

Streamlined Annual PHA Plan <i>(Small PHAs)</i>	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires: 02/29/2016
---	---	--

Purpose. 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, goals and objectives for serving the needs of low- income, very low- income, and extremely low- income families

Applicability. Form HUD-50075-SM is to be completed annually by **Small PHAs**. PHAs that meet the definition of a Standard PHA, Troubled PHA, High Performer PHA, HCV-Only PHA, or Qualified PHA do not need to submit this form.

Definitions.

- (1) **High-Performer PHA** – A PHA that owns or manages more than 550 combined public housing units and housing choice vouchers, and was designated as a high performer on both of the most recent Public Housing Assessment System (PHAS) and Section Eight Management Assessment Program (SEMAP) assessments.
- (2) **Small PHA** - A PHA that is not designated as PHAS or SEMAP troubled, or at risk of being designated as troubled, and that owns or manages less than 250 public housing units and any number of vouchers where the total combined units exceeds 550.
- (3) **Housing Choice Voucher (HCV) Only PHA** - A PHA that administers more than 550 HCVs, was not designated as troubled in its most recent SEMAP assessment, and does not own or manage public housing.
- (4) **Standard PHA** - A PHA that owns or manages 250 or more public housing units and any number of vouchers where the total combined units exceeds 550, and that was designated as a standard performer in the most recent PHAS or SEMAP assessments.
- (5) **Troubled PHA** - A PHA that achieves an overall PHAS or SEMAP score of less than 60 percent.
- (6) **Qualified PHA** - A PHA with 550 or fewer public housing dwelling units and/or housing choice vouchers combined, and is not PHAS or SEMAP troubled.

A. PHA Information															
A.1	PHA Name: <u>Housing Authority of the City of Rochester</u> PHA Code: <u>NH008</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performer PHA Plan for Fiscal Year Beginning: (MM/YYYY): <u>01/01/2021</u> PHA Inventory (Based on Annual Contributions Contract (ACC) units at time of FY beginning, above) Number of Public Housing (PH) Units <u>232</u> Number of Housing Choice Vouchers (HCVs) <u>182</u> Total Combined <u>414</u> PHA Plan Submission Type: <input checked="" type="checkbox"/> Annual Submission <input type="checkbox"/> Revised Annual Submission														
	<p>Availability of Information. In addition to the items listed in this form, PHAs must have the elements listed below readily available to the public. A PHA must identify the specific location(s) where the proposed PHA Plan, PHA Plan Elements, and all information relevant to the public hearing and proposed PHA Plan are available for inspection by the public. Additionally, the PHA must provide information on how the public may reasonably obtain additional information of the PHA policies contained in the standard Annual Plan, but excluded from their streamlined submissions. 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 their official website. PHAs are also encouraged to provide each resident council a copy of their PHA Plans.</p>														
	<input type="checkbox"/> PHA Consortia: (Check box if submitting a Joint PHA Plan and complete table below)														
	Participating PHAs	PHA Code	Program(s) in the Consortia	Program(s) not in the Consortia	<table border="1"> <tr> <th colspan="2">No. of Units in Each Program</th> </tr> <tr> <th>PH</th> <th>HCV</th> </tr> <tr> <td>Lead PHA:</td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>	No. of Units in Each Program		PH	HCV	Lead PHA:					
	No. of Units in Each Program														
PH	HCV														
Lead PHA:															

B.	Annual Plan Elements Submitted with 5-Year PHA Plans. Required elements for all PHAs completing this document in years in which the 5-Year Plan is also due. This section does not need to be completed for years when a PHA is not submitting its 5-Year Plan. See Section C for required elements in all other years (Years 1-4).
B.1	Revision of PHA Plan Elements. <p>(a) Have the following PHA Plan elements been revised by the PHA since its last <u>Five-Year PHA Plan</u> submission?</p> <p>Y N</p> <p><input type="checkbox"/> <input type="checkbox"/> Statement of Housing Needs and Strategy for Addressing Housing Needs.</p> <p><input type="checkbox"/> <input type="checkbox"/> Deconcentration and Other Policies that Govern Eligibility, Selection, and Admissions.</p> <p><input type="checkbox"/> <input type="checkbox"/> Financial Resources.</p> <p><input type="checkbox"/> <input type="checkbox"/> Rent Determination.</p> <p><input type="checkbox"/> <input type="checkbox"/> Homeownership Programs.</p> <p><input type="checkbox"/> <input type="checkbox"/> Substantial Deviation.</p> <p><input type="checkbox"/> <input type="checkbox"/> Significant Amendment/Modification</p> <p>(b) The PHA must submit its Deconcentration Policy for Field Office Review.</p> <p>(c) If the PHA answered yes for any element, describe the revisions for each element below:</p>
B.2	New Activities. <p>(a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p> <p>Y N</p> <p><input type="checkbox"/> <input type="checkbox"/> Hope VI or Choice Neighborhoods.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Mixed Finance Modernization or Development.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Demolition and/or Disposition.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Tenant Based Assistance.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Project-Based Assistance under RAD.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Units with Approved Vacancies for Modernization.</p> <p><input type="checkbox"/> <input type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process. If using Project-Based Vouchers (PBVs), provide the projected number of project based units and general locations, and describe how project basing would be consistent with the PHA Plan.</p> <p>The Housing Authority of the City of Rochester (RHA) is currently exploring all options of conversion from Public Housing Funding to other funding sources. The RHA may decide to submit applications for Demolition and/or Disposition for Wyandotte Falls and/or the Roberge Center and utilize the profits to renovate or purchase a new building and relocate all residents. The RHA may utilize reserves to perform the above tasks. The RHA reserves the right to project base 0-72 vouchers, either through RHA's allocation or new vouchers to help support economic development. As part of RHA's modernization efforts, requests may be sent to HUD to approve vacancies for modernization work.</p>
B.3	Progress Report. <p>Provide a description of the PHA's progress in meeting its Mission and Goals described in the PHA 5-Year Plan.</p>

C	Annual Plan Elements Submitted All Other Years (Years 1-4). Required elements for all other fiscal years. This section does not need to be completed in years when a PHA is submitting its 5-Year PHA Plan.
C.1.	<p>New Activities</p> <p>(a) Does the PHA intend to undertake any new activities related to the following in the PHA's current Fiscal Year?</p> <p>Y N</p> <p><input type="checkbox"/> <input checked="" type="checkbox"/> Hope VI or Choice Neighborhoods.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Mixed Finance Modernization or Development.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Demolition and/or Disposition.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Conversion of Public Housing to Tenant-Based Assistance.</p> <p><input checked="" type="checkbox"/> <input type="checkbox"/> Project Based Vouchers.</p> <p><input type="checkbox"/> <input type="checkbox"/> Other Capital Grant Programs (i.e., Capital Fund Community Facilities Grants or Emergency Safety and Security Grants).</p> <p>(b) If any of these activities are planned for the current Fiscal Year, describe the activities. For new demolition activities, describe any public housing development or portion thereof, owned by the PHA for which the PHA has applied or will apply for demolition and/or disposition approval under section 18 of the 1937 Act under the separate demolition/disposition approval process.</p> <ul style="list-style-type: none"> The Housing Authority of the City of Rochester (RHA) reviews the changing needs of the Rochester community regularly. The Department of Housing and Urban Development has made converting funding platforms available to Public Housing Authorities to which the RHA is reviewing options that will provide economic benefits for our residents. Options currently being reviewed is disposition of some or all of RHA's public housing stock and may provide project-based vouchers for the units or tenant-based vouchers. The RHA is reviewing possible disposition plans for Wyandotte Falls due to it being located within a flood plain. The RHA is looking to develop one or more projects utilizing LIHTC or other funding mechanisms to provide housing opportunities for displaced families. <p>See Section B.2</p> <p>(c) If using Project-Based Vouchers, provide the projected number of project-based units, general locations, and describe how project-basing would be consistent with the PHA Plan.</p> <p>See Section B.2</p> <p>(d) The PHA must submit its Deconcentration Policy for Field Office Review.</p>
C.2	<p>Certification Listing Policies and Programs that the PHA has Revised since Submission of its Last Annual Plan</p> <p><u>Form 50077-SM</u>, <i>Certification of Compliance with PHA Plans and Related Regulations</i>, including Item 5 must be submitted by the PHA as an electronic attachment to the PHA Plan. Item 5 requires certification on whether plan elements have been revised, provided to the RAB for comment before implementation, approved by the PHA board, and made available for review and inspection by the public.</p>
D	Other Document or Certification Requirements for Annual Plan Submissions. Required in all submission years.
D.1	<p>Civil Rights Certification.</p> <p><u>Form 50077-SM-HP</u>, <i>Certification of Compliance with PHA Plans and Related Regulations</i>, must be submitted by the PHA as an electronic attachment to the PHA Plan.</p>

D.2	Resident Advisory Board (RAB) Comments. (a) Did the RAB(s) provide comments to the PHA Plan? Y N <input checked="" type="checkbox"/> <input type="checkbox"/> If yes, comments must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the RAB recommendations and the decisions made on these recommendations.
D.3	Certification by State or Local Officials. Form HUD 50077-SL, <i>Certification by State or Local Officials of PHA Plans Consistency with the Consolidated Plan</i> , must be submitted by the PHA as an electronic attachment to the PHA Plan.
E	Statement of Capital Improvements - Required in all years for all PHAs completing this form that administer public housing and receive funding from the Capital Fund Program (CFP)
E.1	Capital Improvements. Include a reference here to the most recent HUD-approved 5-Year Action Plan (HUD-50075.2) and the date that it was approved by HUD. The most recent CFP 5 year action plan was approved on 3/30/2020

Instructions for Preparation of Form HUD-50075-SM Annual Plan for Small and High Performing PHAs

A. PHA Information. All PHAs must complete this section.

- A.1** Include the full PHA Name, PHA Code, PHA Type, PHA Fiscal Year Beginning (MM/YYYY), PHA Inventory, Number of Public Housing Units and or Housing Choice Vouchers (HCVs), PHA Plan Submission Type, and the Availability of Information, specific location(s) of all information relevant to the public hearing and proposed PHA Plan. (24 CFR §903.23(4)(e))

PHA Consortia: Check box if submitting a Joint PHA Plan and complete the table. (24 CFR §943.128(a))

B. Annual Plan. PHAs must complete this section during years where the 5-Year Plan is also due. (24 CFR §903.12)

B.1 Revision of PHA Plan Elements. PHAs must:

Identify specifically which plan elements listed below that have been revised by the PHA. To specify which elements have been revised, mark the "yes" box. If an element has not been revised, mark "no."

☐ **Statement of Housing Needs and Strategy for Addressing Housing Needs.** Provide a statement addressing the housing needs of low-income, very low-income and extremely low-income families and a brief description of the PHA's strategy for addressing the housing needs of families who reside in the jurisdiction served by the PHA. The statement must identify the housing needs of (i) families with incomes below 30 percent of area median income (extremely low-income), (ii) elderly families and families with disabilities, and (iii) households of various races and ethnic groups residing in the jurisdiction or on the waiting list based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent it pertains to the housing needs of families that are on the PHA's public housing and Section 8 tenant-based assistance waiting lists. 24 CFR §903.7(a)(1) and 24 CFR §903.12(b). 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. For years in which the PHA's 5-Year PHA Plan is also due, this information must be included only to the extent it pertains to the housing needs of families that are on the PHA's public housing and Section 8 tenant-based assistance waiting lists. 24 CFR §903.7(a)(2)(ii) and 24 CFR §903.12(b).

☐ **Deconcentration and Other Policies that Govern Eligibility, Selection and Admissions.** Describe the PHA's admissions policy for deconcentration of poverty and income mixing of lower-income families in public housing. The Deconcentration Policy must describe the PHA's policy for bringing higher income tenants into lower income developments and lower income tenants into higher income developments. The deconcentration requirements apply to general occupancy and family public housing developments. Refer to 24 CFR §903.2(b)(2) for developments not subject to deconcentration of poverty and income mixing requirements. 24 CFR §903.7(b) Describe the PHA's procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists. 24 CFR §903.7(b) A statement of the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV. (24 CFR §903.7(b) Describe the unit assignment policies for public housing. 24 CFR §903.7(b)

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Status: Approved

Approval Date: 03/13/2020

Approved By: CWIEKA, ROBERT

Part I: Summary

PHA Name : Housing Authority of the City of Rochester NH

☒ Locality (City/County & State)
Original 5-Year Plan

☐ Revised 5-Year Plan (Revision No:)

PHA Number: NH008

A.	Development Number and Name	Work Statement for				
		Year 1 2020	Year 2 2021	Year 3 2022	Year 4 2023	Year 5 2024
	WELLSWEEP ACRES (NH008000001)	\$462,616.00	\$446,500.00	\$441,000.00	\$387,000.00	\$350,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 1		2020		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0001	WELLSWEEP ACRES (NH008000001)			\$462,616.00
ID0001	Operations(Operations (1406))	Operations to support PHA activities		\$60,000.00
ID0002	Administration(Administration (1410)-Salaries,Administration (1410)-Sundry)	PHA administration associated with CFP		\$15,000.00
ID0003	Fees and Costs(Contract Administration (1480)-Other Fees and Costs)	Consultant to manage program, prepare specifications (waste piping, stair treads and hall lights) conduct interviews and supervise A/E design on site work CSM.		\$31,000.00
ID0004	WFMW Tubs(Dwelling Unit-Interior (1480)-Bathroom Counters and Sinks,Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Tubs and Showers)	Install walk in tubs in units on turn over. 10 units		\$129,500.00
ID0005	CSM - Stair Treads(Dwelling Unit-Interior (1480)-Flooring (non routine))	Replace worn stair treads in Town House units. 50 units		\$55,000.00
ID0006	CSM - Create parking lot(Non-Dwelling Site Work (1480)-Asphalt - Concrete - Paving,Non-Dwelling Site Work (1480)-Curb and Gutter,Non-Dwelling Site Work (1480)-Landscape,Non-Dwelling Site Work (1480)-Storm Drainage)	Clear, grade and pave parking area add salt storage facility adjacent to maintenance facility at CSM		\$80,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 1		2020		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0007	WSA - Replace waste piping(Dwelling Unit-Interior (1480)-Plumbing,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets)	Replace deteriorated waste pipe under kitchen sinks. 100 units		\$27,500.00
ID0008	WSA - Hall Lights(Non-Dwelling Exterior (1480)-Lighting,Non-Dwelling Interior (1480)-Other)	Replace timed hall and exterior door way lights with motion sensed or photo cell lights 38 locations (19 buildings)		\$20,182.00
ID0009	WSA - Vented Range Hoods(Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Mechanical,Dwelling Unit-Interior (1480)-Appliances)	Complete installation of vented range hoods 24 units		\$24,434.00
ID0010	WSA - Crack sealing(Non-Dwelling Site Work (1480)-Asphalt - Concrete - Paving)	Walkway and parking lot crack seeing and seal coating		\$7,500.00
ID0060	CSM Laundry keyless entry system(Non-Dwelling Exterior (1480)-Doors)	Replace outmoded keyless entry and payment card system with new system (s) with long term software maintenance.		\$12,500.00
Subtotal of Estimated Cost				\$462,616.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 2		2021		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	WELLSWEET ACRES (NH008000001)			\$446,500.00
ID0014	Operations(Operations (1406))	Operations to support PIHA activities		\$70,000.00
ID0015	Fees and Costs(Contract Administration (1480)-Other Fees and Costs)	Consultant to manage program, prepare specifications (Doors W/F/M/V, keyless entry, trash enclosures & Kitchen renovations CSM), conduct interviews.		\$50,000.00
ID0016	Administration(Administration (1410)-Salaries,Administration (1410)-Sundry)	PIHA administration associated with CRP		\$20,000.00
ID0017	W/F/M/V Tubs(Dwelling Unit-Interior (1480)-Bathroom Counters and Sinks,Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Tubs and Showers)	Continue to install walk in tubs in units on turn over. 12 units		\$140,500.00
ID0023	CSM - Kitchen renovations(Dwelling Unit-Interior (1480)-Flooring (non routine),Dwelling Unit-Interior (1480)-Interior Painting (non routine),Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets)	Repair/Replace Kitchen Cabinets in 15 units		\$70,000.00
ID0024	W/F/M/V - Fire Doors(Non-Dwelling Interior (1480)-Security)	Replace fire doors and closures		\$25,500.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 2		2021		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0025	WPMW - Closet doors(Dwelling Unit-Interior (1480)-Interior Doors)	Replace Closet Doors in 36 units		\$41,000.00
ID0026	CSM - Trash Enclosures(Non-Dwelling Site Work (1480)-Dumpster and Enclosures)	Repair/Replace covered trash bins 7 buildings		\$14,500.00
ID0059	WPMW Keyless door entrance system(Dwelling Unit-Exterior (1480)-Exterior Doors)	Replace outmoded keyless sstem with new system with long term software support.		\$15,000.00
Subtotal of Estimated Cost				\$446,500.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 3		2022		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	WELL-SWEEP ACRES (NH008000001)			\$441,000.00
ID0029	Operations(Operations (1406))	Operations to support PHA activities		\$60,000.00
ID0030	Fees and Costs(Contract Administration (1480)-Other Fees and Costs)	Consultant to manage program, prepare specifications (Flooring CSM), manage continuing contracts, Kitchen renovations CSM, conduct interviews and supervise A/E design for landscaping at CSM		\$50,000.00
ID0031	Administration/Administration (1410)-Salaries,Administration (1410)-Sundry)	PHA administration associated with CRP		\$20,000.00
ID0032	WFMW Tubs(Dwelling Unit-Interior (1480)-Bathroom Counters and Sinks,Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Tubs and Showers)	Continue to install walk in tubs in units on turn over. 5 units		\$65,000.00
ID0033	CSM - Kitchen renovations(Dwelling Unit-Interior (1480)-Flooring (non routine),Dwelling Unit-Interior (1480)-Interior Painting (non routine),Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets)	Repair/Replace Kitchen Cabinets in 10 units		\$50,000.00
ID0034	WFMW - Closet doors(Dwelling Unit-Interior (1480)-Interior Doors)	Replace Closet Doors in 36 units		\$41,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 3		2022		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0035	CSM - Landscaping(Non-Dwelling Site Work (1480)-Landscape)	Landscape grounds 10 acres		\$25,000.00
ID0036	CSM - Security camera(Dwelling Unit-Site Work (1480)-Other)	Install Security cameras to cover exterior of buildings and grounds		\$75,000.00
ID0037	CSM - Floor tile replacement(Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Flooring (non routine))	Replace floor tile through out unit, asbestos abatement if necessary 10 units		\$30,000.00
ID0038	W5A - Floor tile(Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Flooring (non routine))	Install floor tile in Bathrooms and Kitchens 25 units		\$25,000.00
	Subtotal of Estimated Cost			\$441,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 4		2023		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	WELLSWEEP ACRES (NH008600001)			\$387,000.00
ID0040	Operations(Operations (1406))	Operations to support PIA activities		\$70,000.00
ID0041	Fees and Costs(Contract Administration (1480)-Other Fees and Costs)	Consultant to manage program, prepare specifications (CSM entrance doors & steps, WSA, new door hardware),manage continuing contracts WFMW Tybs & CSM kitchen renovations conduct interviews.		\$30,000.00
ID0042	Administration/Administration (1410)-Salaries,Administration (1410)-Sundry)	PIA administration associated with CFP		\$20,000.00
ID0043	CSM - Entrance steps(Dwelling Unit-Exterior (1480)-Landings and Railings)	Replace Front and rear entrance steps and rails. 15 units		\$37,000.00
ID0044	CSM - Entrance Doors(Dwelling Unit-Exterior (1480)-Exterior Doors)	Replace front and rear entrance doors 30 units		\$45,000.00
ID0045	WSA - Entrance hardware(Dwelling Unit-Interior (1480)-Interior Doors)	Replace unit entrance hardware front and rear 100 units		\$70,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 4		2023		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0046	WPMW Tubs(Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Tubs and Showers,Dwelling Unit-Interior (1480)-Bathroom Counters and Sinks)	Continue to Install walk in tubs in units on turn over. 5 units		\$65,000.00
ID0047	CSM - Kitchen renovations(Dwelling Unit-Interior (1480)-Flooring (non routine),Dwelling Unit-Interior (1480)-Interior Painting (non routine),Dwelling Unit-Interior (1480)-Kitchen Cabinets,Dwelling Unit-Interior (1480)-Kitchen Sinks and Faucets)	Repair/Replace Kitchen Cabinets in 10 units		\$50,000.00
	Subtotal of Estimated Cost			\$387,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)

Work Statement for Year 5		2024		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
	WELLSWEET ACRES (NH008000001)			\$350,000.00
ID0050	Operations(Operations (1406))	Operations to support PHA activities		\$70,000.00
ID0051	Fees and Costs(Contract Administration (1480)-Other Fees and Costs)	Consultant to manage program, prepare specifications (Landscaping & interior water piping WFMW, WSA Water entrances), manage continuing contracts Entrances & Floor tile CSM, conduct interviews,		\$30,000.00
ID0052	Administration/Administration (1410)-Salaries,Administration (1410)-Sundry)	PHA administration associated with CFP		\$20,000.00
ID0053	WFMW - Landscaping(Non-Dwelling Site Work (1480)-Landscape)	Landscape hill side and remove invasive species		\$35,000.00
ID0054	WFMW - Pipe shut off(Dwelling Unit-Interior (1480)-Plumbing)	Install plumbing shut offs to be able to isolate individual units		\$75,000.00
ID0055	CSM - Entrance steps(Dwelling Unit-Exterior (1480)-Landings and Railings)	Replace front and reentrance steps 25 units		\$50,000.00

Capital Fund Program - Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages - Physical Needs Work Statements (s)				
Work Statement for Year 5		2024		
Identifier	Development Number/Name	General Description of Major Work Categories	Quantity	Estimated Cost
ID0056	WSA- Water Supply piping(Dwelling Unit-Exterior (1480)-Other)	Replace existing water supply entrances as needed. 5 buildings		\$40,000.00
ID0058	CSM - Floor tile replacement(Dwelling Unit-Interior (1480)-Bathroom Flooring (non cyclical),Dwelling Unit-Interior (1480)-Flooring (non routine))	Replace floor tile through out unit, asbestos abatement if necessary 10 units		\$30,000.00
	Subtotal of Estimated Cost			\$350,000.00

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPPY(es/No):		NH01P00850120		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	WSA - Crack sealing (Non-Dwelling Site Work (1480)) Description : Walkway and parking lot crack seeing and seal coating	1480		\$7,500.00				.
NH008000001 - WELLSWEEP ACRES	CSM Laundry keyless entry system (Non- Dwelling Exterior (1480)) Description : Replace outmoded keyless entry and payment card system with new system (s) with long term software maintenance.	1480		\$12,500.00				
	Total:			\$462,616.00				

(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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the City of Rochester NH		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ⁽¹⁾
	Original Obligation End Date	Actual Obligation 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.

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
2577-0274
02/28/2022

Part I: Summary

PHA Name:
Housing Authority of the City of Rochester NH

Grant Type and Number
Capital Fund Program Grant No. NH01P00850118
Replacement Housing Factor Grant No.
Date of CFFP:

FFY of Grant:
FFY of Grant Approval:

Type of Grant

☒ **Original Annual Statement**

☐ **Reserve for Disasters/Emergencies**

☐ **Revised Annual Statement (Revision No:)**

☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$60,000.00			
3	1408 Management Improvement				
4	1410 Administration	\$15,000.00			
5	1480 General Capital Activity	\$366,282.00			
6	1492 Moving To Work Demonstration				
7	1501 Collateral Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

- (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 include here

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 2577-0274
 02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH	Grant Type and Number Capital Fund Program Grant No. NH01P00850118 Replacement Housing Factor Grant No. Date of CFFP:	FFY of Grant: FFY of Grant Approval:
---	---	---

Type of Grant

☒ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 ☐ Revised Annual Statement (Revision No:)

☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	\$441,282.00			

- (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 CFF Grants for operations
 (4) RHF funds shall be include here

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 2577-0274
 02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH	Grant Type and Number Capital Fund Program Grant No. NH01P00850118 Replacement Housing Factor Grant No. _____ Date of CFPP: _____	FFY of Grant: FFY of Grant Approval:
---	---	---

Type of Grant
☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (Revision No:)
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director /S/ MUI770 Date 08/21/2018	Signature of Public Housing 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 CFPP Grants for operations
 (4) RHP funds shall be include here

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFRP(Yes/No):		NH01P00850118		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	Operations (Operations (1406)) Description : Assist the PHA with funding operations	1406		\$60,000.00				
NH008000001 - WELLSWEEP ACRES	Administration (Administration (1410)) Description : Staff contribution work, ED, bookkeeper and maintenance foreman	1410		\$15,000.00				
NH008000001 - WELLSWEEP ACRES	Wyandotte Shower/Tub (Dwelling Unit- Interior (1480)) Description : Remove existing bathtubs and install walk in showers as units become vacant	1480		\$20,000.00				

(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 Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFFP(Yes/No):			Federal FFY of Grant: NH01P00850118				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work	
				Original	Revised (1)	Funds Obligated	Funds Expended		
NH008000001 - WELLSWEEP ACRES	Consultant to manage program (Contract Administration (1480)) Description : Prepare specs and conduct interviews, etc. Investigate moving electrical room equipment at WFMW and possibility of PV Panels	1480		\$20,000.00					
NH008000001 - WELLSWEEP ACRES	Cold Spring Manor (Dwelling Unit-Interior (1480)) Description : Move zone valves into apartments from crawl spaces	1480		\$30,282.00					
NH008000001 - WELLSWEEP ACRES	Cold Spring Manor (Dwelling Unit-Site Work (1480)) Description : Complete repairs to sidewalks throughout development	1480		\$26,000.00					

(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 Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPP(Yes/No):		NH01P00850118		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	Wellsweep Acres (Dwelling Unit-Exterior (1480)) Description : Replace old roofs shingles with new shingles on remaining buildings that have not been completed	1480		\$230,000.00				
NH008000001 - WELLSWEEP ACRES	Wellsweep Acres (Dwelling Unit-Interior (1480),Non-Dwelling Construction - Mechanical (1480)) Description : Move apartment zone valves from crawl spaces to units, replace iron heat pipes in crawl spaces to PEX	1480		\$40,000.00				
	Total:			\$441,282.00				

(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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the City of Rochester NH		Federal FFY of Grant:			
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		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.

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
2577-0274
02/28/2022

Part I: Summary

PHA Name:
Housing Authority of the City of Rochester NH

Grant Type and Number
Capital Fund Program Grant No. NH01P00850119
Replacement Housing Factor Grant No.
Date of CFFP:

FY of Grant:
FY of Grant Approval:

Type of Grant

☒ Original Annual Statement

☐ Reserve for Disasters/Emergencies

☐ Revised Annual Statement (Revision No:)

☐ Performance and Evaluation Report for Period Ending:

☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$60,000.00			
3	1408 Management Improvement				
4	1410 Administration	\$15,000.00			
5	1480 General Capital Activity	\$387,632.00			
6	1492 MovingToWorkDemonstration				
7	1501 Collateral Exp / Debt Svc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

- (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 include here

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

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH	Grant Type and Number Capital Fund Program Grant No. NH01P00850119 Replacement Housing Factor Grant No. Date of CFFP:	FY of Grant: FY of Grant Approval:
---	---	---

Type of Grant

☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (Revision No:)

☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	\$462,632.00			

- (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 include here

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

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH	Grant Type and Number Capital Fund Program Grant No. NH01P00850119 Replacement Housing Factor Grant No. Date of CFFP:	FFY of Grant: FFY of Grant Approval:
---	---	---

Type of Grant

☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (Revision No:)

☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director /S/ M97696	Date 06/11/2019	Signature of Public Housing 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 CFF Grants for operations
(4) RHF funds shall be include here

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

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFRP(Yes/No):		NH01P00850119		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	CSM-Bathrooms (Dwelling Unit-Interior (1480)) Description : Complete Bathroom renovations, fungible from 501-16	1480		\$150,000.00				
NH008000001 - WELLSWEEP ACRES	Operations (Operations (1406)) Description : Fund Agency operations	1406		\$60,000.00				
NH008000001 - WELLSWEEP ACRES	WFMW - Fire (Non-Dwelling Interior (1480)) Description : Up grade Fire panel with 127 point addressable system.	1480		\$25,000.00				

(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 Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFRP(Yes/No):		NH01P00850119		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	WFMW-Tubs (Dwelling Unit-Interior (1480)) Description : Continue to replace tubs with walk in units at turnover. Replace vanities and floor vinyl. 12 units	1480		\$101,000.00				
NH008000001 - WELLSWEEP ACRES	Fees and Costs (Contract Administration (1480)) Description : Fund consultant to manage budget, prepare specifications, conduct wage interviews, etc., investigate possibility of PV panels and RAD conversion. A & B services as needed to design individual activities.	1480		\$50,000.00				
NH008000001 - WELLSWEEP ACRES	Admin (Administration (1410)) Description : Bookkeeper and ED participation.	1410		\$15,000.00				

(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 Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CRFP(Yes/No):		Federal FFY of Grant:				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	CSM Smokes (Dwelling Unit-Interior (1480)) Description : Replace smoke/CO2 detectors in units at Cold Spring manor 60 units	1480		\$10,000.00				
NH008000001 - WELLSWEEP ACRES	Smokes WSA (Dwelling Unit-Interior (1480)) Description : Replace Smoke/CO2 Detectors in 100 units at Well Swee Acres	1480		\$10,000.00				
NH008000001 - WELLSWEEP ACRES	Smokes WFMW (Dwelling Unit-Interior (1480)) Description : Replace smoke/co2 detectors at Wyandotte Falls Millworks	1480		\$10,000.00				

(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 Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPP(Yes/No):		NH01P00850119		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work
				Original	Revised (1)	Funds Obligated	Funds Expended	
NH008000001 - WELLSWEEP ACRES	CSM Relocation (Contract Administration (1480)) Description : Temporary Relocation of Residents while bath room renovations occur	1480		\$6,632.00				
NH008000001 - WELLSWEEP ACRES	WFMW Security (Dwelling Unit-Interior (1480),Dwelling Unit-Exterior (1480)) Description : Add security cameras in public spaces.	1480		\$25,000.00				
Total:				\$462,632.00				

(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 III: Implementation Schedule for Capital Fund Financing Program

PHA Name: Housing Authority of the City of Rochester NH		Federal FFY of Grant:		
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates ⁽¹⁾
	Original Obligation End Date	Actual Obligation 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.

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
2577-0274
02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH	Grant Type and Number Capital Fund Program Grant No. NH01P00850120 Replacement Housing Factor Grant No. Date of CFP:	FFY of Grant: FFY of Grant Approval:
---	--	---

Type of Grant

☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies
☐ Performance and Evaluation Report for Period Ending: ☐ Revised Annual Statement (Revision No:)
☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	\$60,000.00			
3	1408 Management Improvement				
4	1410 Administration	\$15,000.00			
5	1480 General Capital Activity	\$387,616.00			
6	1492 MovingToWorkDemonstration				
7	1501 Collater Exp / Debt Srvc				
8	1503 RAD-CFP				
9	1504 Rad Investment Activity				
10	1505 RAD-CPT				
11	1509 Preparing for, Preventing and Responding to Coronavirus (1509)				

- (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) RHP funds shall be include here

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

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 2577-0274
 02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH		Grant Type and Number Capital Fund Program Grant No. NH01P00850120 Replacement Housing Factor Grant No. Date of CFFP:		FFY of Grant: FFY of Grant Approval:
---	--	---	--	---

Type of Grant

☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies
☐ Performance and Evaluation Report for Period Ending: ☐ Revised Annual Statement (Revision No:)
☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
12	9000 Debt Reserves				
13	9001 Bond Debt Obligation				
14	9002 Loan Debt Obligation				
15	RESERVED				
16	RESERVED				
17	RESERVED				
18a	RESERVED				
18ba	RESERVED				
19	RESERVED				
20	RESERVED				
21	Amount of Annual Grant: (sum of lines 2-20)	\$462,616.00			

- (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 CFF Grants for operations
 (4) RHF funds shall be include here

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

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
2577-0274
02/28/2022

Part I: Summary

PHA Name: Housing Authority of the City of Rochester NH	Grant Type and Number Capital Fund Program Grant No. NH01P00850120 Replacement Housing Factor Grant No. Date of CFFP:	FFY of Grant: FFY of Grant Approval:
---	---	---

Type of Grant

☒ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (Revision No:)
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ⁽¹⁾	
		Original	Revised ⁽²⁾	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 Activities				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of line 21 Related to Security - Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Signature of Executive Director /S/ M97696 Date 07/31/2020	Signature of Public Housing 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 CFFP Grants for operations
 (4) RIIF funds shall be include here

Part II: Supporting Pages									
PHA Name: Housing Authority of the City of Rochester NH			Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFFP(Yes/No):			Federal FFY of Grant: NH01P00850120			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work	
				Original	Revised (1)	Funds Obligated	Funds Expended		
NH008000001 - WELLSWEEP ACRES	Operations (Operations (1406)) Description : Operations to support PHA activities	1406		\$60,000.00					
NH008000001 - WELLSWEEP ACRES	Administration (Administration (1410)) Description : PHA administration associated with CFP	1410		\$15,000.00					
NH008000001 - WELLSWEEP ACRES	Fees and Costs (Contract Administration (1480)) Description : Consultant to manage program, prepare specifications (waste piping, stair treads and hall lights) conduct interviews and supervise A/E design on site work CSM.	1480		\$31,000.00					

(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 Rochester NH			Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPP(Yes/No):			NH01P00850120 <		

Part II: Supporting Pages

PHA Name: Housing Authority of the City of Rochester NH		Grant Type and Number Capital Fund Program Grant No. Replacement Housing Factor Grant No. CFPP(Yes/No):		NH01P00850120				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost (2)		Status of Work	
				Original	Revised (1)	Funds Obligated	Funds Expended		
NH008000001 - WELLSWEEP ACRES	WSA - Replace waste piping (Dwelling Unit-Interior (1480)) Description : Replace deteriorated waste pipe under kitchen sinks. 100 units	1480		\$27,500.00					
NH008000001 - WELLSWEEP ACRES	WSA - Hall Lights (Non-Dwelling Exterior (1480),Non-Dwelling Interior (1480)) Description : Replace timed hall and exterior door way lights with motion sensed or photo cell lights 38 locations (19 buildings)	1480		\$20,182.00					
NH008000001 - WELLSWEEP ACRES	WSA - Vented Range Hoods (Dwelling Unit-Interior (1480)) Description : Complete installation of vented range hoods 24 units	1480		\$24,434.00					

(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

Civil Rights Certification
(Qualified PHAs)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB Approval No. 2577-0226
Expires 02/29/2016

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official, I approve the submission of the 5-Year PHA Plan for the PHA of which this document is a part, and make the following certification and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the public housing program of the agency 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 by examining their programs or proposed programs, identifying any impediments to fair housing choice within those program, addressing those impediments in a reasonable fashion in view of the resources available and working with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and by maintaining records reflecting these analyses and actions.

Housing Authority of the City of Rochester
PHA Name

NH008
PHA Number/HA Code

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

Name of Authorized Official

Mark Haurihane

Title

Chairman

Signature

Date



Executive Director

Stacey Price

Rochester Housing Authority

77 Olde Farm Lane

Rochester, NH 03867

Office #: (603) 332-4126 Fax #: (603) 332-0039

email: hollyb@rhanh.org

Housing Authority of the City of Rochester, NH

Resident Advisory Board Minutes

Held 10:00 am on 9/23/20 at the WA Community Room

The RHA Resident Advisory Board, includes representatives from each of the RHA public housing sites, meets once a year to review and comment on the RHA One-Year and Five-Year Plans and to provide input on the RHA operations.

Board Members Present:

Arthur Trahan- Wyandotte Falls

Pauline Brierly- E. Rochester

Sandy valley-Gonic

Sally Dyer- Wellsweep Acres-

Gary Grant- Cold Spring Manor- Absent

Holly Beauchesne- Public Housing Manager

Stacey Price- Executive Director

The Executive Director, Stacey Price, went over:

- 1) Covid 19 has affected the RHA funding and projects. Some projects have been put on hold because of the pandemic. Touched on the procedures that the RHA has put into place to protect the resident- Maintenance sanitizing high touch areas 7days a week, keeping community rooms closed, staff wearing masks, working from home or staggered in office to maintain safety, office closed to public but the ability to have a meeting with tenants if necessary, uploading files so that all staff can have secure access to tenant information even when working from home.
- 2) RHA continues to work with HUD to find the best conversion for Public Housing.
- 3) It has been difficult to fill vacancies at locations especially WF. Explained the future possibility of selling WF and build a new building or buildings for the current residents. It has been a challenge to find land in the downtown area.
- 4) Update on the Charles Street property that was donated to RHA. The project is at a standstill because of the pandemic. However, RHA has applied for vouchers for a Foster Youth program to assist foster kids that are aging out of the program. This program would provide housing and a platform to learn life skills.
- 5) The RHA has started accepting electronic debiting of rents.
- 6) Application portal soon to be up and running.
- 7) The RHA has started the bedbug inspection again. The staff and inspector take precautions such as wearing masks and asking tenant to step out of the unit or in

another room to prevent contact. The delay of inspections previously had allowed for an increase in bedbug activity.

- 8) HUD has given a waiver to annual inspections of the units. These inspections require staff to be in a unit for a prolonged period of time and to touch multiple high touch surfaces. The RHA will send out a notice asking tenants to report any health and safety issues and will continue with annual inspections when it is safe to do so.
- 9) 2017, 2018, 2019, 2020, 2021 Budgets & 5 year action plan.
- 10) Projects in plan including but not limited to- WA: Install hood ranges, replace emergency lights in halls, , paint stair railings all properties, kitchen cabinet replacement, CSM – replace stair treads, create parking lot for maintenance equipment and land scape, change the laundry room entry system. WF- continue bathroom renovations, look into new entry system, replace closet doors, replace fire doors in halls.
- 11) Completed: Insulation by CAP at various properties, WF & CSM upon turn over remodeling bathrooms, moved zone valves at CSM, Sidewalk and parking lot Sealcoating, boiler replacement continued at WA, repairs to entry doors at WA, CSM repairs to back door canopies.
- 12) Officer Blair retired and the RHA has welcomed Officer Mundy to the team.

Sally Dyer (WA)-

- Handrails cause paint splinters.
- Flooring.

Arthur Trahan (WF)-

- transportation for tenants to appointments
- people camping out and hanging out down by river.
- Add more camera's in the building.

Pauline Brierly (E. Roch)-

- Boards on trash enclosure old and weathered.
- Tenants smoking on steps.

Sandra Valley (Gonic)-

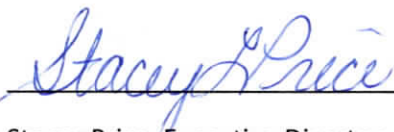
- parking is an issue with guest parking in tenant lot.
- Secure doors on units- feels the locks can be opened with a credit card.

Gary Grant (CSM)- Absent

Statement of Significant Amendment/Modification

Significant Amendment or Substantial Deviation/Modification - as referenced in the Quality Housing and Work Responsibility Act of 1998, Section 511, (g), a significant amendment or modification to the annual plan may not be adopted, other than at a duly called meeting of the governing board of the public housing agency that is open to the public after a 45 day public notice; and be implemented, until notification of the amendment or modification is provided to the Secretary of the Department of Housing and Urban Development (HUD) and approved. Amendments or modifications, which are not defined as being significant and will not be subject to a public meeting with a 45 day public notice and notification to the Secretary of HUD will be the following amendments or modifications:

1. The transfer of work projects, from one grant year to another in the Capital Fund Program (fungibility), which are included in the approved Capital Fund Program 5-Year Action Plan;
2. The transfer of funds in the Capital Fund Program from one line item to another within the same grant year budget;
3. Additional work projects funded by the Capital Fund Program not included in the 5- Year Action Plan, which have been deemed to be emergencies;
4. Policy changes resulting from HUD or other federal agency mandates, regulations, or directives; and
5. Any changes in the Housing Choice Voucher Administrative Plan or Public Housing Admissions and Continued Occupancy Policy, which are not specifically described in the HUD PHA 5-Year and Annual Plan or required PHA Plan elements.



Stacey Price, Executive Director



Date