised 1	id Cost	Tonca	Fadarol F
							\$472,000.00	\$275,000.00		\$326,873.61	Funds Obligated ²	Total Actual Cost	Er or Grame 70	Federal FEV of Crant. 2000
							460,655.20	68,741.95	-	\$304,769.93	Funds Expended ²	Cost	5	ğ
							In Progress	In Progress		Nearly Completed		Status of Work		

^{&#}x27;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

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

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	edule for Capital Fund ity of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
AMD I Nother Court					
AMP 6 Elderly	9/30/2010		9/30/2012		
AMP 15 SS, I, II, III	9/30/2010		9/30/2012		
PHA Wide	9/30/2010		9/30/2012		
AMP 24, Mary Shepard Place	9/30/2010		9/30/2012		
	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 Financing Program Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and

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

Part I: Summary	mmarv				
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: CT26P003501-09 Replacement Housing Factor Grant No: Date of CFFP:	CT26P003501-09			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant Original A	pe of Grant Original Annual Statement Reserve for Disasters/Emergencies	.	Revised Annual Statement (revision no: 3)	evision no: 3	
N Perfor	n Report f	į	☐ Final Performance and Evaluation Report	ration Report	
Line	Summary by Development Account	Tot	Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
H	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3		\$266,537.00	\$266,537.00	\$227,691.35
ယ	1408 Management Improvements	\$533,074.00	\$45,000.00	\$45,000.00	\$5,400.00
4	1410 Administration (may not exceed 10% of line 21)	\$266,537.00	\$266,537.00	\$266,537.00	\$266,537.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs		\$150,000.00	\$150,000.00	\$145,713.79
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,865,759.00	\$937,296.00	\$937,296.00	\$179,885.41
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				7 - 7
14	1485 Demolition		\$1,000,000.00	\$1,000,000.00	
15	1492 Moving to Work Demonstration		-		
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴

⁴RHF funds shall be included here.

Date	Director	Signature of Public Housing Director	/30/ (Signa	Signature of Executive Director Lucy Date	Sign
			,	25 Amount of line 20 Related to Theresy Conservation Measures	25
				24 Amount of line 20 Related to Security - Hard Costs	24
				23 Amount of line 20 Related to Security - Soft Costs	23
				Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
\$825,227.55	\$2,665,370.00	\$2,665,370.00	\$2,665,370.00	20 Amount of Annual Grant: (sum of lines 2 - 19)	20
				19 1502 Contingency (may not exceed 8% of line 20)	19
				18ba 9000 Collareralization or Debt Service paid Via System of Direct Payment	18
				18a 1501 Collateralization or Debt Service paid by the PHA	188
Expended	Obligated	Revised ²	Original		<u> </u>
Total Actual Cost 1	Total	Total Estimated Cost	Total Es	Line Summary by Development Account	Lir
	☐ Final Performance and Evaluation Report	☐ Final Perf		Performance and Evaluation Report for Period Ending: 6/30/11	\boxtimes
	☐ Revised Annual Statement (revision no: 3)	🛛 Revised An	vs.	Original Annual Statement Reserve for Disasters/Emergencies	 1[]
		-		Type of Grant	Ţ
	FFY of Grant:2009 FFY of Grant Approval: 2009	FFY of		PHA Name: Housing Authority of the City of Hartford Grant Type and Number Capital Fund Program Grant No: CT26P003501-09 Replacement Housing Factor Grant No: Date of CFFP:	Ha Ho
	:			Part I: Summary	Pa

^{&#}x27;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.

⁴ RHF funds shall be included here.

Part II: Supporting Pages	s							
PHA Name: Housing A	PHA Name: Housing Authority of the City of Hartford Gr Ca CF	Grant Type and Number Capital Fund Program Grant No: CT26P003501-09 CFFP (Yes/ No):	t No: CT26P003	501-09	Federal F	Federal FFY of Grant: 2009	99	
	Re	Replacement Housing Factor Grant No:	r Grant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
AMP 1 Nelton Court	Operations	1406		\$40,000.00	\$40,000.00	\$40,000.00	\$1,154.35	
AMP 6 Elderly	Operations	1406		\$26,537.00	\$26,537.00	\$26,537.00	\$26,537.00	
AMP 15 SS, I, II, III	Operations	1406		\$200,000.00	\$200,000.00	\$200,000.00 \$200,000.00	\$200,000.00	
PHA Wide	Management Improvements. Emphasys Conversion and Staff Training	asys 1408		\$45,000.00	\$45,000.00		\$5,400.00	
PHA Wide	Central Office Management Fees	1410		\$266,537.00	\$266,537.00	\$266,537.00 \$266,537.00	\$266,537.00	
AMP 1,and AMP 15,Adams St. Scattered Sites I,II,III	Fees and Costs for A&E Work	1430		\$90,000.00	\$90,000.00	\$90,000.00	\$90,000.00	
AMP 6:	Fees and Costs for A&E Work	1430		\$60,000.00	\$60,000.00	\$60,000.00	\$55,713.79	
3								

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

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

	:							
		\$1,000,000.00	\$1,000,000.00	\$1,000,000.00		1485	Nelton Court	AMP 1, Nelton Court
,								
Completed	\$539.04	\$539.04	\$539.04			1460	Smith Tower repair HVAC	AMP 6: Smith Tower
Completed	\$1,800.00	\$1,800.00	\$1,800.00			1460	Window Repair	AMP 1: Nelton Court
Completed	\$3,000.00	\$3,000.00	\$3,000.00	0.00		1460	VCT Replacement at Lobby	AMP 6: Betty Knox
Completed	\$30,052.54	\$30,052.54	\$30,052.54	0.00		1460	Boiler Replacement	AMP 6: Betty Knox
Completed	\$96,415.00	\$96,415.00	\$96,415.00	0.00		1460	Vacancy Rehabilitation	AMP 1 Scattered Sites
Completed	36,906.00	\$36,906.00	\$36,906.00	\$0.00		1460	Elevator Repairs	AMP 6: Smith Tower
Not Started		\$661,730.59	\$661,730.59	\$628,665.63		1460	Window Replacement	AMP 24, Mary Shepard Place
In Progress	\$12,437.83	\$106,852.83	\$106,852.83	\$309,480.00		1460	Fire Alarm Upgrades	AMP 24, Mary Shepard Place
	0.00	\$0.00	\$0.00	0.00		1460	Boiler Replacements	AMP 1 Scattered Sites 1
:								
	Funds Expended ²	Funds Obligated ²	Revised 1	Original			9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
Status of Work		Total Actual Cost	Cost	Total Estimated Cost	Quantity	Development Account No.	General Description of Major Work Categories	Development Number Name/PHA- Wide Activities
					r Grant No:	CFFP (Yes/ No): Replacement Housing Factor Grant No:	CFFP Repla	
		Federal FFY of Grant: 2009	Federal FFY)3501-09	t No: CT26P00	Grant Type and Number Capital Fund Program Grant No: CT26P003501-09		PHA Name: Housing Authority of the City of Hartford
					:		es	Part II: Supporting Pages

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

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

		AMP 1 Nelton 9/15/2011 Court:Demolition	AMP 6 Elderly 9/15/2011		AMP 15 SS T III III 0/15/2011	AMP 24: Mary Snepard 9/15/2011 Place	\downarrow	PHA Wide 9/15/2011	Date	Original	Name/PHA-Wide (Q Activities	er	PHA Name: Housing Authority of the City of Hartford	rart all: Implementation Schedule for Capital Fund Financing Program
				5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5					End Date	Act	(Quarter Ending Date)	All Fund Obligated	of Hartford	ai Fund Financing Program
		9/15/2013	9/15/2013	211212012	0/15/2013	9/15/2013		9/15/2013	End Date	Original Expenditure	(Quarter Ending Date)	All Funds Expended		
									Date	Actual Expenditure End	iding Date)	Expended		
												Reasons for Revised Target Dates 1	Federal FFY of Grant: 2009	

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.

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

Expires 4/30/2011

Part I: Summary	шпагу				TO 11 701 FOLL
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: CT26S003501-09 Replacement Housing Factor Grant No: Date of CFFP:	003501-09			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant ☐ Original A ☑ Performan	Type of Grant ☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☑ Performance and Evaluation Report for Period Ending: 6/30/11		Revised Annual Statement (revision no: 2 Final Performance and Evaluation Report	sion no: 2)	
Line	Summary by Development Account	Total E	Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
-	Total non-CFP Funds			I.	
2	1406 Operations (may not exceed 20% of line 21) 3				
ယ	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$506,016.00	\$506,016.00	\$506,016.00	\$463,864.49
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$317,147.00	\$100,000.00	\$100,000.00	\$100,000.00
00	1440 Site Acquisition				
9	1450 Site Improvement	\$300,000.00	\$1,560,000.00	\$1,560,000.00	\$1,263,119.10
10	1460 Dwelling Structures	\$3,762,000.00	\$2,894,147.00	\$2,894,147.00	\$2,862,996.72
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 *				

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.

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

U.S. Department of Housing and Urban Development

Office of Public and Indian Housing OMB No. 2577-0226

Housing Authority of the City of Hartford Signature of Executive Director 23 2 23 22 21 22 19 18a 18ba Line Part I: Summary PHA Name: Type of Grant Performance and Evaluation Report for Period Ending: 6/30/11 Original Annual Statement Summary by Development Account Amount of line 20 Related to Energy Conservation Measures Amount of line 20 Related to Security - Hard Costs 9000 Collateralization or Debt Service paid Via System of Direct Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to LBP Activities Amount of Annual Grant: (sum of lines 2 - 19) 1502 Contingency (may not exceed 8% of line 20) 1501 Collateralization or Debt Service paid by the PHA Amount of line 20 Related to Section 504 Activities Grant Type and Number
Capital Fund Program Grant No: CT26S003501-09
Replacement Housing Factor Grant No: Payment ☐ Reserve for Disasters/Emergencies \$\frac{8}{2\chi} \$5,060,163.00 Original Signature of Public Housing Director Total Estimated Cost \$5,060,163.00 Revised 2 Revised Annual Statement (revision no: 2 Final Performance and Evaluation Report FFY of Grant: 2009 FFY of Grant Approval: 2009 \$5,060,163.00 Obligated Total Actual Cost \$4,689,980.31 Expires 4/30/2011 Expended Date

^{&#}x27;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.

⁴RHF funds shall be included here.

ĭ A Sh	Sh	A	TA Y.™	A	Þ	Į, A	[,I		PF	T		Ac Ac	H.	P
	AMP 6 Mary Mahoney Village	AMP 24 Mary Shepard Place	Mary Mahoney Village, Kent Apartment, Smith Tower	AMP 6 Betty Knox,	AMP 15, SS I, II, III	AMP 1, AMP 15, SS. I, II, III	I, II, III	AMP 1 AMP 15 SS	PHA Wide			Development Number Name/PHA-Wide Activities	IA Name: Housing Au	Part II: Supporting Pages
	Roof Replacement	Vacancy Preparation		Vacancy Preparation	Vacancy Preparation	Construction Management fees	plans, specs and CA work for SS, I, II and III Exterior and Site Improvements	Design Services for the preparation of	Central Office Management Fees			General Description of Major Work Categories	PHA Name: Housing Authority of the City of Hartford C: C: Rt	
							I, II	2,					Grant Type and Capital Fund Proj CHFP (Yes/ No): Replacement Hou	
	1460	1460		1460	1460	1430	1700	1430	1410			Development Account No.	Grant Type and Number Capital Fund Program Grant No: CT26S003501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	
												Quantity	lo: CT26S0035	
***************************************	\$400,000.00	\$220,000.00		\$220,000.00	\$335,000.00	0.00	\$J1,,1 + /.00	\$317 147 00	\$506,016.00		Original	Total Estimated Cost	501-09	
2000000	\$260,000.00	\$40,000.00		\$60,000.00	\$275,000.00	\$50,000.00	\$00,000.00	650 000 00	\$506,016.00		Revised ¹	ed Cost	Federal F	
200000	\$260,000.00	\$40,000.00		\$60,000.00	\$275,000.00	\$50,000.00	\$00,000.00	\$50,000,00	\$506,016.00		Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2009	
40.000.00	\$228,849.72	\$40,000.00		\$60,000.00	\$275,000.00	\$50,000.00	\$00,000.00	\$50,000,00	\$463,864.49		Funds Expended ²	Cost	99	
Completed	Final Requisition in review	Completed		Completed		Completed	Comprehen	Completed				Status of Work		

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

 $^{^2}$ To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages	PK .								
PHA Name: Housing Authority of the City of Hartford	uthority of the City of	Grant Type and Capital Fund Pro CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CT26S003501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:	No: CT26S0	03501-09	Federal FF	Federal FFY of Grant: 2009		
Development Number Name/PHA- Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	t ts	Total Actual Cost	st	Status of Work
	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
AMP 6/Kent Apartments	Roof Replacement		1460		0.00	\$148,000.00	\$148,000.00	\$148,000.00	Completed
AMP 15/Scattered Sites II, III	Exterior Improvements/Boiler Replacements		1460		\$1,901,000.00	\$1,554,147.00	\$1,554,147.00	\$1,554,147.00	Completed
AMP 6: Betty Knox Apartments	Masonry Repairs and Improvements		1460		\$361,000.00	\$0.00			
AMP 1 Scattered Sites 1	Boiler Replacements		1460		0.00	\$287,093.00	\$287,093.00	\$287,093.00	Completed
AMP 1, Scattered Sites I	Site Improvements		1450		0.00	\$500,000.00	\$500,000.00	203,119,10	
AMP 15/Scattered Sites II, III	Site Improvements		1450		0.00	\$910,000.00	\$910,000.00	\$910,000.00	Completed
AMP 6 Mary Mahoney Village	Sidewalk Replacements		1450		\$100,000.00	\$150,000.00	\$150,000.00	\$150,000.00	Completed
AMP 6: Marv	Completion of Exterior		1450		\$150,000,00	\$0.00			
Shepard Place	Improvements		1450		00.000,001\$	\$0.00			
AMP 6: Betty Knox Apartments	Site and Lighting Improvements		1450		\$150,000.00	\$0.00			
					:				

^{&#}x27;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	dule for Capital Fund	Financing Program			
PHA Name: Housing Authority of the City of Hartford	ty of the City of Hartfi	ord			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
	Date				
PHA Wide	3/17/10		3/17/12		
PHA Wide	3/17/10		3/17/12		
	3/17/10		3/17/12		
AMP 1, AMP 15, SS. I, II,	3/17/10		3/17/12		
AMP 6	3/17/10		3/17/12		
		:			

Dbligation 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.

PHA Name: Housing Authority of the City of Hartford	ty of the City of Hartf	ord ord			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
				·	

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: Summary	UMMATY				T. CO. 10 C. 10 C. 10 C. 1
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: CT26P003501-10 Replacement Housing Factor Grant No: Date of CFFP:	P003501-10			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant ☐ Original A ☐ Performan	nnual Statement		Revised Annual Statement (revision no:1	evision no:I)	
Line	Summary by Development Account	Total	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	\$441,537.00	\$258,054.00	\$258,054.00	\$193,540.00
ω	1408 Management Improvements	\$40,000.00	\$215,000.00	\$215,000.00	\$167,886.97
4	1410 Administration (may not exceed 10% of line 21)	\$266,537.00	\$258,054.00	\$258,054.00	\$258,054.00
S	1411 Audit			,	
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$100,550.00	\$200,550.00	\$171,025.28	\$142,753.19
8	1440 Site Acquisition				
9	1450 Site Improvement	\$150,000.00	\$75,000.00	•	
10	1460 Dwelling Structures	\$1,626,746.00	\$1,509,590.00	\$660,569.41	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures		\$24,292.00	\$17,285.50	\$17,285.50
13	1475 Non-dwelling Equipment	\$40,000.00	\$40,000.00	\$11,114.46	\$11,114.46
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities *	-			

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

^{*}RHF funds shall be included here.

Part I: Summary PHA Name:				FFY of Grant:2010	110	
Housing Authority of the City of Hartford	thority Capital Fund Program Grant No: CT26P003501-10 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant Approval: 2010	pproval: 2010	
Type of Grant	ınt					
Origina	Original Annual Statement Reserve for Disasters/Emergencies	į.	⊠ R	evised Annual Stat	Revised Annual Statement (revision no: 1	-
	mones and Evoluction Demonstrate Desiral English COMM	i] [Constitution of the consti	
N retrotil	renormance and Evanuation report for renorming: 0/30/11			inal Performance	☐ Final Performance and Evaluation Report	
Line	Summary by Development Account	To	Total Estimated Cost		Total	Total Actual Cost 1
		Original	Revised 2	2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba (9000 Collateralization or Debt Service paid Via System of Direct					
			•			•
19	1502 Contingency (may not exceed 8% of line 20)					
20 .	Amount of Annual Grant: (sum of lines 2 - 19)	\$2,665,370.00	\$2,580,540.00		\$1,591,102.65	\$790.634.12
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24 .	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures	,				
Signature	Signature of Brecutive Director AM Call L Date ABO (Signature of Public H	Housing Director		Date
	2	こノン こ				

form **HUD-50075.1** (4/2008)

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 II: Supporting Pages PHA Name: Housing Au	hority of the City of Hartford	Grant Type and Number	CTTO CROOSE		Federal F	Federal FFY of Grant: 2010	0	
	CFFP (Yes/ No): Replacement Ho	CFFP (Yes/ No): Replacement Housing Factor Grant No:	hant No:	;				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Öst	Status of Work
				Original	Revised ^T	Funds Obligated ²	Funds Expended ²	
AMP 1	Operations	1406		00.000,06\$	\$43,000.00	\$43,000.00		
AMP 6	Operations	1406		\$108,310.00	\$27,000.00	\$27,000.00	\$5,486.50	
AMP 15	Operations	1406		\$243,227.00	\$188,054.00	\$188,054.00	\$188,054.00	
PHA Wide	Management Improvements. Emphasys Conversion and Staff Training	1408		\$40,000.00	\$215,000.00	\$215,000.00	\$167,886.97	
PHA Wide	Central Office Management Fees	1410		\$266,537.00	\$258,054.00	\$258,054.00	\$258,054.00	
AMP 6: Smith Tower,	A&E Fees for Common Area	1430		00.000,25\$	\$20,000.00			
AMP 1 and AMP	A& E Fees for Window Replacement	1430		\$40,000.00	\$20,000.00			
15Adams St. Scattered Sites I,II,III								
AMP 24: Mary	A& E Fees for Landscaping,	1430		\$25,550.00	\$21,503.71			
Shepard Place	Sidewalks, parking, fencing and exterior lighting							
AMP 6: Smith	PNA Preparation	1430		\$52,500.00	\$52,500.00	\$52,500.00	\$52,500.00	
AMP 1,6,15,24	Report preparation for Section 3	1430		\$480.00	\$480.00	\$480.00	\$480.00	
AMP 1: Nelton Court/Scattered Sites I	PNA Preparation	1430		\$10,759.00	\$10,759.00	\$10,759.00	\$10,759.00	
AMP 15: Scattered Sites II and III	PNA Preparation	1430		\$4,033.00	\$4,033.00	\$4,033.00	\$4,033.00	
AMP 1,6,15,24	Grant Application	1430		\$10,761.00	\$10,761.00	\$10,761.00	\$10,761.00	
AMP 1/Nelton Court	Construction Document Review	1430			\$11,215.81	\$11,215.81	\$11,215.81	
AMP 1/Nelton Court	Construction Oversight for SSI	1430	_	\$28,223.82	\$28,223.82	\$28,223.82	\$601.72	
Central Office	IAQ Testing and Report	1430		\$6,244.00	\$6,244.00	\$6,244.00	\$5,594.00	

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.

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

Part II: Supporting Pages										
PHA Name: Housing Authority of the City of Hartford	xthority of the City of	Grant Type and Capital Fund Pro, CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CT26P003501-10 CFFP (Yes/ No): Replacement Housing Factor Grant No:	No: CT26P00: Grant No:	3501-10	Feda	ral FFY o	Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	Cost		Total Actual Cost	Cost	Status of Work
					Original	Revised 1		Funds Obligated ²	Funds Expended ²	
AMP 24: Mary Shepard Place	Environmental Testing and Advertising for Window Replacement Project		1430	i	\$4,768.00	\$4,768.00		\$4,768.00	\$4,768.00	
AMP 15: Scattered Sites II and III	Boundary Survey at New Britain Avenue and Additional Design for Project 1569-10	ain n for	1430		\$27,383.59	\$27,383.59	9	\$27,383.59	27,383.59	
AMP 1,6,15,24	RFP for Pest Management		1430		\$3,150.00	\$3,150.00		\$3,150.00	\$3,150.00	
AMP 1: Scattered Sites I	Environmental Testing at 600 Garden Street		1430		\$1,759.00	\$1,759.00		\$1,759.00	\$1,759.00	
AMP 1,6,15,24	Advertising		1430		\$6,148.07	\$6,148.07		\$6,148.07	\$6,148.07	
AMP 1,6,15,24	J. Damelia Davis Bacon Review	W	1430		\$3,600.00	\$3,600.00		\$3,600.00	\$3,600.00	
AMP 6 Mary Shepard Place	Completion of landscaping, sidewalks, parking, fencing and exterior lighting	ıd	1450		\$150,000.00	\$75,000.00	Õ		•	-
AMP 1, AMP 15:Adams St. Scattered Sites I.II,III,	Window Replacement		1460	-	\$1,376,746.00	\$660,569.41	41	\$660,569.41		
AMP 6 Smith Tower,	Common Area Improvements Interior Hallways and Lobby		1460		\$250,000.00	\$250,000.00	06			
Central Office	Ductwork Cleaning and HVAC Service	С	1470			\$24,292.00	0	\$24,292.00	\$24,292.00	
AMP 1	Non Dwelling Equipment(Snow Removal Equipment	W	1475		\$10,000.00	\$10,000.00	Ŏ			

_	_	_	_		_		
		i		AMP 15			AMP 6
			250 Pickup)	Non Dwelling Equipment (Ford F- 1475		Removal Equipment	Non Dwelling Equipment (Snow
				1475			1475
				\$20,000.00			\$10,000.00
				\$20,000.00			\$10,000.00
			•				

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

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

Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	edule for Capital Fundity of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	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	
PHA Wide	8/17/2012		8/17/2014		
AMP 1,	8/17/2012		8/17/2014		
AMP 6	8/17/2012		8/17/2014		
AMP 15	8/17/2012		8/17/2014		
AMP 24	8/17/2012		8/17/2014		

² To be completed for the Performance and Evaluation Report.

Part I: Summary	ummary				
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: CT26P003501-11 Replacement Housing Factor Grant No: Date of CFFP:	2003501-11			FFY of Grant: 2011 FFY of Grant Approval: 2011
Type of G	Type of Grant ☐ Reserve for Disasters/Emergencies ☐ Performance and Evaluation Report for Period Ending:		Revised Annual Statement (revision no: Final Performance and Evaluation Report	n no:) Report	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
-	Total non-CFP Funds	Original	Revised*	Obligated	Expended
2	1406 Operations (may not exceed 20% of line 21) ³	\$222,473.00			
W	1408 Management Improvements	\$40,000.00			
4	1410 Administration (may not exceed 10% of line 21)	\$222,473.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$150,000.00			
∞	1440 Site Acquisition				
9	1450 Site Improvement	\$361,000.00			
10	1460 Dwelling Structures	\$1,229,784.00			
11	1465.1 Dwelling Equipment—Nonexpendable		,		
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	\$40,000.00			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4		:		

¹ To be completed for the Performance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Date	sing Director	Signature of Public Housing Director	3/62	Date of the Market of the Control of	mengic
	5			Energy Conservation Measures	2 2
				Amount of line 20 Related to Security - Hard Costs	24
				Amount of line 20 Related to Security - Soft Costs	23
				Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
			\$2,224,730.00	Amount of Annual Grant: (sum of lines 2 - 19)	20
				1502 Contingency (may not exceed 8% of line 20)	19
				9000 Collateralization or Debt Service paid Via System of Direct Payment	18ba
				1501 Collateralization or Debt Service paid by the PHA	18a
Expended	Obligated	Revised 2	Original		
Total Actual Cost 1	Total	Total Estimated Cost	Total l	Summary by Development Account	Line
	☐ Final Performance and Evaluation Report	☐ Fina		Performance and Evaluation Report for Period Ending:	Perfo
	Revised Annual Statement (revision no:	☐ Revi	cies	Original Annual Statement Reserve for Disasters/Emergencies	Origi
				Grant	Type of Grant
	FFY of Grant:2011 FFY of Grant Approval: 2011			me: Authority Capital Fund Program Grant No: CT26P003501-11 ty of Replacement Housing Factor Grant No: Date of CFFF:	PHA Name: Housing Authority of the City of Hartford
				Part I: Summary	Part I: S
Expires 4/30/2011					

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.

⁴RHF funds shall be included here.

Part II: Supporting Pages	S				j				
PHA Name: Housing Au	hority of the City of Hartford	Grant Typ	Grant Type and Number			Federal	Federal FFY of Grant: 2011)11	
		Capital Fund Pro CFFP (Yes/ No):	Capital Fund Program Grant No: CT26P003501-11 CFFP (Yes/ No):	o: CT26P0035	01-11				
		Replacemer	Replacement Housing Factor Grant No:	rant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
AMP 1	Operations		1406		\$42,473.00		K		
AMP 6	Operations		1406		\$90,000.00				
AMP 15	Operations		1406		\$90,000.00				
PHA Wide	Management Improvements. Emphasys		1408		\$40,000.00				
PHA Wide	Central Office Management Fees		1410		\$222,473.00				
AMP 6	A&E Fees and Costs		1430		\$125,000.00				
AMP 15 Scattered Sites I	A& E Fees and Costs		1430		\$25,000.00				
AMP 15. Scattered Site I	Replace Retaining wall at Park Street		1450		\$360,000.00				
<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	hority of the Oity of	and Trans and Name						
PHA Name: Housing Authority of the City of Hartford		Grant Type and Number Capital Fund Program Grant No: CT26P003501-11 CFFP (Yes/ No): Replacement Housing Factor Grant No:	int No: CT26P00 tor Grant No:	3501-11	Federal F	Federal FFY of Grant: 2011		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
99999				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
AMP 6 Kent Apartments	Common Area Improvements	1460		\$250,000.00		C		
AMP 6. Mary Mahoney Village	Window and Exterior Door Replacement	1460		\$304,784.00				
AMP 6 Betty Knox	Replace Cabinets and Countertops	ps 1460		\$675,000.00				
Aparuments								
					;			
AMP 1	Non Dwelling Equipment (Lawn Care Equipment)	n 1475		\$15,000.00				
AMP 6	Non Dwelling Equipment(Lawn Care Equipment)	1475		\$15,000.00				
AMP 15	Non Dwelling Equipment(Maintenance Tools and Power Tool Equipment	1475		\$10,000.00				
	;							

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

form **HUD-50075.1** (4/2008)

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund l	financing Program			
PHA Name: Housing Authority of the City of Hartford	ity of the City of Hartfo	ord			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	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	
PHA Wide	8/2/2013		8/2/2015		
AMF 1,	8/2/2013		8/2/2015		
AMP 6	8/2/2013		8/2/2015		
AMP 15	8/2/2013		8/2/2015		
AMP 24	8/2/2013		8/2/2015		

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						LAPITOS 7/30/2011
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford	Grant Type and Number Capital Fund Program Grant No: CT26P003501-12 Replacement Housing Factor Grant No: Date of CFFP:	26P003501-12		-	FFY	FFY of Grant: 2012 FFY of Grant Approval: 2012
Type of Grant ⊠ Original Ar ☐ Performan	pe of Grant Original Annual Statement Original Annual Statement Performance and Evaluation Report for Period Ending:	☐ Reserve for Disasters/Emergencies for Period Ending:		☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	revision no:)		
Line	Summary by Development Account	ecount	Tota	Total Estimated Cost		Total Actual Cost 1	ral Cost 1
			Original	Revised ²	Obligated		Expended
_	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) 3	eed 20% of line 21) 3	\$222,473.00				
S	1408 Management Improvements	ents	\$40,000.00				
4	1410 Administration (may not exceed 10% of line 21)	exceed 10% of line 21)	\$222,473.00				
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs		\$250,000.00				
«	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures		\$1,419,784.00				
11	1465.1 Dwelling Equipment—Nonexpendable	-Nonexpendable					
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	[\$70,000.00				
14	1485 Demolition						
15	1492 Moving to Work Demonstration	stration					
16	1495.1 Relocation Costs				į		
17	1499 Development Activities 4	•					

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

^{&#}x27;To be completed for the Penformance and Evaluation Report.

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

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages	8		:					
PHA Name: Housing Au	thority of the City of Hartford	Grant Type and Number Capital Fund Program Grant No: CT26P003501-12 CFFP (Yes/ No): Replacement Housing Factor Grant No:	o; CT26P0035	01-12	Federal	Federal FFY of Grant: 2012	012	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 1	Operations	1406		\$52,473.00				
AMP 6	Operations	1406		\$85,000.00				
AMP 15	Operations	1406		\$85,000.00				
PHA Wide	Management Improvements, Emphasys Conversion and Staff Training	s 1408		\$40,000.00				
PHA Wide	Central Office Management Fees	1410		\$222,473.00				
AMP 6	A&E Fees and Costs	1430		\$150,000.00				
AMP 24	A& E Fees and Costs	1430		\$100,000.00				
AMP 6. Smith Tower	Elevator Modernization/Upgrades	1460		\$50,000.00				

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 PHA Name: Housing Authority of the City of Hartford		Grant Type and Number Capital Fund Program Grant No: CT26P003501-12 CFFP (Yes/ No): Replacement Housing Factor Grant No:	nt No: CT26P00	9501-12	Federal FF	Federal FFY of Grant: 2012		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
AMP 6 Smith Tower	Trash Compactor Replacement	t 1460		\$60,000.00		(,	
AMP 6. Kent Apartments	Repaint Common Areas	1460		\$36,984.00				
AMP 24	Replace Roof and Storm Doors at Mary Sheppard Place	s at 1460		\$850,000.00				
AMP 24	Repair and Paint Stairs and Platforms at Mary Shepard Place	Се		\$75,000.00				
AMP 6	Replace Unit and Common Area Flooring along with new Rubber Stair treads	ea 1460 er		\$347,800				
AMP 1	Non Dwelling Equipment	1475		\$25,000.00				
AMP 6	Non Dwelling Equipment(Lawn Care Equipment, Snow Removal Equipment)	/n 1475		\$25,000.00				
AMP 24	Non Dwelling Equipment(Sedan/Vehicle)	1475		\$20,000.00				
3		. 						

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.

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

		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	AMP 24 7/17/2014	AMP 15 7/17/2014			PHA Wide 7/17/2014		Or Obliga I	Development Number Name/PHA-Wide Activities	PHA Name: Housing Authority of the City of Hartford	Part III: Implementation Schedule for Capital Fund Financing Program
)14)14)14)14)14	1	Original Actual C Obligation End End Date	All Fund Obligated (Quarter Ending Date)	City of Hartford	Capital Fund Financing
-					7/17/2016	7/17/2016	7/17/2016	7/17/2016	7/17/2016		Actual Obligation Origin	(e) 11	-	Program
			ļ)16)16)16)16)16		Original Expenditure End Date	All Funds Expended (Quarter Ending Date)		
											Actual Expenditure End Date	Expended ding Date)		
												Reasons for Revised Target Dates	Federal FFY of Grant: 2012	

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.

Replacement Housing Grants

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

ranti: Summary	Шшагу				
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: Capital Fund Program Grant No: Capital Fund Program Grant No: CT26R003502-03 Date of CFFP:	26R003502-03		o Azzi	FFY of Grant: 2003 FFY of Grant Approval: 2003
Type of Grant Original A	pe of Grant Original Annual Statement Description Reserve for Disasters/Emergencies	□ Revis	Revised Annual Statement (revision no:)	
L ETOTION	renormance and availation Report for renog anding: 0/30/11		Rinal Performance and Evaluation Report		
Line	Summary by Development Account	Lotal Estur		Total Actu	d Cost '
1	Total non-CFP Funds	Original	Seu Obligated		Expended
2	1406 Operations (may not exceed 20% of line 21) 3				
ω	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities '	\$2,725,563.00	\$2,72	\$2,725,563.00	\$703,696.15

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.

⁴RHF funds shall be included here.

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

	Signature	25	24	23	22	21	20	19	18ba	18a		Line	Perform	Origin	Type of Grant	of the City of Hartford	PHA Name: Housing Authority	
> 7	Signature of Executive Director	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA.		Summary by Development Account	Performance and Evaluation Report for Period Ending: 6/30/11	Original Annual Statement Reserve for Disasters/Emergencies	ant	of Capital rund riogram orant No: CT26R003502-03 Date of CFFP:	thority	
	$\frac{1}{2}$ /// Signati	/ /					\$2,725,563.00				Original	Total Esti		encies				
	Signature of Public Housing Director										Revised 2	Total Estimated Cost	☐ Final Perfor	☐ Revised Annu			FFY of Grant: 2003	
	rector						\$2,725,563.00				Obligated	Total	Final Performance and Evaluation Report	Revised Annual Statement (revision no:		, n	FFY of Grant:2003 FFY of Grant Approval: 2003	
	Date						\$703,696.15				Expended	Total Actual Cost 1		· ·	•			

² To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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⁴ RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: Housing A	PHA Name: Housing Authority of the City of Hartford	Grant Type and Capital Fund Pros	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No):	9.		Federal I	Federal FFY of Grant: 2003	3	
		Replacem	Replacement Housing Factor Grant No: CT26R003502-03	rant No: CT26	R003502-03				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	st	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
CT00300001	Redevelopment of Nelton Court		1499		\$2,725,563.00		\$2,725,563.00	\$703,696.15	
¹ To be	¹ To be completed for the Performance and Evaluation Report of a Reviced Appual Statement	ion Report o	ır a Revised Annııal Stat	†marma					

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

Part II: Supporting Pages									
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fu CFFP (Ye Replaceme	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-03	ant No: CT26R	.003502-03	Federal I	Federal FFY of Grant: 2003	8	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
	:								
¹ To be c	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement	Report or a	Revised Annual Statemer	7					

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			
PHA Name: Housing Authority of the City of Hartford	ity of the City of Harts	ord			Federal FFY of Grant: 2003
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	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	
CT00300001	1/9/2010		07/30/2011		
5 5 5 9					

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: Summary	ummary							
PHA Name: Hou City of Hartford	sing Authority of the	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-04 Date of CFFP:	T26R003502-04				FFY of (FFY of Grant 2004 FFY of Grant Approval: 2004
Type of Grant ☐ Original An ☐ Performance	mual Statement e and Evaluation Report	Reserve for Disasters/Emergencies t for Period Ending: 6/30/11		☐ Revis	Revised Annual Statement (revision no: Final Performance and Evaluation Report	sion no: tion Report	·	
Line	Summary by Development Account	unt		Total Estimated Cost	Cost		Total Actual Cost 1)ost 1
			Original	Revised ²	sed ²	Obligated	Ex	Expended
1	Total non-CFP Funds							
2	1406 Operations (may not exceed 20% of line 21) 3	20% of line 21) 3					i	
w	1408 Management Improvements							
4	1410 Administration (may not exceed 10% of line 21)	eed 10% of line 21)						
2	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs							
8	1440 Site Acquisition							i
9	1450 Site Improvement							
10	1460 Dwelling Structures							
11	1465.1 Dwelling Equipment—Nonexpendable	nexpendable						
12	1470 Non-dwelling Structures							
13	1475 Non-dwelling Equipment							
14	1485 Demolition							
15	1492 Moving to Work Demonstration	tion						
16	1495.1 Relocation Costs							
17	1499 Development Activities 4		\$3,189,406.00			\$3,189,406.00	\$6	\$61,791.65

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.

⁴RHF funds shall be included here.

					Expires 4/30/2011
Part I: Summary	mmary				
PHA Name: Housing Authority	thority Grant Type and Number Capital Fund Program Grant No:		4 4	FFY of Grant:2004 FFY of Grant Approval: 2004	
Hartford			-		
Type of Grant	ınt				
X Origin	Original Annual Statement Reserve for Disasters/Emergencies	rgencies	☐ Revis	☐ Revised Annual Statement (revision no:	
Perfor	Performance and Evaluation Report for Period Ending: 6/30/11		☐ Fins	☐ Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	ı	Total Ac	Total Actual Cost 1
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct				
	Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$3,189,406.00		\$3,189,406.00	\$61,791.65
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 Refaled to Energy Conservation Measures	,			
Signatur	Signature of Executive Tirector	Date $2/ $ Signature of Public Housing Director	Public Hous	ing Director	Date

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

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Part II: Supporting Pages									
PHA Name: Housing Au	PHA Name: Housing Authority of the City of Hartford	Grant Type Capital Fund CFFP (Yes/ Replacement	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-04	o: rant No: CT26	R003502-04	Federal]	Federal FFY of Grant: 2004	4	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	st	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
CT00300001	Redevelopment of Nelton Court	1,	1499		\$3,189,406.00		\$3,189,406.00	\$61,791.65	
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
			•						
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¹ To be	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	on Report or a	Revised Annual Stat	ement.				i	

 $^{^2}$ To be completed for the Performance and Evaluation Report.

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

Part II: Supporting Pages			_						
PHA Name: Housing Auth	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fo CFFP (You Replacem	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-04	ant No: CT26R	003502-04	Federal I	Federal FFY of Grant: 2004	004	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
							¢		
		İ							
		İ							
¹ To be cor	To be completed for the Performance and Evaluation Report of a Revised Annual Statement	Penort or a	Darricad Annual Cratemer	•					

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 PHA Name: Housing Authority of the City of Hartford	edule for Capital Fund ity of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2004
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	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	
CT00300001	1/9/2010		1/9/2012		

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

10 1400 Dwelling Structures 11 1465.1 Dwelling Equipme 12 1470 Non-dwelling Struct 13 1475 Non-dwelling Equip 14 1485 Demolition 15 1492 Moving to Work De 16 1495.1 Relocation Costs							9 1450 Site Improvement	8 1440 Site Acquisition	7 1430 Fees and Costs	6 1415 Liquidated Damages	5 1411 Audit	4 1410 Administ	3 1408 Managen	2 1406 Operation	1 Total non-CFP Funds		Line Summary by 1	Type of Grant ⊠ Original Annual Statement □ Performance and Evaluatio		PHA Name: Housing Authority of the	Part I: Summary
1492 Moving to Work Demonstration 1495.1 Relocation Costs	o Work Demonstration	on .	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	Structures	ovement	isition	Costs	rd Damages		1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Funds		Summary by Development Account	pe of Grant Original Annual Statement Reserve for Disasters/Emergencies Performance and Evaluation Report for Period Ending: 6/30/11	Capital Fund Program Grant No: CT26R003502-05 Replacement Housing Factor Grant No: CT26R003502-05 Date of CFFP:		
																Original	Tot		T26R003502-05		
																Revised ²	Total Estimated Cost	 ☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report 			
											-					Obligated		ision no: ation Report		i	
																Expended	Total Actual Cost 1		er i oi Grant Approvai: 2005	FFY of Grant: 2005	

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.
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⁴RHF funds shall be included here.

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

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

Expires 4/30/2011

Tank to Committee	and a second				
PHA Name: Housing Authority of the City of Hartford	et uthority of Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-05 Date of CFFP:		ম ম	EFY of Grant:2005 EFY of Grant Approval: 2005	
Type of Grant	ant				
Origi	Original Annual Statement Reserve for Disasters/Emergencies	nies	☐ Revis	Revised Annual Statement (revision no:)
Perfo	Performance and Evaluation Report for Period Ending: 6/30/11		☐ Fina] Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost		Total Ac	Total Actual Cost 1
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)			- 4	
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$2,952,824.00		\$2,952,824.00	
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	, ,			
Signatur	Signature of Executive Director Date Date Date Date Date Date Date Date	Date $\alpha/\beta/ $ Signatur	Signature of Public Hous	Housing Director	Date

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.

⁴RHF funds shall be included here.

Part II: Supporting Pages	<i>S</i> .								
PHA Name: Housing Au	PHA Name: Housing Authority of the City of Hartford	Grant Type and Capital Fund Prog	Grant Type and Number Capital Fund Program Grant No: CHEP (Yes/ No):);		Federal I	Federal FFY of Grant: 2005	or .	
		Replacement I	Replacement Housing Factor Grant No: CT26R003502-05	rant No: CT26	R003502-05				
Development Number Name/PHA-Wide	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	st	Status of Work
3					Original	Revised 1	Finds	Funde	
					Ongmai	NEVISED	Pullus Obligated ²	Expended ²	
CT00300001	Redevelopment of Nelton Court	1499	99		\$2,952,824.00		\$2,952,824.00		
				:					
			•						
¹ To be	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	on Report or a R	evised Annual State	ement					

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

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fu	Grant Type and Number Capital Fund Program Grant No:			Federal E	Federal FFY of Grant: 2005)05	
		CFFP (Ye Replacem	CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-05	rant No: CT26F	003502-05				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
		·							
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To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

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

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	dule for Capital Fund. ty of the City of Hartf	Financing Program Ord			Federal FFY of Grant: 2005
Development Number	All Fund	All Fund Obligated	All Fund	All Funds Expended	Reasons for Revised Target Dates
Name/PHA-Wide Activities	(Quarter E	(Quarter Ending Date)	(Quarter E	(Quarter Ending Date)	reasons for revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT00300001	1/9/2010		1/9/2012		
		:			

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.

17	16	15	14	13	12	11	10	9	8	7	6	5	4	ß	2	1		Line	Type of Grant ⊠ Original Ar □ Performance	City of Hartford	Part I: Summary
1499 Development Activities 4	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Damages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Total non-CFP Funds		Summary by Development Account	pe of Grant Original Annual Statement Reserve for Disasters/Emergencies Performance and Evaluation Report for Period Ending: 6/30/11	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-06 Date of CFFP:	Part I: Summary PHA Name: Housing Authority of the
\$3,697,239.00																	Original Revised ²	Total Estimated Cost	☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	CT26R003502-06	
\$3,697,239.00																	Obligated Expended	Total Actual Cost 1	(revision no:) valuation Report	FFY of Grant Approval: 2006	PEV 16 COLLAND

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.

⁴ RHF funds shall be included here.

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Office of Public and Indian Housing
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Signatuhe	25	_	23	22	21	20	19	18ba	18a		Line	Perfori	Origin	Type of Grant	FHA Name: Housing Authority of the City of Hartford	Part I: Summary
Signature of Dixector	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 6/30/11	Original Annual Statement Reserve for Disasters/Emergencies	ant	drant Type and Number of Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-06 Date of CFFP:	mmary
Date $34/1$ Signature						\$3,697,239.00				Original	Total Estimated Cost		yencies .			
Signature of Public Housing Director										Revised 2	d Cost	∏ Final	☐ Reviseo		EE.	
ng Director						\$3,697,239.00				Obligated	Total Actual Cost 1	☐ Final Performance and Evaluation Report	Revised Annual Statement (revision no:		FFY of Grant:2006 FFY of Grant Approval: 2006	
Date									-	Expended	ual Cost 1					

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.

⁴RHF funds shall be included here.

									CT00300001 Redevelopment of Nelton Court		Development Number General Description of Major Work Name/PHA-Wide Categories Activities	uthority of the City of Hartford
									1499		Development Quantity Account No.	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-06
									\$3,697,239.00	Original	ity Total Estimated Cost	CT26R003502-06
										Revised 1	ost	Federal I
									\$3,697,239.00	Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2006
										Funds Expended ²)St	6
											Status of Work	

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

² To be completed for the Performance and Evaluation Report.

PHA Name: Housing Auth	PHA Name: Housing Authority of the City of Hartford	Grant Ty	pe and Number	•		Federal F	Federal FFY of Grant: 2006	06	
		Capital Hu CFFP (Ye Replacem	Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-06	rant No: CT26R	2003502-06				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	ated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	

 $^{^2}$ To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	edule for Capital Fundity of the City of Hartí	Financing Program ord			Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund (Quarter B	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
CT00300001	1/9/2010		1/9/2012		
15 15 15 15 15 15 15 15 15 15 15 15 15 1					

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.

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17	16	15	14	13	12	11	10	9	8	7	6	5	4	ω	2	1		Line	Type of Grant ⊠ Original A □ Performan	PHA Name: Housi City of Hartford
1499 Development Activities 4	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Damages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21)	Total non-CFP Funds		Summary by Development Account	Type of Grant ☐ Reserve for Disasters/Emergencies ☐ Performance and Evaluation Report for Period Ending: 6/30/11	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-07 Date of CFFP:
\$3,863,626.00																	Original	7		CT26R003502-07
																	Revised ²	Total Estimated Cost	☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	
\$3,863,626.00											. !						Obligated		revision no: aluation Report	
																	Expended	Total Actual Cost 1		FFY of Grant: 2007 FFY of Grant Approval: 2007

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

⁴RHF funds shall be included here.

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

Expires 4/30/2011

				TA TALAN	
Date	irector	Signature of Public Housing Director	11/23	Signature of Executive Director (1)	Ç.
			/	Amount of line 20 Related to Energy Conservation Measures	23
				Amount of line 20 Related to Security - Hard Costs	24
				23 Amount of line 20 Related to Security - Soft Costs	23
				2 Amount of line 20 Related to Section 504 Activities	22
				Amount of line 20 Related to LBP Activities	21
	\$3,863,626.00		\$ 3,863,626.00	20 Amount of Annual Grant: (sum of lines 2 - 19)	20
				9 1502 Contingency (may not exceed 8% of line 20)	19
				18ba 9000 Collateralization or Debt. Service paid Via System of Direct Payment	185
					18a
Expended	Obligated	Revised 2	Original		
Total Actual Cost 1	Total A	nated Cost	Total Estimated Cost	Line Summary by Development Account	Lin
	Final Performance and Evaluation Report	☐ Final Perfo		Performance and Evaluation Report for Period Ending: 6/30/11	
)	Revised Annual Statement (revision no:	☐ Revised Am	nes	Original Annual Statement Reserve for Disasters/Emergencies	
				Type of Grant];
	FFY of Grant:2007 FFY of Grant Approval: 2007	FFY of		PHA Name: Housing Authority of the City of Hartford Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-07 Date of CFFP:	Ha Hal
				Tarri Summany	ė

¹ To be completed for the Performance and Evaluation Report.
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⁴ RHF funds shall be included here.

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

Part II: Supporting Pages	S					ı			
PHA Name: Housing Au	hority of the City of Hartford	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-07	rant No: CT26	R003502-07	Federal I	Federal FFY of Grant: 2007	7	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	st	Status of Work
			:		Original	Revised 1	Funds Obligated ²	Funds Expended ²	
CT00300001	Redevelopment of Nelton Court		1499		3,863,626.00		\$3,863,626.00		
¹ To be	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Starement.	n Report or a	Revised Annual State	ment					

¹⁰ be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: Housing Auti	PHA Name: Housing Authority of the City of Hartford G	Grant Type and Number Capital Fund Program Grant No:	ant No:		Federal F	Federal FFY of Grant: 2007	07	
	⊠ C	CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-07	ctor Grant No: CT26	003502-07				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	ork Development Account No.	nt Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	tsost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
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 $^{^2}$ To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	edule for Capital Fundity of the City of Hartf	Financing Program Ord			Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	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	
CT00300001	1/9/2010		1/9/2012		

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.

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17	16	15	14	13	12	11	10	9	∞	7	6	5	4	w	2	1		Line	Type of Ga	City of Hartford	Part I: Summary
1499 Development Activities 4	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Damages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Total non-CFP Funds		Summary by Development Account	Type of Grant Maint Reserve for Disasters/Emergencies Performance and Evaluation Report for Period Ending:	City of Hartford City of Hartford Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-08 Date of CFFP: 6/30/11	urnmary
\$1,442,073.00																	Original			T26R003502-08	
																	Revised ²	Total Estimated Cost	Revised Annual Statement (revision no: Final Performance and Evaluation Report		
\$1,442,073.00																	Obligated		on no: n Report		
\$1,015,086.28																	Expended	Total Actual Cost 1		FFY of Grant: 2008 FFY of Grant Approval: 2008	

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.

⁴RHF funds shall be included here.

Signature of Executive Director	25 Amount of E	24 Amount of li	23 Amount of li	22 Amount of li	21 Amount of li	20 Amount of /	19 1502 Contin		18ba 9000 Collate	18a 1501 Collate	-	Line Summary b	Performance and I	Original Annual Statement	Type of Grant	Hartford I	ority	Part I: Summary	
in the Direction / / HT & P. J. Pater	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costsy	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant:: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	Payment	9000 Collateralization or Debt Service paid Via System of Direct	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 6/30/11	atement Reserve for Disasters/Emergencies		Replacement Housing Factor Grant No: CT26R003502-08 Date of CFFP:	Grant Type and Number Capital Fund Program Grant No:		
						\$1,442,073.00					Original	To		ncies					
Signature of Public Housing Director											Revised ²	Total Estimated Cost		קא					
using Director		!				\$1,442,073.00					Obligated	T	☐ Final Performance and Evaluation Report	Revised Annual Statement (revision no:			FFY of Grant:2008 FFY of Grant Approval: 2008		
Date						\$1,015,086.28					Expended	Total Actual Cost 1	port	•					Expires 4/30/2011

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 II: Supporting Pages PHA Name: Housing Authority of the City of Hartford	hority of the City of	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-08	No: Grant No: CT2	6R003502-08	Federal FF	Federal FFY of Grant: 2008		
Development Number Name/PHA- Wide Activities	General Description of Major Work Categories	nk Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost)St	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
CT00300001	Redevelopment of Stowe Village	1499		\$1,442,073.00	\$1,442,073.00	\$1,442,073.00	\$1,015,086.28	
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

 $^{^2}$ To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Type and Capital Fund Prog CFFP (Yes/ No); Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-08	o: rant No: CT26F	003502-08	Federal F	Federal FFY of Grant: 2008	800	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised \	Funds Obligated ²	Funds Expended ²	
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¹ To be co	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	Report or a	Revised Annual Statems	ät					

 $^{^2}$ To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	dule for Capital Fund. ty of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2008
Development Number Name/PHA-Wide	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	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	
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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.

U.S. Department of Housing and Urban Development
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Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	edule for Capital Fund ity of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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.

Fart I: Summary	umary					
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-09 Date of CFFP:	26R003502-09			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant ☐ Original A	nnual Statement	Reserve for Disasters/Emergencies		☐ Revised Annual Statement (revision no:	ion no:	
☐ Perfor	Performance and Evaluation Report for Period Ending: 6/30/11	for Period Ending: 6/30/11		☐ Final Performance and Evaluation Report	tion Report	
Line	Summary by Development Account	Account	Tota	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	ceed 20% of line 21) 3				
3	1408 Management Improvements	ents				
4	1410 Administration (may not exceed 10% of line 21)	t exceed 10% of line 21)				
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment—Nonexpendable	Nonexpendable				
12	1470 Non-dwelling Structures	s .				
13	1475 Non-dwelling Equipment	nt				
14	1485 Demolition					
15	1492 Moving to Work Demonstration	nstration				
16	1495.1 Relocation Costs					
17	1499 Development Activities		\$1,078,882.00			

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.

Tare Ye Committee A	COLLEGE Y				
PHA Name: Housing Authority of the City of Hartford	of Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-09 Date of CFFP:		FF	FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant	rant				
]X Origi	Original Annual Statement Reserve for Disasters/Emergencies	ncies	☐ Revised	Revised Annual Statement (revision no:	<u>`</u>
Perfo	Performance and Evaluation Report for Period Ending: 6/30/11		☐ Final	☐ Final Performance and Evaluation Report	
Line	Summary by Development Account	Total	Total Estimated Cost	Total	Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$1,078,882.00			
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 Belated to Energy Connecvation Measures	/ /			
Signatur	Signature of Executive Director Date	1/2	Signature of Public Housin	Housing Director	Date

^{&#}x27;To be completed for the Rerformance 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.

⁴ RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fi CFFP (Yo Replacent	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-09	ant No: CT26	R003502-09	Federal	Federal FFY of Grant: 2009	09	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
					\$1.078,882.00				
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
¹ Tobec	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	on Report o	r a Revised Annual States	nent					

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages		i							
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-09	: ant No: CT26R	.003502-09	Federal F	Federal FFY of Grant: 2009	09	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
		İ					:		
10 10 10 10 10 10 10 10 10 10 10 10 10 1									
			5 5 9 9						
¹ To be co	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	Report or a	Revised Annual Statemer	nt					

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	dule for Capital Fund i	Financing Program ord			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	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	
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		1:			
				15 15 15 15 15 15 15 15 15 15 15 15 15 1	

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 PHA Name: Housing Authority of the City of Hartford	edule for Capital Fund ity of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	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	
	5 5 5 5 5 5 5 5				

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.

PHA Name: Hou City of Hartford Type of Grant	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003504-09 Type of Grant Capital Fund Program Grant No: CT26R003504-09 Replacement Housing Factor Grant No: CT26R003504-09	T26R003504-09			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant ☑ Original A ☐ Performan	Type of Grant ☐ Reserve for Disasters/Emergencies ☐ Performance and Evaluation Report for Period Ending; 6/30/11	00 00 00 00 00 00 00 00 00 00 00 00	☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	ion no:) on Report	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
1	Total non-CFP Funds	Original	Revised ²	Obligated	Expended
2	1406 Operations (may not exceed 20% of line 21) 3				
ω	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
2	1411 Audit				
6	1415 Liquidated Damages		:		
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4	\$808,111.00			

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.

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OMB No. 2577-0226

Expires 4/30/2011

PHA Name: Housing Authority of the City of Hartford	thority Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003504-09 Date of CFFP:		FEY	FFY of Grant:2009 FFY of Grant Approval: 2009	
Type of Grant	ant		•		
]X Origin	Original Annual Statement Reserve for Disasters/Emergencies	ocies	☐ Revised A	Revised Annual Statement (revision no:	
Perfor	Performance and Evaluation Report for Period Ending: 6/30/11		☐ Final Per	Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	İ	Total Ac	Total Actual Cost 1
		Original	Revised 2	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$808,111.00			
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	->			
Signature	Signature of Executive Director	Signatus	Signature of Public Housing Director	Director	Date
_					

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.

⁴ RHF funds shall be included here.

Part II: Supporting Pages			r r r						
PHA Name: Housing Au	PHA Name: Housing Authority of the City of Hartford	Grant Tyj Capital Fu CFFP (Ye Replaceme	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003504-09	; ant No: CT26F	003504-09	Federal I	Federal FFY of Grant: 2009)09	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	ad Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
			1499		\$808,111.00		Ċ		
							:		
1 To be o	1 To be completed for the Derformance and Evaluation Deport on a Deviced Annual Statement	Denort or a	There's A States						

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

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

Part II: Supporting Pages	teritoria del Circo Carrollo		4444						
PHA Name: Housing Auu	FHA Name: Housing Authority of the City of Hartford	Grant Type and Capital Fund Prog CFFP (Yes/ No):	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No):	•		Federal F	Federal FFY of Grant: 2009	90	
		Replacem	Replacement Housing Factor Grant No: CT26R003504-09	ant No: CT26R	.003504-09				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	ited Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
						•			
				•					
¹ To be co	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	Report or a	Revised Annual Statemer	at.					j

² To be completed for the Performance and Evaluation Report.

PHA Name: Housing Authority of the City of Hartford	edule for Capital Fund ity of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
15 H					

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

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	ule for Capital Fund. y of the City of Hartf	Financing Program ord			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	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.

1 411 1	Cumman y				_
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003501-10 Date of CFFP:	T26R003501-10			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of G	Type of Grant Original Annual Statement Reserve for Disasters/Emergencies		Revised Annual Statement (revision no:	no:)	
☐ Perfo	Performance and Evaluation Report for Period Ending: 6/30/11		Final Performance and Evaluation Report	Report	
Line	Summary by Development Account	Total Estir	Total Estimated Cost	. 9	Total Actual Cost 1
		Original		Obligated	Expended
1	Total non-CFP Funds	-			
2	1406 Operations (may not exceed 20% of line 21) 3				
w	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages		·		
7	1430 Fees and Costs				:
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities	\$374,842.00			

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

⁴RHF funds shall be included here.

						Expires 4/30/2011
Part I: Summary	mmary					
PHA Name: Housing Authority of the City of	chority of Replacement Housing Boron Crant No. CT26R003501-10		* #	FFY of Grant:2010 FFY of Grant Approval: 2010	[0 proval: 2010	
Hartford						
Type of Grant	ant					
Origin	Original Annual Statement Reserve for Disasters/Emergencies	ncies	☐ Revi	sed Annual State	Revised Annual Statement (revision no:	
Perform	Performance and Evaluation Report for Period Ending: 6/30/11		☐ Fin	al Performance a	☐ Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost			Total Actual Cost 1	ual Cost 1
		Original	Revised 2		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct					
				-		
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$374,842.00				
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 1	Amount of line 20 Related to Energy Conservation Measures					
Signature	e of Executive Birocuty Dan	+3// Signatur	Signature of Public Hous	Housing Director		Date
{		+ \ X				

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.

⁴RHF funds shall be included here.

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

Part II: Supporting Pages									
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fu CFFP (Ye Replacem	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003501-10	ant No: CT26	₹003501-10	Federal I	Federal FFY of Grant: 2010	010	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	od Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
			1499		\$374,842.00				
					_				
¹ To be co	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	n Report or :	a Revised Annual Statem	ent					

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name: Housing Auti	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fu	Grant Type and Number Capital Fund Program Grant No:			Federal J	Federal FFY of Grant: 2010	10	
		CHFP (Ye Replacem	CHFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003501-10	ant No: CT26R	003501-10				
Development Number Name/PHA-Wide	General Description of Major Work Categories	Vork	Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds	Funds	
							Congarod	Typerioca	
¹ To be co	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	Report or a	Revised Annual Stateme						j

be completed for the Performance and Evaluation Report or a Revised Annual Statemer

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	for Capital Fund F the City of Hartfo	mancing Program			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	Obligated ding Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1
0	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
10 15 15 15 15 15 15 15 15 15 15 15 15 15					

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

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financine Program			
PHA Name: Housing Authority of the City of Hartford	ity of the City of Harti	ord			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	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	

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

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17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1		Line	Type of Grant ⊠ Original Ar □ Performan	City of Hartford	Part I: Summary
1499 Development Activities 4	1495.1 Relocation Costs	1492 Moving to Work Demonstration	1485 Demolition	1475 Non-dwelling Equipment	1470 Non-dwelling Structures	1465.1 Dwelling Equipment—Nonexpendable	1460 Dwelling Structures	1450 Site Improvement	1440 Site Acquisition	1430 Fees and Costs	1415 Liquidated Damages	1411 Audit	1410 Administration (may not exceed 10% of line 21)	1408 Management Improvements	1406 Operations (may not exceed 20% of line 21) 3	Total non-CFP Funds		Summary by Development Account	pe of Grant Original Annual Statement Reserve for Disasters/Emergencies Performance and Evaluation Report for Period Ending: 6/30/11	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-10 Date of CFFP: 6/30/11	Part I: Summary PHA Name: Housing Authority of the
\$1,726,132.00											-						Original	Total Estimated Cost		T26R003502-10	
								:										nated Cost	Revised Annual Statement (revision no:		
																	Obligated		no:) Report		
																	Expended	Total Actual Cost 1		FFY of Grant Approval: 2010	NEW of Chart 2010

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.

⁴ RHF funds shall be included here,

_	Signature of	25	24 ~	23	22	21	20	19	18ba	18a		Line	Perfo] Origi	Type of Grant	PHA Name: Housing Authority of the City of Hartford	Part I: Summary
English The Control	Executive Dispettor	Amount of ling 20 Related to Epergy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 6/30/11	Original Annual Statement Reserve for Disasters/Emergencies	ant	" Grant Type and Number of Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-10 Date of CFFP:	ımmary
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1/20						\$1,726,132.00				Original	Total Estir		ncies			
0	Signature of Public Housing Director										Revised 2	Total Estimated Cost	☐ Final Per	☐ Revised Ar		o Ala	
	Director										Obligated	Total /	☐ Final Performance and Evaluation Report	Revised Annual Statement (revision no:		FFY of Grant:2010 FFY of Grant Approval: 2010	
	Date										Expended	Total Actual Cost 1		<u>`</u>			Expires 4/30/2011

^{&#}x27;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.

⁴ RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fu CFFP (Ye Replacem	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003502-10	rant No: CT26	R003502-10	Federal	Federal FFY of Grant: 2010)10	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
			1499		\$1,726,132.00				
¹ To be c	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	on Report o	r a Revised Annual State	ment					

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

Part II: Supporting Pages					:				
PHA Name: Housing Aut	PHA Name: Housing Authority of the City of Hartford	Grant Ty Capital Fi CFFP (Yo	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No):			Federal I	Federal FFY of Grant: 2010)10	
		Replacen	Replacement Housing Factor Grant No: CT26R003502-10	ant No: CT26F	003502-10				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estima	Estimated Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
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¹ Tobec	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	Report or a	Revised Annual Statemer	at.					

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	dule for Capital Fund ity of the City of Hartf	Financing Program Ord			Rederal RFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	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	

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	edule for Capital Fund	Financing Program			
PHA Name: Housing Authority of the City of Hartford	ity of the City of Harti	ord			Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Funds (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1
	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.

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

Part I: Summa PHA Name: Hou City of Hartford	Part 1: Summary PHA Name: Housing Authority of the City of Hartford City of Hartford Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003501-11	T26R003501-11			FFY of Grant: 2011 FFY of Grant Approval: 2011
Type of G ☐ Origin ☐ Perfor	Type of Grant Reserve for Disasters/Emergencies Performance and Evaluation Report for Period Ending: 6/30/11		☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	n no: ກ Report	
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost 1
_	Total non-CFP Funds	Original	Revised ²	Obligated	Expended
}	TOWN HOW CALL I BRIDG				
2	1406 Operations (may not exceed 20% of line 21) 3				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
00	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment		,		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities *	\$243,244.00			

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.

⁴RHF funds shall be included here.

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Date	g Director	Signature of Public Housing Director	Sig // Sig	Director July	Signature of Executive	
			/ /	Amount of line WRelated to Energy Conservation Measures	25 Amour	,
				Amount of line 20 Related to Security - Hard Costs	24 Amour	
				Amount of line 20 Related to Security - Soft Costs	23 Amour	_
				Amount of line 20 Related to Section 504 Activities	22 Amour	
				Amount of line 20 Related to LBP Activities	21 Amour	
			\$243,244.00	Amount of Annual Grant: (sum of lines 2 - 19)	20 Amour	
				1502 Contingency (may not exceed 8% of line 20)	19 1502 C	
				9000 Collateralization or Debt Service paid Via System of Direct Payment	18ba 9000 C	
				1501 Collateralization or Debt Service paid by the PHA	_	_
Expended	Obligated	Revised ²	Original			_
Total Actual Cost 1	Total A	Total Estimated Cost	Total	Summary by Development Account	Line Summ	_
	☐ Final Performance and Evaluation Report	Final P		Performance and Evaluation Report for Period Ending: 6/30/11	Performance :	_
	Revised Annual Statement (revision no:	☐ Revised	gencies	wal Statement Reserve for Disasters/Emergencies	Original Annual Statement	
					Type of Grant	
	FFY of Grant:2011 FFY of Grant Approval: 2011	хьх хээ		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003501-11 Date of CFFP:	PHA Name: Housing Authority of the City of Hartford	
					Latt 1: Summer	_

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

⁴ RHF funds shall be included here.

Part II: Supporting Pages									
PHA Name: Housing Auth	PHA Name: Housing Authority of the City of Hartford	Grant Type and Capital Fund Prog CFFP (Yes/ No): Replacement Hou	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No: CT26R003501-11	rant No: CT26F	003501-11	Federal	Federal FFY of Grant: 2011	11	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work	Development Account No.	Quantity	Total Estimated Cost	d Cost	Total Actual Cost	Cost	Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
			1499		\$243,244.00				
						:			
					!				
¹ To be co	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	n Report or	a Revised Annual Statem	ent					

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

 $^{^2}$ To be completed for the Performance and Evaluation Report.

PHA Name: Housing Aut	hority of the City of Hartford	Grant Type and Number Capital Fund Program Grant No.	Zo.		Federal I	Federal FFY of Grant: 2011)11	
		CFFP (Yes/ No);		7000601 11				
		Replacement Housing Factor Grant No: C126R003501-11	Grant No: CT261	R003501-11				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	ork Development Account No.	Quantity	Total Estimated Cost	ted Cost	Total Actual Cost	Cost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
			-					
¹ To be c	¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.	eport or a Revised Annual State	ment				·	

 $^{^2}$ To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Housing Authority of the City of Hartford	edule for Capital Fundity of the City of Hartf	Financing Program Ord			Federal FFY of Grant: 2011
Development Number	All Fund	All Fund Obligated	All Fund	r Hypended	Descent for Designed Toront Detect
Name/PHA-Wide Activities	(Quarter E	(Quarter Ending Date)	(Quarter E	(Quarter Ending Date)	reasons tot revised target Dates
	Original Obligation End	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
	Date				
				5.5	
				i	

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 PHA Name: Housing Authority of the City of Hartford	edule for Capital Fund	Financing Program			
FHA Name: Housing Authority of the City of Hartford	ity of the City of Harti	ord			Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter I	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	
					,

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.

	, and the same of				
PHA Name: Hou City of Hartford	PHA Name: Housing Authority of the City of Hartford Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-11 Date of CFFP:	26R003502-11			FFY of Grant: 2011 FFY of Grant Approval: 2011
Type of G	Type of Grant ☐ Reserve for Disasters/Emergencies	. 🗆	Revised Annual Statement (revision no:	no:	
☐ Perfor	Performance and Evaluation Report for Period Ending: 6/30/11		☐ Final Performance and Evaluation Report	ı Report	
Line	Summary by Development Account	Total Est	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				
w	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
S	1411 Audit				_
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4	\$261,062.00			

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.

⁴RHF funds shall be included here.

T. C.						Expires 4/30/2011
Part I: Summary	mmary					
PHA Name: Housing Authority of the City of Hartford	thority Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26R003502-11			FFY of Grant:2011 FFY of Grant App	FFY of Grant:2011 FFY of Grant Approval: 2011	
Type of Grant					,	
Origin	Original Annual Statement	, i	□Re	vised Annual S	Revised Annual Statement (revision no:	
Perfor	Performance and Evaluation Report for Period Ending: 6/30/11			inal Performa	Final Performance and Evaluation Report	
Line	Summary by Development Account	Tot	Total Estimated Cost		Total A	Total Actual Cost 1
		Original	Revised ²		Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
1862	9000 Collateralization or Debt Service paid Via System of Direct Payment					
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 - 19)	\$261,062.00				
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	/ /				
Signature	Signature of Executive Director Date	34/1 Si	Signature of Public Ho	Housing Director	tor	Date

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴RHF funds shall be included here.

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¹ To be c													Development Number Name/PHA-Wide Activities		A Name: Housing Au	Part II: Supporting Pages
To be completed for the Performance and Evaluation Report or a Revised Applial Statement													General Description of Major Work Categories		PHA Name: Housing Authority of the City of Hartford	
Report or													Vork	Replacem	Grant Ty Capital Fu	İ
a Revised Annual Statem				!							1499		Development Account No.	Replacement Housing Factor Grant No: CT26R003502-11	Grant Type and Number Capital Fund Program Grant No:	
ent													Quantity	rant No: CT26I	*	
											\$261,062.00	Original	Total Estimated Cost	2003502-11		
												Revised ¹	ed Cost		Federal	
								_				Funds Obligated ²	Total Actual Cost		Federal FFY of Grant: 2011	
												Funds Expended ²	Cost		011	
													Status of Work			i

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

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

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 PHA Name: Housing Authority of the City of Hartford	dule for Capital Fund of the City of Hartf	Financing Program ord			1 1 1 mm
FIA Name: Housing Authority of the City of Hartford	ly of the City of Harti-	ord			Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter E	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
		:			

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,

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

I,	Pedro E. Segarra	the	Mayor	certify	that	the	Five	Year	and
Annual	PHA Plan of the	Housing Authority of the	e City of Hartford	is consistent with	the (Cons	olidat	ed Pla	ın of
the City	of Hartford, Connec	ticut prepared nu	irsuant to 24	CFR Part 91					

Signed / Dated by Appropriate State or Local Official

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 $\frac{X}{2}$ 5-Year and/or $\frac{X}{2}$ Annual PHA Plan for the PHA fiscal year beginning $\frac{1}{2}$ 1/2012 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:

- 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).
- 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.
- 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

- 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.

The Housing Authority of the City of Hartfo	rd CT-003
PHA Name	PHA Number/HA Code
X 5-Year PHA Plan for Fiscal Years 20 12 - 20 16	<u>.</u>
X Annual PHA Plan for Fiscal Years 20 12 - 20 12	
	_
I hereby certify that all the information stated herein, as well as any information provide	ed in the accompaniment herewith is true and accurate Warning: HHD will
prosecute false claims and statements. Conviction may result in criminal and/or civil per	
Name of Authorized Official	Title
Marilyn E. Rossetti	Chairman - Board of Commissioners
Signature Muly Hosseth	Date 9/28/11
V. ()	

Page 2 of 2

form HUD-50077 (4/2008)

Civil Rights Certification

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

CT-003

Civil Rights Certification

Annual Certification and Board Resolution

Hartford Housing Authority

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.

PHA Number/HA Code
ovided in the accompaniment herewith, is true and accurate. Warning: HUD will il penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Title
Executive Director
Date

Certification of Payments to Influence Federal Transactions

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

Applicant Name		
Housing Authority of the City of Hartford		
Program/Activity Receiving Federal Grant Funding		
Agency Plan & 5-Year Plan		
The undersigned certifies, to the best of his or her knowledge and	d belief, t	nat:
(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.	certific at all under	The undersigned shall require that the language of this ation be included in the award documents for all subawards tiers (including subcontracts, subgrants, and contracts grants, loans, and cooperative agreements) and that all ipients shall certify and disclose accordingly.
tion 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.	relianc into. S or ente	ertification is a material representation of fact upon which the was placed when this transaction was made or entered ubmission of this certification is a prerequisite for making ring into this transaction imposed by Section 1352, Title S. Code. Any person who fails to file the required
(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.	certific	ation shall be subject to a civil penalty of not less than 0 and not more than \$100,000 for each such failure.
I hereby 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)	y result in c	riminal and/or civil penalties.
Name of Authorized Official	Title	
Alan E. Green	Exe	cutive Director
Signature		Date (mm/dd/yyyy)
115		

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.)

1. Type of Federal Action: 2	. Status of Federa	l Action:	3. Report Type:	
a. contract	a. bid/of	ffer/application	a. initial fi	ling
b. grant	<u>□a</u> b. initial		b, materia	
c. cooperative agreement	c. post-a	award		Change Only:
d. loan	•		year	quarter
e. Ioan guarantee				st report
f. loan insurance				
4. Name and Address of Reporting	Entity:	5. If Reporting En	tity in No. 4 is a S	ubawardee, Enter Name
Prime Subawardee		and Address of	Prime:	
Tier,	if known:			
	İ	İ		
Congressional District, if known:	4c		District, if known:	
6. Federal Department/Agency:		7. Federal Program	m Name/Descripti	on: City of Hartford
U. S. Department of Houst	ing &		C (Agency Plan	
Urban Development				
orban botozopmene		CFDA Number, i	f applicable:	
8. Federal Action Number, <i>if known</i> :		9. Award Amount	, if known:	
		\$		
10. a. Name and Address of Lobbyi	ng Registrant	b. Individuals Per	forming Services	(including address if
(if individual, last name, first na		different from N	-	,
	,	(last name, first	•	
		,		
			_	
11 Information requested through this form is authorized		Signature:	A	
" 1352. This disclosure of lobbying activities is a mater upon which reliance was placed by the tier above when it			n E. Green	
or entered into. This disclosure is required pursuant information will be available for public inspection. Any	10 31 0.0.0. 1002. 1180			
required disclosure shall be subject to a civil penalty of		Title: <u>Executi</u>	ve Director	
not more than \$100,000 for each such failure.		Telephone No.: 86	0-723-8420	Date:
				Authorized for Local Reproduction
Federal Use Only:				Standard Form LLL (Rev. 7-97)

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

·				
Applicant Name				
Housing Authority of the City of Hartford				
Program/Activity Receiving Federal Grant Funding				
Agency Plan & 5-Year Plan				
Acting on behalf of the above named Applicant as its Authorize the Department of Housing and Urban Development (HUD) regarded.	zed Official, I make the following certifications and agreements to rding the sites listed below:			
I certify that the above named Applicant will or will continue to provide a drug-free workplace by:	 (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 statuta accounting in the 			
a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use	tion for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;			
of a controlled substance is prohibited in the Applicant's work- place and specifying the actions that will be taken against employees for violation of such prohibition.	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, includ- ing position title, to every grant officer or other designee on			
(1) The dangers of drug abuse in the workplace;	whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the			
(2) The Applicant's policy of maintaining a drug-free workplace;	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 to any employee who is so convicted			
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	(1) Taking appropriate personnel action against such an			
c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement	employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or			
d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	(2) Requiring such employee to participate satisfacto- 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;			
omployed with	g. Making a good faith effort to continue to maintain a drug- free workplace through implementation of paragraphs a, thru f.			
2. Sites for Work Performance. The Applicant shall list (on separate p HUD funding of the program/activity shown above: Place of Perfor Identify each sheet with the Applicant name and address and the program.	mance shall include the street address, city, county, State, and zip code.			
Check here if there are workplaces on file that are not identified on the attack.	ched sheets.			
I hereby certify that all the information stated herein, as well as any inf Warning: HUD will prosecute false claims and statements. Conviction may (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)				
Name of Authorized Official	Title			
Alan E. Green	Executive Director			
Signalure	Date			

Mr. Alan E. Green Executive Director Housing Authority of the City of Hartford 180 Overlook Terrace Hartford, CT 06106

RE: 2012 Agency Plan

Dear Mr. Green:

We, the undersigned members of the Resident Advisory Board to the Housing Authority of the City of Hartford (HACH) have had the opportunity to review the proposed changes for the HACH's 2012 Agency Plan. A review session for the Resident Advisory Board was conducted on Wednesday, September 14, 2011 at 180 Overlook Terrace, Hartford, Connecticut.

We have the following comments and/or recommendations regarding the HACH's 2012 Agency Plan:

1.

2.

3.

4.

Resident Advisory Board members (in attendance):

none

REF:RAB.Letter