Seymour Housing Authority

COPY RECEIVED
DATE: 11/5/13
TIME: 4:15/17
TOWN CLERK'S OFFICE

> 928th Meeting

The 928th Meeting, a regular meeting of the Seymour Housing Authority, was held at Smithfield Gardens Assisted Living in the Multi-Purpose Room located at 26 Smith Street, Seymour, on Wednesday, October 2, 2013, and was called to order by Chairperson White at 5:35pm.

> Roll Call

Answering the Roll Call were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Also present were Executive Director David Keyser and Deputy Director Donna DeSantis.

> Public Comment Session

None.

> Previous Meeting Minutes

Chairperson White introduced the previous meeting minutes of the 927th Regular Meeting held on September 4, 2013.

Commissioner Bellucci motioned to accept the minutes of the 927th Regular Meeting. Commissioner Dota seconded the motion. Chairperson White acknowledged the motion and its second and asked all in favor of the motion to vote aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski, and White. Chairperson White declared the motion carried and the minutes accepted as presented.

> Bills & Communications

Chairperson White introduced the Bills. (See Exhibit I)

Commissioner Horelick motioned to approve the bills as presented and authorize payment of the bills. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried and the Bills approved for payment as presented.

> Executive Director's Report

Chairperson White introduced the Executive Director's Report. (See Exhibit II)

The Executive Director discussed and explained the report which was distributed at the meeting.

> Old Business

None

> New Business

Chairperson White introduced the Capital Funds 2013 Budget.

The Executive Director discussed HUD form 57075.1 Capital Funds Program 2013 Budget totaling \$89,862. (See Exhibit III) The Executive Director described the work items and the budget line items.

After some further brief discussion, Commissioner Bellucci motioned to accept the 2013 Capital Funds Program Budget as presented and to authorize the Executive Director to submit it to HUD. Commissioner Dota seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried.

Chairperson White introduced 2014 Annual Plan Certifications

The Executive Director discussed the 2014 Annual Plan. He stated that there was not much change in the plan from 2013. He stated that there are several certifications that need to be adopted and approved.

Chairperson White introduced Resolution #388 concerning Board Certification of compliance with PHA Plans and Related Regulations. (See Exhibit IV)

Chairperson White introduced Resolution # 388 concerning Board Certification of compliance with PHA Plans and Related Regulations.

After some brief discussion, Commissioner Golebieski motioned to adopt Resolution # 388 concerning Board Certification of compliance with PHA Plans and Related Regulations. Commissioner Horelick seconded the motion. Chairperson White acknowledged the motion and its second and asked for a Roll Call Vote which was recorded as follows:

| • | V | ote | |
|--------------------------|---------------|-----|---------|
| Commissioner Bellucci | Aye X X | Nay | Abstain |
| Dota | X | | |

| Golebieski | X |
|------------|---|
| Horelick | X |
| White | X |

Chairperson White declared the motion carried and Resolution # 388 duly adopted.

The Executive Director discussed the other certifications required of the 2014 Annual Plan including the Certification for a Drug Free Workplace, Disclosure of Lobbying Activities, Certification of Payments to Influence Federal Transactions and Civil Rights Certifications. The Executive Director requested authorization to certify on behalf of the Seymour Housing Authority all these certifications.

After some further brief discussion, Commissioner Bellucci motioned to authorize the Executive Director to certify the Drug Free Workplace, Disclosure of Lobby Activities, Certifications of Payments to Influence Federal Transactions and Civil Rights Certifications. Commissioner Dota seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried.

Chairperson White introduced Personnel Policy Updates.

The Executive and Deputy Directors described the recommended changes to the Personnel Policy. The Executive Director stated that a change in wording relative to employee who verbally indicates verbally that they are leaving their position will now be accepted. The Deputy Director described the changes recommended to comply with the National Health Care Reform Act. She stated that we will now offer health insurance to people working 30+ hours/week. (see Exhibit V).

After some further brief discussion, Commissioner Horelick motioned to adopt the recommended Personnel Policy changes as presented. Commissioner Dota seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried.

Chairperson White introduced the 2014 Budgets.

The Executive Director described the Moderate Rental budget for 2014. (See Exhibit VI) He discussed the budget line items and the provision to the Repairs Maintenance and Replacement Reserve. He stated that this budget did not indicate a need for a rent increase.

After some further brief discussion, Commissioner Bellucci motioned to adopt the proposed 2014 Management Plan for the State Moderate Rental program as presented. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the

motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, and Golebieski. Chairperson White abstained from voting to avoid a conflict of interest. Chairperson White declared the motion carried.

Chairperson White introduced Resolution #389 concerning certifications for the 2014 Norman Ray House budget and budget. (See Exhibit VII)

The Executive Director described the proposed 2014 budget for the Norman Ray House including the various line items and projected net surplus.

After some further brief discussion, Commissioner Horelick motioned to adopt the 2014 proposed Norman Ray House budget and Resolution # 389 concerning certifications for the 2014 Norman Ray House budget. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the motion and its second and asked for a Roll Call Vote which was recorded as follows:

| | V | ote | |
|--------------|-----|-----|---------|
| Commissioner | Aye | Nay | Abstain |
| Bellucci | X | | |
| Dota | X | | |
| Golebieski | X | • | |
| Horelick | X | | |
| White | X | | |

Chairperson White declared the motion carried and Resolution # 389 duly adopted.

Chairperson White introduced Resolution #390 concerning certifications for the 2014 Rev. Callahan House budget and budget. (See Exhibit VIII)

The Executive Director described the proposed 2014 budget for the Rev. Callahan House including the various line items and projected net surplus.

After some further brief discussion, Commissioner Horelick motioned to adopt the 2014 proposed Rev. Callahan House budget and Resolution # 390 concerning certifications for the 2014 Rev. Callahan House budget. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the motion and its second and asked for a Roll Call Vote which was recorded as follows:

| | V | ote | |
|--------------------------|-----|-----|--------------|
| Commissioner Bellucci | Aye | Nay | Abstain X |

| Dota | | X |
|------------|---|---|
| Golebieski | X | |
| Horelick | Χ | |
| White | X | |

Chairperson White declared the motion carried and Resolution # 390 duly adopted.

The Executive Director described the Smithfield Gardens Assisted Living budget for 2014. (See Exhibit IX) He discussed the budget line items and the provision to the Core Services revenue and expense.

After some further brief discussion, Commissioner Bellucci motioned to adopt the proposed 2014 Management Plan for the Smithfield Gardens Assisted Living program as presented. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, and Golebieski and White. Chairperson White declared the motion carried.

> Executive Session

Chairperson White asked for a motion to enter Executive Session at 6:20pm to discuss a legal case matter. Commissioner Horelick made a motion to enter Executive Session. Commissioner Golebieski seconded the motion. At 6:23pm, Commissioner Dota made a motion to leave Executive Session. Commissioner Bellucci seconded the motion.

Commissioner Bellucci motioned to settle the case as discussed. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried.

> Any Other Business Pertaining to the Board

The Executive Director discussed a proposed change to the heating oil policy for the Moderate Rental units. (See Exhibit X.) Currently, unit oil tanks are filled (275 gallons) at the time a new tenant takes occupancy of the unit. If the new tenant is unable to pay the full amount, monthly payments are accepted by SHA over an eight-month period. In the new heating oil policy, SHA would provide 150 gallons at the time a new tenant takes occupancy of the unit. If the new tenant is unable to pay the full amount, monthly payments will be accepted by SHA over a four-month period. When a tenant vacates a unit, SHA will reimburse the tenant for any remaining oil in the tank up to a maximum of 150 gallons.

Commissioner Bellucci motioned to approve the new heating oil policy. Commissioner Golebieski seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye

were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried.

The Executive Director discussed a proposal from Silver, Petrucelli and Associates to create drawings and to develop cost estimates for the property at 34 Smith Street. Commissioner Bellucci Golebieski motioned to approve the proposal. Commissioner Horelick seconded the motion. Chairperson White acknowledged the motion and its second and asked all those in favor of the motion to signify by voting aye. Voting aye were Commissioners Bellucci, Dota, Horelick, Golebieski and White. Chairperson White declared the motion carried.

> Adjournment

Chairperson White asked for a motion to adjourn the 928th meeting of the Seymour Housing Authority. Commissioner Bellucci motioned to adjourn the meeting. Commissioner Horelick seconded the motion. Chairperson White declared the motion carried and the 928th Meeting, a Regular Meeting, duly adjourned at 6:30pm.

Submitted by:

David J. Køyser, Secretary and

Executive Director

Seymour Housing Authority Vendor Accounting Cash Payment/Receipt Register Revolving Fund

Filter Criteria Includes: 1) Project: Revolving Fund, 2) Payment Date: All, 3) Financial Period: September 2013, 4) Payments Over: All, 5) Check Numbers: All, 6) Cleared Date: All, 7) Check Status: All, 8) Payment Status: All, 9) Show Payments: Yes, 10) Show Deposits: No, 11) Order By: Payment/Receipt Number

Bank: Naugatuck Valley Savings & Loan, Bank Account: 0615014177, GL Account: 1000

| Posted Payment | e | | | | | | |
|----------------|-------------------|---------------|------|-----------------------------------|------------------------------------|---------|---------------|
| Doc Num | S Payment Date | <u>Volded</u> | Туре | <u>Document Recipient</u> | Document Description | Cleared | <u>Amount</u> |
| 5928 | 09/30/2013 | No | CHK | Aflac Attn: Remittance Processing | august aflac | No | \$735.82 |
| 5929 | 09/30/2013 | No | CHK | Allen's Plumbing Supply | plumbing supplies | No | \$81.56 |
| 5930 | 09/30/2013 | No | CHK | Ally | acct 024914953493 | No | \$525.63 |
| 5931 | 09/30/2013 | No | CHK | American Express | September Amex charges | No | \$1,395.73 |
| 5932 | 09/30/2013 | No | CHK | American Rooter Llc | 1 Seymour ave main line backup | No | \$557.00 |
| 5933 | 09/30/2013 | No | CHK | Anthem Dental | acct #ACT6850861 | No | \$698.85 |
| 5934 | 09/30/2013 | No | CHK | Bender Plumbing Supplies Inc. | also inv # W196546A | No | \$523.53 |
| 5935 | 09/30/2013 | No | CHK | Buel Cpa, P.C. | 2012 audit | No | \$4,205.00 |
| 5936 | 09/30/2013 | No | CHK | CL&P MR | acct 51294464060 | No | \$13.21 |
| 5937 | 09/30/2013 | No | СНК | Comcast | acct 8773 40 216 0178014 | No | \$100.53 |
| 5938 | 09/30/2013 | No | CHK | Comcast | acct 8773 40 216 0174468 | No | \$80.53 |
| 5939 | 09/30/2013 | No | CHK | Comcast | acct 8773 40 216 0069528 | No | \$98.95 |
| 5940 | 09/30/2013 | No | CHK | Compliance Signs, Inc | fire symbol signs · | No | \$246.50 |
| 5941 | 09/30/2013 | No | CHK | CONN NAHRO | UPCS fundamentals | No | \$1,800.00 |
| 5942 | 09/30/2013 | No | CHK | Connecticut Post | acct 109949 | No | \$175.40 |
| 5943 | 09/30/2013 | No | CHK | Direct Energy Services, L1c | acct 02395043-742-8 | No | \$3,189.28 |
| 5944 | 09/30/2013 | No | снк | Eagle Environmental Inc. | abatement monitoring | No | \$2,345.00 |
| 5945 | 09/30/2013 | No | CHK | Experian | August credit checks | No | \$89.57 |
| 5946 | 09/30/2013 | No | CHK | Federal Express | fed ex to HUD | No | \$52.12 |
| 5947 | 09/30/2013 | No | ÇHK | Friends Of Fur Llc | 29 ray house | No | \$240.00 |
| 5948 | 09/30/2013 | No | ÇHK | G&K Services | September uniforms | No | \$110.56 |
| 59 49 | 09/30/2013 | No | CHK | HD Supply | also inv # 9124481735 | No | \$240.87 |
| 5950 | 09/30/2013 | No | CHK | Kone Inc | elevator maintenance | No | \$991.95 |
| 5951 | 09/30/2013 | No | CHK | Lincoln National Life Insurance C | acct SEYMOURHOU-BL-1001365 | No | \$386.15 |
| 5952 | 09/30/2013 | No | CHK | Lisa Marie Sanchez | Reimb. Mileage 9.18th & 9.25th | No | \$53.92 |
| 5953 | 09/30/2013 | No | CHK | M. J. Daly & Sons, Inc. | repair sprinkler system | No | \$2,999.05 |
| 5954 | 09/30/2013 | No | CHK | Nextel Communications | august cell phones | No | \$170.94 |
| 5955 | 09/30/2013 | No | CHK | Oxford Paint & Hardware, Inc | August OPH charges | No | \$149.54 |
| 5956 | 09/30/2013 | No | CHK | Peter E. Karpovich, | sha vs cuzio summons | No | \$64.10 |
| 5957 | 09/30/2013 | No | CHK | Pitney Bowes Global Financial Se | acct #9890675 | No | \$163.95 |
| 5958 | 09/30/2013 | No | CHK | Radovich Builders, LLP | 3 brothers repair toilet leak | No | \$955.00 |
| 5959 | 09/30/2013 | No | ÇHK | Radovich Builders, LLP | 2L replace broken kitchen tiles | No | \$11,058.00 |
| 5960 | 09/30/2013 | No | CHK | Robert Lashin | 18 chamberlin | No | \$500.00 |
| 5961 | 09/30/2013 | No | CHK | Seymour Janitorial Services, Inc. | Septembers cleanings | No | \$1,424,00 |
| 5962 | 09/30/2013 | No | CHK | Shell Credit Card Center | acct 065-093-700 | No | \$340.66 |
| 5963 | 09/30/2013 | No | CHK | Sherwin Williams | Paint for 26 Seymour Ave - Donna T | No | \$479.45 |
| 5964 | 09/30/2013 | No | CHK | St. Treasurer For Merfund | MERF September 2013 | No | \$6,596.71 |
| 5965 | 09/30/2013 | No | CHK | Staples Credit Plan | also inv # 4160011001, 4160011002 | No | \$671.45 |
| 5966 | 09/30/2013 | No | CHK | Valley Electric Supply & Lighting | electrical supplies | No | \$18.05 |
| | | | | | | | |

Seymour Housing Authority General Ledger Cash Payment/Receipt Register Smithfield Gardens

Filter Criteria Includes: 1) Project: 014 - Smithfield Gardens Assisted Living, 2) Payment Date: All, 3) Financial Period: September 2013, 4) Payments Over: All, 5) Check Numbers: All, 6) Cleared Date: All, 7) Check Status: All, 8) Payment Status: All, 9) Show Payments: Yes, 10) Show Deposits: No, 11) Order By: Payment/Receipt Number

Bank: Naugatuck Valley Savings & Loan, Bank Account: 615009087, GL Account: 1120

| Posted Paymer | nts | | | | | Cleared | Amount |
|---------------|--------------|---------------|------|---------------------------------|---------------------------------------|---------|-------------|
| Doc Num | Payment Date | <u>Voided</u> | Type | <u>Document Recipient</u> | Document Description | No. | \$1,327.91 |
| 3178 | 09/16/2013 | No | CHK | Aquarion Water Company Of Ct | acct 200204664 | | |
| 3179 | 09/16/2013 | No | CHK | AT&T | acct 203 888-5093 150 | No | \$971.20 |
| 3180 | 09/16/2013 | No | CHK | CL&P SGAL | acct 51083234013 | No | \$3,566.49 |
| 3181 | 09/16/2013 | No | CHK | Fitz Vogt & Associates, LTD | August meal service | No | \$23,458.00 |
| 3182 | 09/16/2013 | No | CHK | FTW LLC | 4 of 5 installments plus 2 additional | No | \$1,000.00 |
| 3183 | 09/16/2013 | No | CHK | Radovich Builders, LLP | water leak in main garage | No | \$615.00 |
| | 09/16/2013 | No | CHK | Seymour Housing Authority | September Management fee | No | \$4,945.00 |
| 3184 | 09/16/2013 | No | CHK | SMD Inc | replacement pendants | No | \$638.39 |
| 3185 | | No | CHK | State of Connecticut | Reg #124-0057/1 | No | \$240.00 |
| 3186 | 09/16/2013 | | CHK | Winter Bros Waste Systems | September container service | No | \$387.16 |
| 3187 | 09/16/2013 | No | | | acct 57669970055 | No | \$1,423.38 |
| 3188 | 09/16/2013 | No | CHK | Yankee Gas | ianitorial supplies | No | \$385.40 |
| 3189 | 09/30/2013 | No | CHK | Banner Group Systems Inc. | • | No | \$4.47 |
| 3190 | 09/30/2013 | No | CHK | comcast | Acc# 8773 40 216 0196370 | | \$1,020.78 |
| 3191 | 09/30/2013 | No | CHK | Comcast | acct 8773 40 216 0069510 | No | |
| 3192 | 09/30/2013 | No | CHK | Comcast | acct 8773 40 216 0069536 | No | \$52.95 |
| 3193 | 09/30/2013 | No | CHK | Direct Energy Services, Llc | acct 67282386-587-4 | No | \$3,290.45 |
| 3194 | 09/30/2013 | No | CHK | HD Supply | Monthly HK supplies | No | \$481.48 |
| 3195 | 09/30/2013 | No | CHK | Kone Inc | maintenance agreement | Ņо | \$1,050.63 |
| 3196 | 09/30/2013 | No | CHK | Radovich Builders, LLP | private DR change ballast | No | \$1,481.00 |
| | 09/30/2013 | No | CHK | Theo Pro Compliance & Consultin | file approvals | No | \$100.00 |
| 3197 | | | CHK | | alarm batteries | No | \$142.29 |
| 3198 | 09/30/2013 | No | | | Sept. Reimb | No | \$36,718.34 |
| 3199 | 09/30/2013 | No | CHK | Seymour Housing Authority | Oopti - tonno | | |

TITHULES Exhibit - 1

Seymour Housing Authority General Ledger Cash Payment/Receipt Register **Federal**

Filter Criteria Includes: 1) Project: All, 2) Payment Date: All, 3) Financial Period: September 2013, 4) Payments Over: All, 5) Check Numbers: All, 6) Cleared Date: All, 7) Check Status: All, 8) Payment Status: All, 9) Show Payments: Yes, 10) Show Deposits: No, 11) Order By: Payment/Receipt Number

Bank: TD Banknorth, Bank Account: 424-0200579, GL Account: 1111.4

| Posted Payments pos Num Payment Date Voides 1707 09/23/2013 No 1708 09/23/2013 No 1709 09/23/2013 No 1710 09/30/2013 No 1711 09/30/2013 No 1712 09/30/2013 No | CHK CHK CHK | Decument Recipient Seymour Housing Authority Seymour Housing Authority Stanley Construction, LLC Seymour Housing Authority Seymour Housing Authority Seymour Housing Authority | Cocument Description CFP 50112 CFP 50111 Partial Payment from Periodic Est. # Callahan Early Reimb Callahan Reimb RH reimb | Cleared No No No No No No | \$25,641.06 \$5,253.20 \$17,940.16 \$25,000.00 \$36,188.10 \$20,478.98 |
|---|-------------------|--|--|---|---|
|---|-------------------|--|--|---|---|

Seymour Housing Authority General Ledger Cash Payment/Receipt Register Moderate Rental

Filter Criteria Includes: 1) Project: All, 2) Payment Date: All, 3) Financial Period: September 2013, 4) Payments Over: All, 5) Check Numbers: All, 6) Cleared Date: All, 7) Check Status: All, 8) Payment Status: All, 9) Show Payments: Yes, 10) Show Deposits: No, 11) Order By: Payment/Receipt Number

Bank: TD Banknorth, Bank Account: 12345, GL Account: 1111.2

Posted Payments

| FUSIEU I aymen | 13 | | | | | Ot | Amount |
|----------------|----------------|--------|------|---------------------------|-----------------------------|----------------|----------------|
| Doc Num | Payment Date | Voided | Type | Document Recipient | <u>Document Description</u> | <u>Cleared</u> | <u>Arnount</u> |
| DOC IVANY | Z GHIIGIN DAIS | | | | NO Balanta | No | \$30,393,10 |
| 1648 | 09/30/2013 | No | CHK | Seymour Housing Authority | MR Reimb | 140 | φ30,030.10 |
| 1010 | | | | • | | | |

Seymour Housing Authority General Ledger Cash Payment/Receipt Register Capital Fund

Filter Criteria Includes: 1) Project: All, 2) Payment Date: All, 3) Financial Period: September 2013, 4) Payments Over: All, 5) Check Numbers: All, 6) Cleared Date: All, 7) Check Status: All, 8) Payment Status: All, 9) Show Payments: Yes, 10) Show Deposits: No, 11) Order By: Payment/Receipt Number

Bank: Wachovia Bank, Bank Account: Checking, GL Account: 1111.CFP

| Posted . | Payments |
|----------|----------|
|----------|----------|

| Posted Payments | | | | | Document Description | <u>Cleared</u> | Antoun |
|-----------------|--------------|---------------|--------------|----------------------------|----------------------|----------------|-------------|
| <u>Doc Num</u> | Payment Date | <u>Vaided</u> | <u> Type</u> | <u>Document Recipient</u> | | No | \$25,641.06 |
| - | 09/23/2013 | No | CHK | Stanley Construction, LLC | CFP 50112 | | \$5,253,20 |
| 195 | 09/23/2013 | | - | West State Mechanical, Inc | CFP 50111 | No | \$5,255.20 |
| 106 | 09/23/2013 | No | CHK | Mest State Mechanical and | - | | |

#SEYM Seymour Housing Authority Exhibit - 1

| Cover Letter (S193) | | | |
|---------------------|--------------------------|--|--|
| Check Date: | 09/05/2013-1 | | |
| Period Range: | 08/19/2013 TO 09/01/2013 | | |
| Week Number: | Week #36 | | |

Dear Human Resource Consulting Group Client,

Please remember to notify us of any tax rate changes you received.

- Your friends at HRCG

| Payroll Totals: | # Check | S | |
|--|-------------------------------|----------|----------|
| Total Regular Checks | 0 | 0.00 | |
| Total Direct Deposits | 33 | 18833.81 | |
| Total Manual Checks | 0 | 0.00 | |
| Total 3rd Party Checks | 0 | 0.00 | |
| Total Void Checks | 0 | 0.00 | |
| Total COBRA Checks | 0 | 0.00 | |
| Total Net Payroll | | 24 Items | 18833.81 |
| Total Billing Impound | | 127.39 | |
| Total Agency Checks | 3 | 237.30 | |
| <u> </u> | 3 | 153.29 | |
| Total Agency Checks DD | 0 | 0.00 | |
| Total Agency Checks Void Total Tax Deposit Checks | Tax deposit to be made by Hum | * | |
| Sum of Checks | | | 19351.79 |
| Total of Checks Printe | d | 30 Items | |
| Total Tax Liability | u | | 7936.50 |
| Total Workers Comp Liability | , | | 0.00 |
| Total Payroll Liability | | | 27288.29 |
| Total Direct Deposits | | | 18987.10 |

NEXT PERIOD DATES

Total Debited From Account

Check Date: 09/19/2013 Week 38

Period Begin: 09/02/2013

Period End: Call In Date: 09/15/2013

09/16/2013 Week 37

Payroll rep: Yancey Timeka

Human Resource Consulting Group

phone: 203-881-1755 203-881-3135

e-mail: Cynthia@Hr-Consulting-Group.Com

Date Printed: 09/03/2013 1:03:49 PM

27288.29

minutes

#SEYM Seymour Housing Authority Exhibit - 1

| Tax Repor | rt For Payroll (S247) |
|---------------|--------------------------|
| Check Date: | 09/05/2013-1 |
| Period Range: | 08/19/2013 TO 09/01/2013 |
| Week Number: | Week #36 |

| | | | Week | Number: | | VCCK #30 |
|---|-------------|---------------------|-------------------|---------------------------------------|------------------------|----------------|
| ∑ Tax Type | Rate | Tax ID | Wages | Amount | # EE! | s Frequency |
| Federal Taxes | | | | | | |
| Federal | | 060687649 | 24,837.35 | 2,705.28 | | 24 Semi-Weekly |
| EE OASDI | 0.062000 | 060687649 | 25,364.84 | 1,572.64 | | 24 Semi-Weekly |
| EE Medicare | 0.014500 | 060687649 | 25,364.84 | 367.79 | | 24 Semi-Weekly |
| ER OASDI | 0.062000 | 060687649 | 25,364.84 | 1,572.64 | | 24 Semi-Weekly |
| ER Medicare | 0.014500 | 060687649 | 25,364.84 | 367.79 | | 24 Semi-Weekly |
| COBRA Credit | | 060687649 | | | | 24 Semi-Weekly |
| Total 941 Liabilities without COBRA Total 941 Liabilities with COBRA | | | | | 6,586.14 6,586.14 | |
| ER FUI | 0.006000 | 060687649 | 0.00 | | | 24 Quarterly |
| Total Federal Taxes | | | | · | 6,586.14 | |
| State Withholding | | | | • | | |
| CT State Withholding | | 6613871-000 | 24,837.35 | 986.50 | | 24 Weekly CT |
| Total State Withholding | | | | | 986.50 | |
| Employer SUI Withholding | | | | | | |
| CT-SUI | 0.057000 | 91-378-04 | 6,383.27 | 363.86 | | 24 Quarterly |
| Total Employer SUI | | | | | 363.86 | |
| Total Employee Taxes | | | | 5,632.21 | | |
| Total Employer Taxes without COBRA | | | | 2,304.29 | | |
| Total Tax Liability without COBRA | | | | | 7,936.50 | |
| Total Tax Liability with COBRA | | | | | 7,936.50 | |
| Regular checks | | | | 0.00 | | |
| Manual checks | | | | 0.00 | | |
| 3rd Party Checks | | | | 0.00 | | |
| Void Checks | | | | 0.00 | | |
| Direct Deposit Checks | | | | 18,987.10 | | |
| Total Net Payroll | | | | | 18,987.10 | |
| Agency Checks | | | | 237.30 | | |
| Agency Checks DD | | | | 0.00 | | |
| Agency Checks Void | | | | 0.00 | | |
| Billing Impound | | | | 127.39 | | |
| Total Workers Comp | | | | 0.00 | | |
| Total Payroll Liability | | | _ | · · · · · · · · · · · · · · · · · · · | 27,288.29 | |
| Tax Deposit Checks | Tax de | posit to be made by | Human Resource Co | onsulting Group | | |
| Tax Deposit Checks Void | Tax de | oosit to be made by | Human Resource C | onsulting Group | | |
| Total Check/Direct Deposits | | | | 19,351.79 | | |
| Total Direct Deposits | | | | 18,987.10 | | |
| Total Amount Debited from your Accour | nt before C | redit applied | _ | <u> </u> | 27,288.29 27,288.29 | |
| Total Amount Debited from your Accour | n anter Cre | ак аррнеа | | | 21,200.29 | |

Human Resource Consulting Group

phone: 203-881-1755 203-881-3135

e-mail: Cynthia@Hr-Consulting-Group.Com

Date Printed: 09/03/2013 1:03:54 PM

пиписсь

#SEYM Seymour Housing Authority Exhibit - 1

| Cove | er Letter (S193) |
|---------------|--------------------------|
| Check Date: | 09/19/2013-1 |
| Period Range: | 09/02/2013 TO 09/15/2013 |
| Week Number: | Week #38 |

Dear Human Resource Consulting Group Client,

Please remember to notify us of any tax rate changes you received.

- Your friends at HRCG

| Payroll Totals: | # Checks | | |
|---|------------------------|----------------------|----------|
| Total Regular Checks | 0 | 0.00 | • |
| Total Direct Deposits | 34 | 19426.91 | |
| Total Manual Checks | 0 | 0.00 | |
| Total 3rd Party Checks | 0 | 0.00 | |
| Total Void Checks | 0 | 0.00 | |
| Total COBRA Checks | 0 | 0.00 | |
| Total Net Payroll | 25 | tems | 19426.91 |
| T (10/11/2 Immound | | 706.46 | |
| Total Billing Impound | 3 | 242.99 | |
| Total Agency Checks | 3 | 153.29 | |
| Total Agency Checks DD | | 0.00 | |
| Total Agency Checks Void | 0 | · | |
| Total Tax Deposit Checks Tax deposit to t | oe made by Human Resou | arce Consuming Group | |
| Sum of Checks | | | 20529.65 |
| | 31 i | tems | |
| Total of Checks Printed | | | 8125.86 |
| Total Tax Liability | | | 0.00 |
| Total Workers Comp Liability | | | |
| Total Payroll Liability | | • | 28655.51 |
| Total Direct Deposits | | | 19580.20 |
| Total Debited From Account | | | 28655.51 |

NEXT PERIOD DATES

Check Date: 10/03/2013 Week 40

Period Begin: 09/16/2013

Period End: Call In Date: 09/29/2013

09/30/2013 Week 39

Payroll rep: Yancey Timeka

Human Resource Consulting Group

phone: 203-881-1755 203-881-3135

e-mail: Cynthia@Hr-Consulting-Group.Com

Date Printed: 09/16/2013 12:37:43 PM

#SEYM Seymour Housing Authority

Exhibit - 1

| Tax Report For Payroll (S247) | | | | | |
|-------------------------------|--------------------------|--|--|--|--|
| Check Date: | 09/19/2013-1 | | | | |
| Period Range: | 09/02/2013 TO 09/15/2013 | | | | |
| Week Number: | Week #38 | | | | |

| | | | 17001 | Number . | | |
|---|------------------------------|--------------------------------|--------------------|------------------|------------------------|---|
| Тах Туре | Rate | Tax ID | Wages | Amount | # <i>EE</i> 's | Frequency |
| Federal Taxes | | | | | 21 | Comi Monkly |
| Federal | | 060687649 | 25.560.55 | 2.764.62 | | Semi-Weekly Semi-Weekly |
| EE OASDI | 0.062000 | 060687649 | 26.098.34 | 1,618.13 | | Semi-Weekly |
| EE Medicare | 0.014500 | 060687649 | 26,098.34 | 378.44 | | Semi-Weekly |
| ER OASDI | 0.062000 | 060687649 | 26,098 34 | 1,618.13 | | Semi-Weekly |
| ER Medicare | 0.014500 | 060687649 | 26,098.34 | 378.44 | | Semi-Weekly |
| COBRA Credit | | 060687649 | | <u> </u> | 6,757.76 | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Total 941 Liabilities without COBRA | | | | | 6,757.76 6,757.76 | |
| Total 941 Liabilities with COBRA | | | 0.00 | | | 5 Quarterly |
| ER FUI | 0.006000 | 060687649 | 0.00 | | 6,757.76 | |
| Total Federal Taxes | | • | | | 0,707.70 | |
| State Withholding | | 6613871-000 | 25.560.55 | 995.43 | 2 | 5 Weekly CT |
| CT State Withholding | | 56 (367 1-000 | | | 995.43 | |
| Total State Withholding | | | | | | |
| Employer SUI Withholding | 0.057000 | 91-378-04 | 6,538.24 | 372.67 | 2 | 5 Quarterly |
| CT-SUI | 0.057000 | 31-310 04 | - | | 372.67 | |
| Total Employer SUI | | | | | | |
| Total Employee Taxes | | | | 5,756.62 | | |
| Total Employer Taxes without COBRA | | | _ | 2,369.24 | | |
| Total Tax Liability without COBRA | | | | | 8,125.86 | |
| Total Tax Liability with COBRA | | • | | | 8,125.86 | |
| | | | | 0.00 | | |
| Regular checks | | | | 0.00 | | |
| Manual checks | | | | 0.00 | | |
| 3rd Party Checks | | | | 0.00 | | |
| Void Checks | | | | 19,580.20 | | |
| Direct Deposit Checks | | | - | <u></u> | 19,580.20 | |
| Total Net Payroll | | | | 242.99 | | |
| Agency Checks | | | | 0,00 | | |
| Agency Checks DD | | | | 0.00 | | |
| Agency Checks Void | | | | 706.46 | | |
| Billing Impound | | | | 0.00 | | |
| Total Workers Comp | | | | | 28,655.51 | |
| Total Payroll Liability | | | _ | A | 20,000.0 | |
| Tax Deposit Checks | Tax de | eposit to be made by | y Human Resource (| Consulting Group | | |
| Tax Deposit Checks Void | Tax de | eposit to be made by | y Human Resource (| | | |
| Total Check/Direct Deposits | | | | 20,529.65 | | |
| Total Direct Deposits | | | | 19,580,20 | | |
| Total Amount Debited from your Account Total Amount Debited from your Account Debited from Your | int before (int after Cr | Credit applied edit applied | | | 28,655.51 28,655.51 | |

Human Resource Consulting Group

phone: 203-881-1755 fax: 203-881-3135

e-mail: Cynthia@Hr-Consulting-Group.Com

Date Printed: 09/16/2013 12:37:48 PM

Housing Authority of the Town of Seymour

Executive Director's Report

Occupancy

Rev. Callahan House

2013 Year-to-Date Vacancies

9

One unit remained vacant during August 2013 at Callahan House we have two move notices for September. Callahan House has experienced 57 vacancy days since January 1, 2013 and has averaged 6.33 turn around days per vacancy. By using the HUD PHAS Management Operation formula to calculate vacancy percentage, vacancy day percentage would be calculated as follows: 80 units X 365 days = 29,200 days available; 57 days/ 29200 days available = 0.1952% percentage through September 30, 2013.

Beginning with July 1, 2011, HUD is using a new formula being applied to the Operating Subsidy calculation. HUD is allowing for 3% vacancy. Vacancy over the 3% will not be paid in subsidy. For example, Callahan House has: 80 units X 12 = 960 unit months available (UMA). $960 \times 3\% = 29$ UMA or 348 days. For the 2114 subsidy calculation year, we have experienced 48 days and have 300 days to use for the balance of the subsidy year calculation (July 1, 2012 to June 30, 2013). For the 2015 subsidy calculation we used 36 days we have 312 days to use for the balance of the subsidy year.

| CALLA | HAN HOUSE | | ACANCY/TUR | | 2013 |
|-------|--------------------------|-----------|-------------|-----------------|---------------|
| | AL ELDERLY | | Vacancy Tur | over Days 2013 | |
| UNIT | PRIOR RESIDENT | MOVE-OUT_ | RESIDENT | NEXT IN-DATE | No. o Days |
| 2T | DosSantos | 1/31/2013 | Leavitt | 2/1/2013 | 1 |
| 3P | Auclair | 2/28/2013 | Rich | 3/15/2013 | 15 |
| 3U | Murzak | 3/6/2013 | Bresloff | 3/11/2013 | 5 |
| 4S | Wityak | 6/30/2013 | Georgette | 7/1/2013 | 1 |
| 4R | Michaud | 6/30/2013 | Marino | 7/1/2013 | 1 |
| 4E | Amodio | 6/30/2013 | Frano | 7/1/2013 | 1 |
| 3R | Kain | 7/31/2013 | Albro | 9/1/2013 | 31 |
| 3U | Bresloff | 9/30/2013 | Vacant | | 1 |
| 4T | Abrams | 9/30/2013 | Vacant | | 1 |

Norman Ray House remained fully occupied during September 2013. Norman Ray House has experienced 93 vacancy days since January 1, 2013 and has averaged 18.6 turn around days per vacancy. By using the HUD PHAS Management Operation formula to calculate vacancy percentage, vacancy day percentage would be calculated as follows: 40 units X 365 days = 14600 days available; 93 days/ 14600 days available = .6369% percentage through September 30, 2013.

Beginning with July 1, 2011, HUD is using a new formula being applied to the Operating Subsidy calculation. HUD is allowing for 3% vacancy. Vacancy over the 3% will not be paid in subsidy. For example, Norman Ray House has: 40 units X 12 = 480 unit months available (UMA). 480 X 3% = 14 UMA or 168 days. For the 2114 subsidy calculation year, we have experienced 68 days and have 100 days to use for the balance of the subsidy year calculation (July 1, 2012 to June 30, 2013). For the 2015 subsidy calculation year we have experienced 8 days and have 160 days remaining to use.

| NORMAN RAY HOUSE | VACANCY/TURNOVER DAYS 2013 |
|------------------|----------------------------|
| FEDERAL ELDERLY | |

| UNIT | PRIOR RESIDENT | MOVE-OUT_ | RESIDENT | NEXT IN-DATE | NO. OF |
|------|--------------------------|------------|----------|-----------------|--------|
| 18 | LaTone | 12/15/2012 | Allen | 1/2/2013 | 2 |
| 1 | Wiatryzk | 2/8/2013 | Franko | 5/1/2013 | 81 |
| 37 | Volosin | 4/30/2013 | Jones | 5/1/2013 | 1 |
| 2* | Franko | 5/1/2013 | Marcil | 8/1/2013 | 1 |
| 4 * | Jones | 5/1/2013 | Carasone | 8/7/2013 | 8 |

Moderate Rental experienced one move in during September 2013. Moderate Rental has experienced 193 vacancy days since January 1, 2013 and averaged 24.125 days per vacancy through September 30, 2013. By using the HUD PHAS Management Operation formula to calculate vacancy percentage, vacancy day percentage would be calculated as follows: 81 units X 365 days = 29,565 days available; 193 days/ 29565 days available = 0.6528% percentages through September, 2013.

| STATI | E MODERATE RENT | | VACANCY/TUR | NOVER DAYS | 2013 |
|------------|------------------------------------|------------------------|---------------------|------------------------|---------------|
| | YHOUSING | | | | |
| UNIT | Base PRIOR Rent RESIDENT | MOVE-OUT | TENANT | NEXT IN-DATE | No Of Days |
| 16S | 417 Miller | 1/5/2013 | Serrano | 2/1/2013 2/15/2013 | 27 15 |
| 21S 40C | 420 Andreucci 430 Lein | 1/31/2013 1/31/2013 | Davenport Kirpas | 2/5/2013 2/5/2013 | 5 |
| 40C 12C | 414 Serano | 2/1/2013 | Teal | 2/26/2013 | 26 |
| 4B | 430 Rodriquez | 3/6/2013 4/5/2013 | | 3/15/2013 4/19/2013 | 9 14 |
| 35C 7S | 430 Silva 420 Bristol | 5/31/2013 | | 7/1/2013 | 30 |
| 30C | 430 Edwards | 7/12/2013 | Reid | 9/17/2013 | 67 |

Average number of vacancy days per vacancy:

The Vacancy Loss is approximately \$2,726 January 1 through September 30, 2013. We had \$7,500 budgeted for Vacancy Loss through September 30, 2013.

24.125

Smithfield Gardens Assisted Living experienced three move ins during September 2013 Smithfield Gardens has experienced 810 vacancy days since January 1, 2013 and averaged 62.30 days per vacancy. By using a standardized Management Operation formula to calculate vacancy percentage, vacancy day percentage would be calculated as follows: 56 units X 365 days = 20,440 days available; 810 days/ 20,440 days available = 3.9628% percentage through September 30, 2013.

| SMITHE | ELD GARDENS | | ACANCY/TURN | NOVER DAYS | 2012 |
|--|--|--|--|--|--|
| | DLIMNG | | | | |
| Ta CI UNIT % | R Rent PRIOR | MOVE-OUT | TENANT | NEXT IN-DATE | No Of Days |
| 212 6 120 6 103 6 116 8 224 8 225 1 114 206 101 | 60% 960 Quinn 60% 960 Rogers 60% 960 Maher 60% 960 Biagini 50% 800 Namias 50% 800 Wajdowicz 60% 960 Gregorio 50% 800 Griffin 50% 800 Bulinski 60% 960 D'Aloia 60% 960 French | 11/26/2012 12/8/2012 12/21/2012 2/22/2013 12/24/2012 1/31/2013 3/20/2013 4/9/2013 4/26/2013 5/26/2013 | Patrignelli Polese Franklin Vargoshe Dimon Miline Bucko Dorfman Turek Dolan Vacant | 1/25/203 2/22/2013 2/26/2013 4/16/2013 3/2/2013 4/26/2013 6/28/2013 9/14/2013 6/30/2013 9/18/2013 | 25 22 57 52 61 59 91 157 65 114 38 |
| 115 | 50% 800 Teetman 50% 800 Giordano | 8/4/2013 8/15/2013 | Tomascak Vacant | 9/27/2013 | 53 16 |

Average number of vacancy days per vacancy:

62.30

The vacancy loss is approximately \$23,865 since January 1, 2013Through September 30, 2013. We budgeted \$18,486 Vacancy Loss through September 30, 2013.



General Information

Applications

The 2 bedroom and 3 bedroom waiting lists remain closed as of August 2013.

The Annual IPA audit of the Seymour Housing Authority is completed. Patrick Buel, CPA visited the Seymour Housing to perform the site work for the Audit. He was provided with all the testing data, which he reviewed while he was here. The Audited financials were submitted to HUD's REAC system by 9/30/2013.

Complaints

Callahan House

We received a complaint about menacing behavior using fowl language. The resident was spoken to by the Jr. Occupancy Specialist

Moderate Rental

We have received a complaint about a nuisance unreported household guest on Seymour Ave. We are at the fact finding stage of this complaint and will issue a pre-termination notice soon. We are still working on this Pre-termination notice

Rev. Callahan House

Annual Dwelling Inspections: 80 annual dwelling inspections have been completed.

2013 Capital fund Program money has been approved for the Callahan House a total of \$62,000. It will be used to install a booster water heater pump to facilitate the back flow preventors at the Hot Water Heaters.

Norman Ray House

Annual inspections to began October 1, 2013, 8 units were inspected. The dwelling units will be inspected at a rate of 8 per week.

HUD provided \$28,000 in CFP funds available for Norman Ray House from the 2013 funding.

Moderate Rental

All 80 unit dwelling inspections are complete at the Moderate Rental properties for 2013

34 Smith Street

We await a plan for heating the house. Electrical upgrade is needed as well.

Smithfield Gardens Assisted Living

Occupancy Statistics:

- 95% (53 of 56 units) occupied as of 09/30/2013
- Five applications in processing
- No move-outs in September; three move-ins
- 7 applicants on waiting list for 60% units (\$985 rent)
- 9 applicants on waiting list for 50% units (\$825 rent)
- Average age is 85.2
- Age range is 66 99
- Average length of tenancy is 25.94 months

Budgeting Statistics:

- 19 of 19 units rented at \$800/\$825
- 34 of 37 units rented at \$960/\$985
- 52 of 53 occupied units participating in the meal plan

Other:

MRC/ALSA meetings held 09/04, 09/11, 09/18, 09/25 (attended by MRC Director, RSC & RNs)

50-52 residents' statuses reviewed each week

1 resident out at rehab as of 09/30/13

Levels of care for August 2013: 0 @ Level 1; 18 @ Level 2; 26 @

Level 3; 8 @ Level 4

- Resident Council Meeting held August 29, 2013 minutes follow; next meeting 09/25/13
- September Fire Drill completed 09/27/13 (second shift)
- Annual CHFA site visit on 09/17/13; all went well.

- Annual NDC site visit on for 09/23/13; all went well.
- Spectrum, the Tax Credit Compliance inspectors will be visiting on 11/8/2013

We have given Panda Concrete, LLC a notice to proceed for the sidewalk repairs and the work is 90% complete. The cost as reported last month will be \$9,700.

David Gutcheon of the Office of Policy and Management has yet to give us a meeting relative to the processing of CHCPE applications. Some progress has been made relative to the longer applications; however, the applicants associated with the hold ups are no longer interested or not eligible for our services and require a longer term solution. I will continue to press for a meeting.

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

Expires 08/31/2011

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

U.S. Department of Housing and Urban Development

| Part I: | Part I: Summary | | | | BDV of Guants |
|-------------------------------|--|---|---|------------|------------------------|
| PHA Name | Housing Authority of the Town | Grant Typeand Number Capital FundProgram Grant No: CT26P03550113 | 550113 Replacement Housing Factor Grant No. | nt No: | FFY of Grant Approval: |
| <u> </u> | of Seymour | Date of CFPP. | | | 2013 |
| Type of Grant Original Ann | nual Statement | Reserve for Disasters/Emergencies Revisee | Revised Annual Statement (revision no: Final Performance and Evaluation Report |) eport | |
| 1 12.0 | Cmorry by Development Account | Total | Total Estimated Cost | | Total Actual Cost |
| Tille | Summary by Percopulation account | Original | Revised 2 | Obligated | Expended |
| | Total non-CFP Funds | | | | |
| 2 | 1406 Operations (may not exceed 20% of line 21) | | | | |
| m | 1408 Management Improvements | | | | |
| 4 | 1410 Administration (may not exceed 10% of line 21) | \$1,300 | | | |
| 5 | 1411 Audit | | | | |
| 9 | 1415 Liquidated Damages | | | | |
| 7 | 1430 Fees and Costs | \$7,000 | | | |
| æ | 1440 Site Acquisition | | | | |
| 6 | 1450 Site Improvement | | | | |
| 10 | 1460 Dyvelling Structures | | | | |
| = | 1465.1 Dwelling Equipment—Nonexpendable | \$24,211 | | | |
| 12 | 1470 Non-dwelling Structures | | | | |
| 13 | 1475 Non-dwelling Equipment | \$57,351 | | | |
| 14 | 1485 Demolition | | | | |
| 15 | 1492 Moving to Work Demonstration | | | | |
| 16 | 1495.1 Relocation Costs | | | | |
| 17 | 1499 Development Activities 4 | | | | |
| 18a | 1501 Collateralization or Debt Service paid by the PHA | | | | |
| 18ba | 9000 Collateralization or Debt Service paid Via System of Direct |)irect | | | - |
| | Payment | | | | |
| 61 | 1502 Contingency (may not exceed 8% of line 20) | | | | |
| 50 | Amount of Annual Grant: (sum of lines 2 - 19) | \$69,862 | | | |
| 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 | asmes | | | |
| | | | | | |

To be completed for the Performance and Evaluation Report.

1 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.

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

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 08/31/2011

| Part I: Summary | | | FFY of Grant: 2012 |
|---|---|--|-----------------------------|
| BUA Nome | Grant Typeand Number | Typeand Number Arrange Courts Replacement Housing Factor Grant No. | |
| rnA manner Housing Authority of the Town | Capital FundProgram Grant No. C. 20r 053301 | | FFY of Grant Approval: 2013 |
| of Seymour | Date of CHMP | | |
| | | | |
| Type of Grant Original Annual Statement Reserve for D | Reserve for Disasters/Emergencies | Revised Annual Statement (revision no:) | |
| Oligana Amara Cancerton Deport for Period Ending: | | Fillal I Cliff interior and | Total 4 stual Cast |
| Performance and evaluation received | Total Fistin | Total Retimated Cost | |
| | | Obtanta | Expended |
| Line Summary by Accessor | Original Revised | Congre | , |
| | | Cianature of Public Housing Director | Date |
| Cimotine of Everythice Director | Date | Olganatic of A tool and a second | |
| Signature of texted to the | | | |
| | | | |
| | | | |

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

| Part II: Supporting Pages | | | | | | | | |
|---------------------------|--|---|----------|----------------------|----------|-------------------------|------------|----------------|
| | | | | | | Goderal FEV of Grant | | |
| PHA Name: Housing Aut | PHA Name: Housing Authority of the Town Capital Fund Program Grant No. CT26P03550113 | fumber m Grant No: CT26P ing Eactor Grant N | 03550113 | CFFP (Yes/No): | / No): | r cuciai v v cuciai v v | 2013 | .3 |
| or seying | | actor Chant | 1 | Total Estimafed Cost | fed Cost | Total Actual Cost | ual Cost | Status of Work |
| Development Number | General Description of Major Work Categories | Development Account No. | Cuantity | Lotal Estimit | | | | |
| Name/PHA-Wide | | | | | | | | |
| Activities | | | | Original | Revised | Funds | Funds | |
| | | | | , | } | Obligated 2 | Expended - | |
| CT03500001 | Administrative Costs for Printing & Advertising | 1410 | - | \$871 | | | | |
| CT085000002 | Administrative Costs for Printing & Advertising | 1410 | ,- | \$429 | | | | |
| CT03500001 | A/E Fees | 1408 | | \$4,300 | | | | |
| CT035000002 | A/E Fees | 1408 | | \$2,700 | | | | |
| T | Install booster pump system and backflow on hot water | 1,475 | - | \$25,000 | | | | |
| | system | | | | | - | | |
| CTOSEODOS: | Benjare "house side" water shutoff valve in meter pit | 1475 | + | \$2,000 | | | | |
| | | 1475 | - | \$30,351 | | | | |
| C103200001 | heplace (upose) not mentioned | 1465 1 | 7 | \$24,211 | | | | |
| CT035000002 | Replace kitchen cabinets in efficiency aparments | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | l | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | L | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

form HUD-50075.1 (4/2008)

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

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 08/31/2011

| tail it way your bear | ages | | | | | | | | |
|----------------------------------|---------------------------------|---------------------------------------|---|--------------------|----------------------|----------------|-----------------------|--------------------------------|----------------|
| PHA Name: Housing Aut of Seymour | ority of the Town | t Type and National Programment House | Grant Type and Number Capital Fund Program Grant No: CT26F03550113 Replacement Housing Factor Grant No: | :6P03550113 Vo: | CFFP () | CFFP (Yes/No): | Federal FFY of Grant: | ant: 2013 | |
| Development Number | eneral Description of Categoria | or Work | Development Account No. | Quantity | Total Estimated Cost | ated Cost | Total Actual Cost | al Cost | Status of Work |
| Name/PHA-Wide Activities | | | | | | • | | - | |
| | | | | | Original | Revised 1 | Funds Obligated | Funds Expended ² | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | - | | | | |
| | | | , | | | | | | |
| | | | | | | | | | |
| i | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 7.446 | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | ļ | | | | | | | ļ |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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

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

| Part III: Implementation Schedule for Capital Fund Financing Program | chedule for Capital Fund I | Financing Program | | | | T |
|--|--|-----------------------------|--|------------------------|----------------------------------|---|
| PHA Name: | of Sevmonir | | | | Federal FFY of Grant: 2013 | |
| Development Number Name/PHA-Wide | All Fund Obligated (Quarter Ending Date) | bligated ing Date) | All Funds Expended (Quarter Ending Date) | Expended ding Date) | Reasons for Revised Target Dates | |
| Activities | noitonillo lonini | Actual Obligation | Original Expenditure | Actual Expenditure | | T |
| | Original Obligation End Date | Actual Colligation End Date | End Date | End Date | | 1 |
| CT035 | September 2015 | | September 2017 | | | - |
| | - | | | | | |
| | | | | - | and control | 7 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | - |
| | | | | | | 1 |
| | | | | | | |
| | | | | • | | 1 |
| | | | | | | |
| | | | | | | |
| | | | | | | T |
| | | | | | | Т |
| | | | | | | ٦ |
| | | | | | | |

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.

form HUD-50075.1 (4/2008)

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

Expires 08/31/2011

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

Part III: Implementation Schedule for Capital Fund Financing Program

| Federal FFY of Grant: | 2013 | Reasons for Revised Target Dates | | |
|-----------------------|----------------------------------|---|--|-------------------------------|
| | | All Funds Expended (Quarter Ending Date) | Actual Expenditure End Date | |
| | | | Actual Obligation Original Expenditure End Date End Date | |
| | vn of Seymour | wn of Seymour | bligated ing Date) | Actual Obligation End Date |
| | Housing Authority of the Town of | All Fund Obligated (Quarter Ending Date) | Original Obligation End Date | |
| | PHA Name: Housing A | Development Number Name/PHA-Wide | Activities | |

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.

Kesolution >00

Minutes Exhibit - 4

PHA Certifications of Compliance with PHA Plans and Related Regulations

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

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

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the ____ 5-Year and/or LAnnual PHA Plan for the PHA fiscal year beginning 1/1/2014, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.

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.

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/Performance and Evaluation Report must be submitted annually even if

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.

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.

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.

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.

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

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

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.

Minutes Exhibit - 4

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

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

15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.

16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with

17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard

18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).

19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.

20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

21. The PHA provides assurance as part of this certification that:

(i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;

(ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and

(iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during

22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

| Housing Authority of the Town of Sey | PHA Number/HA Code |
|--|--|
| 5-Year PHA Plan for Fiscal Years 20 | 20 |
| Annual PHA Plan for Fiscal Years 20/ | <u>4</u> - 20 <u>14</u> |
| hereby certify that all the information stated herein, as well as any information stated herein, as well as any information for the criminal statements. Conviction may result in criminal statements. | formation provided in the accompaniment herewith, is true and accurate. Warning: HUD will hal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802) |
| Name of Authorized Official Branda A. White | Chair person |
| Signature | Date /0/3/13 |
| | |
| Previous version is obsolete | Page 2 of 2 form HUD-50077 (4/200 |

Section 48 - Separation

A. Resignation

An employee who desires to terminate his/her employment shall submit a written resignation at least two (2) weeks in advance, setting forth his/her reasons for resigning. Prior to the final separation, the employee must complete an exit conference with the Executive Director, or his designee.



Minutes Exhibit - 5

Recommended Changes to the Personnel Policies of the Housing Authority of the Town of Seymour as of October 2013 regarding Health Care Coverage

Although many of the requirements of the Affordable Care Act (ACA) may not be applicable to SHA because SHA is not considered a "large employer", our insurance agent and human resources consultant have highly recommended that we comply with some of the standards set forth in the ACA. One of these recommendations is for SHA to provide medical insurance to all employees who are scheduled to work 30 or more hours per week. The definition of a full-time employee as referenced in the ACA is derived from the definition used by the IRS [§ 4980h of the internal revenue code (4) Full-time employee; (A) In general; The term "full-time employee" means, with respect to any month, an employee who is employed on average at least 30 hours of service per week].

SHA began providing medical coverage to employees working 30 or more hours per week as of June 1, 2013. The existing section of the personnel policy states that SHA will only provide coverage to 'full-time employees' who are currently defined in the personnel policy as those employees working 40 hours per week. The recommended change in language to the policy shall only be applicable to the section referenced below. SHA does not intend to change its own definition of a full-time employee.

Personnel Policy, Section 30, current language:

30) Health, Group Life and Disability Insurance Coverage

- A) <u>Full time employees</u> shall be eligible to be covered by the Seymour Housing Authority Health Insurance Plan. The Seymour Housing Authority will contribute a portion of the high insurance deductible in the form of a contribution to the employee's Heath Services Account as determined annually by management.
- B) Any employees currently afforded insurance coverage according to a previous revision of this personnel policy are eligible to continue coverage as previously prescribed under the terms of the policy in place at that time.
- C) Full-time employees shall also be covered under the Authority's Group Life and Disability Insurance Plan.
- D) Part-time employees regularly scheduled to work more than thirty (30) hours per week may purchase, at their own cost, the Authority's health, life and disability insurance.
- E) Health, life and disability coverage will discontinue upon separation of employment. Upon separation, the individual will be given the option to remain on the group's coverage at cost to the individual per COBRA requirements.

Personnel Policy, Section 30, proposed new language:

30) Health, Group Life and Disability Insurance Coverage

- A) Employees who are regularly scheduled to work 30 or more hours per week shall be eligible to be covered by the Seymour Housing Authority Health Insurance Plan. The Seymour Housing Authority will contribute a portion of the high insurance deductible in the form of a contribution to the employee's Heath Services Account as determined annually by management.
- B) Any employees currently afforded insurance coverage according to a previous revision of this personnel policy are eligible to continue coverage as previously prescribed under the terms of the policy in place at that time.
- C) Employees who are regularly scheduled to work thirty 30 or more hours per week shall also be covered under the Authority's Group Life and Disability Insurance Plan.
- D) Part-time employees regularly scheduled to work <u>between 20 29 hours per week</u> may purchase, at their own cost, the Authority's health, life and disability insurance.
- E) Health, life and disability coverage will discontinue upon separation of employment. Upon separation, the individual will be given the option to remain on the group's coverage at cost to the individual per COBRA requirements.

Minutes Exhibit - 6

HOUSING AUTHORITY OF THE TOWN OF SEYMOUR
PROJECT - SMITH ACRES, SMITH ACRES EXT, CASTLE HEIGHTS, HOFMANN HEIGHTS
BUDGET FOR THE YEAR ENDING DECEMBER 31,

| | 2012 ACTUAL OPERATING | 2013 Annualized Operating | 2013 APPROVED BUDGET | 2014 PROPOSED BUDGET Current Reril |
|--|-----------------------------|---------------------------------|----------------------------|---|
| INCOME | 400.000 | 414,768 | 415,578 | 416,388 |
| 3100 RENTAL INCOME - BASE | 406,668 | 54,788 | 60,674 | 53,499 |
| 3100 RENTAL INCOME - EXCESS OF BASE | 60,404 | (4,452) | (10,000) | (5,000) |
| 3210 DWELLING VACANCY LOSS | (4,005) 463,067 | 465,104 | 466,252 | 464,887 |
| NET RENTAL INCOME | 403,007 | 400,101 | •=-• | |
| 3510 SALES AND SERVICES TO TENANTS | 3,498 | 4,970 | 3,000 | 3,500 |
| ······································ | 178 | (1,096) | 500 | 100 |
| | 22,147 | 35,162 | 35,765 | 35,769 |
| 3620 OTHER INCOME TOTAL INCOME | 488,890 | 504,140 | 505,517 | 504,256 |
| 10 (ME IMOOMILE | | | | |
| EXPENSES | 402 712 | 112,874 | 113,909 | 105,954 |
| 4120 SALARIES - OFFICE | 103,713 | 4,624 | 5,311 | 5,218 |
| 4120 COMPENSATED ABSENCES | (1,539) | 9,840 | 13,331 | 10,026 |
| 4130 LEGAL | 7,929 9,177 | 5,964 | 12,607 | 8,000 |
| 4131 ACCOUNTING FEES | 4,438 | 5,660 | 6,053 | 5,925 |
| 4151 OFFICE SUPPLIES | 20,900 | 20,900 | 20,900 | 20,900 |
| 4152 RENTS | 3,003 | 1,190 | 2,521 | 1,261 |
| 4153 TRAVEL | 32,835 | 34,748 | 19,166 | 25,711 |
| 4159 OTHER OFFICE EXPENSE | 32,340 | 44,838 | 37,934 | 39,258 |
| 4160 PENSIONS AND OTHER FUNDS | 11,745 | 13,798 | 13,1 <u>81</u> | 12,699 |
| 4161 PAYROLL TAXES TOTAL MANAGEMENT EXPENSES | 224,541 | 254,436 | 244,913 | 234,952 |
| | 213 | 308 | 200 | 400 |
| 4310 WATER | 1,459 | 1,630 | 2,200 | 2,200 |
| 4320 ELECTRICITY | 482 | (988) | 4,000 | 2,000 |
| 4340 FUEL TOTAL UTILITY EXPENSE | 2,154 | 950 | 6,400 | 4,600 |
| TOTAL OTIETT FALENGE | | | 04.000 | 30,459 |
| 4410 MAINTENANCE WAGES | 22,695 | 23,122 | 24,928 | 20,000 |
| 4420 MATERIALS AND SUPPLIES | 21,614 | 13,846 | 19,800 | 119,400 |
| MAZO CONTRACTUAL SERVICES | 131,174 | 122,374 | 99,500 1,000 | 0 |
| 4440 MAINTENANCE SHOP AND EQUIPMENT EXPENS | E37 | 0 | 145,228 | 169,859 |
| TOTAL MAINTENANCE EXPENSE | 175,520 | 159,342 | 143,220 | 100,000 |
| | 16,617 | 21,042 | 21,875 | 23,990 |
| 4711 INSURANCE | 35,759 | 25,418 | 39,094 | 25,420 |
| 4717 INTEREST & PRINCIPAL PAYMENTS TOTAL OTHER EXPENSE | 52,376 | 46,460 | 60,969 | 49,410 |
| TOTAL OTTAL | | 40,000 | 40,009 | 37,434 |
| 4810 PROVISION FOR REPAIRS AND REPL | 34,517 | 40,008 | 8,000 | |
| 4820 PROVISION FOR VACANCY AND COLL LOSS | 8,600 | 8,000 | 48,009 | |
| TOTAL PROVISIONS | 43,117 | 48,008 | 40,003 | 10/101 |
| THE THE PARTY (MOONE) EVERNEE | (7,515) | (0) | 0 | |
| 6100 EXTRAORDINARY (INCOME) EXPENSE TOTAL EXPENSES | 490,193 | | | 504,256 |
| IUIAL EAPENSES | | | | n |
| NET SURPLUS/(DEFICIT) FOR PERIOD | (1,303) | | | = = 39 |
| PROVISION PER UNIT MONTH | 34 | 36 | 41 | 33 |

PHA Board Resolution Approving Operating Budget

Minutes Exhibit - 7 U.S. Department of Housing

and Urban Development
Office of Public and Indian Housing Real Estate Assessment Center (PIH-REAC)

OMB No. 2577-0026 (exp. 04/30/2016)

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

complete this form, unless it displays a currently valid OMB control number.

This information is required by Section 6(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income public housing program and provides a summary of the proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the sufformation to determine if the operating plan adopted by the public housing agency (PHA) and the amounts are reasonable, and that the PHA is in compliance with procedures

| NTT 4 N | Same Housing | Authorita | PHA Code: (TOSSOOCO) |
|----------|--|---|---|
| 'HA I | iscal Year Beginning: 1/01/201 | Roard Resolution Num | aber: 389 |
| HA F | iscal Year Beginning: | Dourd Resolution | Chairnerson I make the following |
| Acting | on behalf of the Board of Commissioner cations and agreement to the Department | s of the above-named PHA as of Housing and Urban Develo | opment (HUD) regarding the Board's |
| approv | ral of (check one or more as applicable): | , | DATE |
| , | | | 10/2/17 |
| _ | Operating Budget approved by Board reso | olution on: | <u> </u> |
| | Operating Budget submitted to HUD, if a | pplicable, on: | |
| | Operating Budget revision approved by B | oard resolution on: | 4 |
| | Operating Budget revision submitted to H | TUD, if applicable, on: | |
| I cert | fy on behalf of the above-named PHA that: | | |
| 1. A | Il statutory and regulatory requirements hav | re been met; | • |
| 2. 1 | he PHA has sufficient operating reserves to | meet the working capital needs of | of its developments; |
| 3. P | roposed budget expenditure are necessary in erving low-income residents; | n the efficient and economical op | eration of the housing for the purpose of |
| 4. 7 | he budget indicates a source of funds adequ | ate to cover all proposed expend | itures; |
| 5. 7 | he PHA will comply with the wage rate req | uirement under 24 CFR 968.110 | (c) and (f); and |
| | The PHA will comply with the requirements | | |
| I her | eby certify that all the information stated wi plicable, is true and accurate. | thin, as well as any information p | provided in the accompaniment herewith, |
| Wai | ning: HUD will prosecute false claims and C. 1001, 1010, 1012.31, U.S.C. 3729 and 38 | statements. Conviction may res | ult in criminal and/or civil penalties. (18 |
| | Board Chairperson's Name: | Signature: | Date: |

HOUSING AUTHORITY OF THE TOWN OF SEYMOUR BUDGET - RAY HOUSE

| | 2012 ACTUAL OPERATING | 2013 Annualized Operating | 2013 APPROVED BUDGET | 2014 PROPOSED BUDGET |
|--|-----------------------------|---------------------------------|----------------------------|---|
| INCOME | | 105 220 | 107,670 | 105,500 |
| 3110 DWELLING RENTAL | 110,241 | 105,228 | 1,800 | 1,800 |
| 3620 TENANT CHARGES | 1,965 | 1,764 27,896 | 27,772 | 27,660 |
| 3690 OTHER INCOME | 27,525 | | 137,242 | 134,960 |
| TOTAL INCOME | 139,731 | 134,888 | 131,274 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| EXPENSES | | FF 744 | 56,268 | 52,340 |
| 4110 ADMINISTRATIVE SALARIES | 51,137 | 55,744 | 2,802 | \$2,562 |
| 4120 COMPENSATED ABSENCES | (545) | 2,460 | 3,494 | 3,494 |
| 4130 LEGAL AND OTHER SERVICES | 3,391 | 2,432 | 6,226 | 6,700 |
| 4170 ACCOUNTING FEES | 6,018 | 6,502 | 1,245 | 623 |
| 4150 TRAVEL | 1,492 | 556 | 24,584 | 22,835 |
| 4190 SUNDRY | 25,737 | 24,386 7,310 | 5,432 | 5,379 |
| 4210 TENANT SERVICES | 6,074 | | 100,051 | 93,932 |
| TOTAL MANAGEMENT EXPENSES | 93,304 | 99,390 | 100,001 | 33,552 |
| | (3,286) | (5,174) | 200 | - |
| 4350 BULK CABLE TELEVISION | 7,580 | 8,100 | 7,500 | 7,500 |
| 4310 WATER | 21,415 | 24,160 | 25,000 | 23,000 |
| 4320 ELECTRICITY TOTAL SERVICES/UTILITY EXPENSE | 25,709 | 27,086 | 32,700 | 30,500 |
| TOTAL SERVICEO/OTIZ/Y | | | 11 FGG | 9,254 |
| 4410 MAINTENANCE WAGES | 10,503 | 10,682 | 11,566 | 6,750 |
| 4420 MATERIALS AND SUPPLIES | . 13,086 | 3,488 | 6,900 | 31,775 |
| 4430 CONTRACTUAL SERVICES | 32,157 | <u>51,910</u> | 31,950 | 47,779 |
| TOTAL MAINTENANCE EXPENSE | 55,746 | 66,080 | 50,416 | 41,115 |
| | 6,480 | 7,960 | 8,368 | 8,666 |
| 4711 INSURANCE | . 22,657 | 29,914 | 25,806 | 24,343 |
| 4540 EMPLOYEE BENEFITS | 2,300 | 892 | 5,000 | 1,000 |
| 4610 EXTRAORDINARY MAINTENANCE 4715 PAYMENTS TO MUNICIPALITIES IN LIEU OF TAXES | | 7,74 <u>4</u> | 7,517 | 7,500 |
| TOTAL OTHER EXPENSE | 39,562 | 46,510 | 46,691 | 41,508 |
| | . 1.410 | 200 | 200 | 200 |
| 4820 PROVISION FOR VACANCY AND COLLECTION LOS | S 1,410 | (1,078) | • | • |
| 6100 FXTRAORDINARY (INCOME) EXPENSE | - | 6,186 | 1,00 <u>0</u> | 1,000 |
| 7520 REPLACEMENT OF NONEXPENDABLE EQ | 5,527 | 244,374 | 231,058 | 214,919 |
| TOTAL EXPENSES | 221,258 | 244,374 | | |
| 8020 CURRENT YEAR OPERATING SUBSIDY | (104,900) | (81,338) | (102,168) | |
| PROVISION FOR OPERATING RESERVE | 23,373 | \$ (28,148) | <u>\$ 8,352</u> | <u>\$ 41</u> |

PHA Board Resolution Approving Operating Budget

rnnutes Exhibit - 8

U.S. Department of Housing

and Urban Development

Office of Public and Indian Housing -Real Estate Assessment Center (PIH-REAC) OMB No. 2577-0026 (exp. 04/30/2016)

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

complete this form, unless it displays a currently valid OMB control number.

This information is required by Section 6(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income public housing program and provides a summary of the proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the information to determine if the operating plan adopted by the public housing agency (PHA) and the amounts are reasonable, and that the PHA is in compliance with procedures prescribed by HUD. Responses are required to obtain benefits. This information does not lend itself to confidentiality.

| PHA Name: Segmon Housing PHA Fiscal Year Beginning: 1/1/2014 | Authority | PHA Code: CTOSS coope |
|---|--|----------------------------------|
| PHA Fiscal Year Beginning: /// Zo / 4 | Board Resolution Number: | 390 |
| Acting on behalf of the Board of Commissioner certifications and agreement to the Department approval of (check one or more as applicable): | rs of the above-named PHA as its Chair | person, I make the following |
| Operating Budget approved by Board reso | olution on: | 10/2/17 |
| Operating Budget submitted to HUD, if a | pplicable, on: | |
| ☐ Operating Budget revision approved by B | Soard resolution on: | |
| ☐ Operating Budget revision submitted to H | IUD, if applicable, on: | |
| I certify on behalf of the above-named PHA that: | | |
| 1. All statutory and regulatory requirements have | ve been met; | |
| 2. The PHA has sufficient operating reserves to | meet the working capital needs of its deve | lopments; |
| Proposed budget expenditure are necessary in serving low-income residents; | n the efficient and economical operation of | the housing for the purpose of |
| 4. The budget indicates a source of funds adequ | ate to cover all proposed expenditures; | · |
| 5. The PHA will comply with the wage rate req | uirement under 24 CFR 968.110(c) and (f) | ; and |
| 6. The PHA will comply with the requirements | for access to records and audits under 24 (| CFR 968.110(i). |
| I hereby certify that all the information stated wi if applicable, is true and accurate. | thin, as well as any information provided in | n the accompaniment herewith, |
| Warning: HUD will prosecute false claims and U.S.C. 1001, 1010, 1012.31, U.S.C. 3729 and 38 | statements. Conviction may result in crim 302) | inal and/or civil penalties. (18 |
| Print Board Chairperson's Name: | Signature: | Date: |
| | i | |

HOUSING AUTHORITY OF THE TOWN OF SEYMOUR PROJECT - CALAHAN HOUSE

PROPOSED BUDGET FOR THE YEAR ENDING DECEMBER 31,

| | 2012 ACTUAL OPERATING | 2013 Annualized Operating | 2013 APPROVED BUDGET | 2014 PROPOSED BUDGET |
|--|-----------------------------|---------------------------------|----------------------------|----------------------------|
| INCOME | 329,073 | 333,224 | 322,789 | 330,000 |
| 060 3110 DWELLING RENTAL | 1,708 | 1,340 | 1,100 | 1,500 |
| 100 3610 INTEREST ON GENERAL FUND INVESTMENTS | 50,910 | 44,948 | 40,192 | 40,080 |
| 130 3690 OTHER INCOME | 0 | 0_ | 0 | 0 |
| 160 7530 RECEIPTS FROM NONEXPENDABLE EQUIP | 381,691 | 379,512 | 364,081 | 371,580 |
| GROSS INCOME | | | | |
| EXPENSES | | | 112 526 | 104,679 |
| 180 4110 ADMINISTRATION SALARIES | 102,294 | 111,510 | 112,536 5,420 | 5,181 |
| 180 4120 COMPENSATED ABSENCES | 544 | 4,756 | 5,420 | 3,988 |
| 190 4130 LEGAL EXPENSES | 3,939 | 3,282 | 2,490 | 1,245 |
| 210 4150 TRAVEL | 2,940 | 1,112 18,004 | 20,451 | 21,300 |
| 220 4170 ACCOUNTING AND AUDITING FEES | 10,389 | 50,992 | 51,807 | 44,270 |
| 223 4190 SUNDRY | 52,961 | 13,266 | 11,623 | 11,572 |
| 4190 SOCIAL SERVICE COORDINATOR | 14,219 187,286 | 202,922 | 210,315 | 192,236 |
| TOTAL ADMINISTRATIVE EXPENSES | 187,280 | 202/02# | | |
| AMINED | 24,600 | 24,550 | 11,000 | 20,000 |
| 290 4310 WATER & SEWER | 29,039 | 31,922 | 34,000 | 33,000 |
| 300 4320 ELECTRICITY | 74,796 | 65,674 | 67,800 | 68,000 |
| 300 4330 GAS | (3,895) | (5,266) | 0 | 121.000 |
| 300 4340 CABLE TOTAL UTILITIES | 124,540 | 116,880 | 112,800 | 121,000 |
| TOTAL OBLIBES | | | 40 530 | 21,205 |
| 360 4410 LABOR | 17,794 | 18,136 | 19,530 | 14,950 |
| 370 4420 MATERIALS | 15,885 | 16,648 | 14,000 83,000 | 106,750 |
| 380 4430 CONTRACT COSTS | 111,719 | 138,684 | 116,530 | 142,905 |
| TOTAL ORDINARY MAINTENANCE | 145,398 | 173,468 | 110,000 | |
| | 14,521 | 19,590 | 17,237 | 18,781 |
| 440 4510 INSURANCE | 20,064 | 22,374 | 20,999 | 20,900 |
| 450 4520 PAYMENT IN LIEU OF TAXES | 43,938 | 58,280 | 50,417 | 49,333 |
| 470 4540 EMPLOYEE BENEFIT CONTRIBUTIONS | 780 | 250 | 250 | 250 |
| 480 4620 CASUALTY/COLLECTION LOSSES | 14,586 | 14,418 | 18,000 | 15,000 |
| 710 4610 EXTRAORDINARY MAINTENANCE TOTAL GENERAL EXPENSES | 93,889 | 114,912 | 106,903 | 104,264 |
| TOTAL ROUTINE EXPENSES | 551,113 | 608,182 | 546,548 | 560,405 |
| | | 47.200 | 5,000 | 12,000 |
| 580 7520 REPLACEMENT OF NONEXPENDABLE EQUIP | 9,799 | 17,398 | 3,000 | 2,000 |
| 590 7540 PROPERTY BETTERMENTS & ADDITIONS | 3,500 | (596) 624,984 | 554,548 | 574,405 |
| TOTAL | 564,412 | 024,904 | 304,010 | |
| A DE MONTESTE | | 0 | | |
| 810 6010 PRIOR YEAR ADJUSTMENTS | (218,463) | | (207,000) | (203,000) |
| 720 8020 CURRENT YEAR OPERATING SUBSIDY | 345,949 | 421,644 | 347,548 | 371,405 |
| TOTAL | | | | 445 |
| 770 PROVISION FOR OPERATING RESERVE | 35,742 | (42,132) | 16,533 | 175 |
| 770 PROVISION FOR OPERATING RESERVE | | | | |

HOUSING AUTHORITY OF THE TOWN OF SEYMOUR BUDGET - SMITHFIELD GARDENS ASSISTED LIVING

| BUDGET - SMITHFIELD GARDENS ASSISTED LIVING | | 0042 | 2013 | 2014 |
|--|---------------------|-------------------------|------------------|----------------------|
| | 2012 | 2013 | APPROVED | PROPOSED |
| | ACTUAL OPERATING | ANNUALIZED OPERATING | BUDGET | BUDGET |
| | | 616,440 | 616,440 | 625,440 |
| Rent Revenue- Tenant Rental Payment | 608,640 533,299 | 530,112 | 536,544 | 529,784 |
| Rent Revenue- RAP Income | (13,588) | (41,798) | (18,493) | (21,890) |
| Apartments- Vacancy Net Rental Revenue | 1,128,351 | 1,104,754 | 1,134,491 | 1,133,333 |
| | 58,410 | 58,410 | 58,406 | 58,406 |
| Miscellaneous Revenue - Office Rent (Net) Miscellaneous Revenue - NSF, Damages, Interest | 10,680 | 9,140 | 8,516 | 8,516 |
| Total Miscellaneous Revenue | 69,090 | 67,550 | 66,922 | 66,922 |
| Core Services Revenue | 216,656 | 199,652 | 214,277 | 209,127 |
| ALSA Personal Services Revenue | 984,823 | 999,992 | 960,000 | 1,000,000 |
| Dietary Services/Meals Revenue | 298,766 | 292,752 | 294,840 | 292,110 |
| Elderly Service Income (See Separate Schedule) | 1,500,245 | 1,492,396 | 1,469,117 | 1,501,237 |
| Total Other Revenue | 1,569,335 | 1,559,946 | 1,536,039 | 1,568,159 |
| TOTAL REVENUE | 2,697,686 | 2,664,700 | 2,670,530 | 2,701,492 |
| Computing & Mostings | 2,856 | 1,608 | 4,861 | 2,179 |
| Conventions & Meetings Advertising & Marketing | 4,616 | 5,924 | 3,000 | 5,107 42.246 |
| Office Salaries | 42,809 | 48,800 | 49,919 | 43,345 22,344 |
| Office Expenses | 27,836 | 31,046 | 27,692 | 59,587 |
| Management Fee | 59,338 | 56,800 | 59,645 | 61,458 |
| Manager or Superintendent Salary | 57,812 | 60,616 | 60,260 | 2,592 |
| Legal Expense- Project | 2,263 | 1,980 | 4,840 | 8,500 |
| Audit Expense | 10,760 | 8,300 | 7,000 8,716 | 8,000 |
| Bookkeeping Fees/Accounting Services | 7,585 | 8,356 | 500 | 500 |
| Miscellaneous Administrative Expenses (Tax Compl | 250 | 400 | 226,433 | 213,612 |
| Total Administrative Expenses | 216,125 | 223,830 | | |
| FIL-Autoite | 31,165 | 21,968 | 27,000 | 24,000 |
| Electricity | 7,626 | 7,150 | 7,000 | 7,500 |
| Water Gas | 67,346 | 58,340 | 78,000 | 68,000 99,500 |
| Total Utilities Expense | 106,137 | 87,458 | 112,000 | 99,000 |
| Maint./Repairs Payroll | 15,404 | 15,668 | 16,963 | 19,425 |
| Hskp./Cleaning Payroll | 3,364 | 3,570 | 3,856 | 2,998 |
| Cleaning/Decorating/Grounds/Repairs Supplies | 49,559 | 22,834 | 24,450 | 24,450 89,350 |
| Contract Costs | 89,597 | 99,624 | 89,650 | 4,100 |
| Garbage & Trash Removal | 3,746 | 3,940 | 4,400 | 25,500 |
| Heating/Cooling Repairs & Maintenance | 27,144 | 24,166 | 22,000 19,500 | 25,000 |
| Snow Removal | 8,682 | 52,360 | 12,000 | 12,800 |
| Cable | 11,897 | 12,346 | 0 | 0 |
| Miscellaneous Operating (Casualty Loss) | (9,800) 199,593 | <u> </u> | 192,819 | 203,623 |
| Total Operating & Maintenance Expenses | | 12 020 | 13,920 | 13,920 |
| Real Estate Tax | 11,021 | 13,920 12,918 | 12,647 | 12,134 |
| Payroll Taxes (project share) | 13,920 | 44,400 | 44,400 | 44,400 |
| Property & Liability Insurance | 44,400 | 3,950 | 3,950 | 3,932 |
| Fidelity Bond Insurance | 3,950 | 7,338 | 9,835 | 9,842 |
| Workmen's Compensation | 5,417 31,507 | 51,414 | 44,554 | 40,018 |
| Health Insurance & Other Benefits & Comp Abs | 620 | 1,140 | 700 | 700 |
| Miscellaneous Taxes, Licenses, Permits Total Taxes & Insurance | 110,835 | 135,080 | 130,006 | 124,946 |
| · Dawn - march | | | 005.075 | 291,618 |
| Core Services Expenses | 253,739 | 282,726 | 285,872 | 1,000,000 |
| Personal Services Expenses | 984,823 | 999,992 | 960,000 | |
| Dietary Services/Meals Expenses | 296,797 | 271,020 | 295,650 | 306,420 1,598,038 |
| Elderly Service Expense (See Separate Schedule) | 1,535,359 | 1,553,738 | 1,541,522 | 2,239,719 |
| TOTAL OPERATING EXPENSES | 2,168,049 | 2,234,614 | 2,202,780 | |
| OPERATING INCOME (LOSS) | 529,637 | 430,086 | 467,750 | 461,774 |
| Mortgage Principal & Interest- CHFA Debt | 421,420 | 421,420 | 421,420 | 421,420 |
| Replacement Reserve Deposits | 39,384 | 39,384 | 39,765 | 39,765 589 |
| NET PROJECTED CASH FLOW | 68,833 | (30,718) | 6,565 | 303 |
| NET PROJECTED CASH FLOW | 00,000 | | | |

Exhibit - 9

SMITHFIELD GARDES ASSISTED LIVING SERVICES

| BUDGET | 2012 ACTUAL | 2013 Annualized | 2013 APPROVED BUDGET | 2014 PROPOSED BUDGET |
|---|-------------------|--------------------|----------------------------|----------------------------|
| Core Service Revenue | 216,656 | 199,652 999,992 | 214,277 960,000 | 209,127 1,000,000 |
| Personal Service Revenue | 984,823 | 292,752 | 294,840 | 292,110 |
| Dietary Services/Meals Revenue | 298,766 | 1,492,396 | 1,469,117 | 1,501,237 |
| TOTAL ELDERLY SERVICE REVENUE | 1,500,245 | 1,432,330 | | |
| Core Services Expenses | 24 526 | 24,106 | 25,519 | 25,064 |
| Salaries - RSC | 24,526 | 37,298 | 33,524 | 40,262 |
| Salaries - Housekeeping/Maint | 35,381 134,504 | 141,144 | 133,509 | 141,348 |
| Salaries - Operational Workers | 194,411 | 202,548 | 192,552 | 206,674 |
| Total Salaries | 14,674 | 29,136 | 23,121 | 32,578 |
| Benefits - Health Insurance & Retirement | 22,997 | 29,004 | 24,517 | 24,487 |
| Benefits - Payroll Taxes | 13,764 | 18,248 | 23,863 | 23,980 |
| Benefits - W/C Insurance | 51,435 | 76,388 | 71,501 | 81,044 |
| Total Benefits & Taxes | 245,846 | 278,936 | 264,053 | 287,718 |
| Total Salaries, taxes, benefits | 831 | 244 | | 0 |
| Laundry/Linens Purchased Services | 1,942 | 1,906 | 3,500 | 2,000 |
| Supplies - Laundry/Cleaning | 3.640 | 820 | 3,200 | 900 |
| Supplies - Activities/Pendants | 1,480 | 820 | 2,000 | 1,000 |
| Activites -Outside Services Total Core Service Expense | 253,739 | 282,726 | 272,753 | 291,618 |
| Personal Service Expense | 984,823 | 999,992 | 960,000 | 1,000,000 |
| | 296,797 | 271,020 | 295,650_ | 306,420_ |
| Dietary Purchased Services & Servers | 296,797 | 271,020 | 295,650 | 306,420 |
| Total Dietary Expense | 1,535,359 | 1,553,738 | 1,528,403 | 1,598,038 |
| TOTAL ELDERLY SERVICE EXPENSE | 1,000,000 | | | <u></u> |
| | (37,083) | (83,074) | (71,594) | (82,491) |
| Core Services Net Operating Income | (37,003) | (00)07 () | . 0 | . 0 |
| Personal Services Net Operating Income | 1,969 | 21,732 | (810) | (14,310) |
| Meals Services Net Operating Income | (35,114) | (61,342) | (72,404) | (96,801) |
| TOTAL SERVICES NET OPERATING INCOME | (30,114) | <u> </u> | | |

rinutes Exhibit - 10

VACANT UNIT OIL POLICY

Purpose; To assist lower income families to and promote afford housing opportunity and to protect the tenant and our asset from costly water pipe freeze up during winter months.

Each vacant unit Oil Tank will be filled to 150 gallons of Oil. The incoming resident will be charged for the 150 gallons.

Outgoing tenants will be paid for oil they leave in the tank up to a maximum of 150 gallons.