

HOUSING AUTHORITY OF THE CITY OF BRIDGEPORT

Nicholas Calace, Executive Director
150 Highland Avenue
Bridgeport, CT 06604
T#. (203) 337-8900
F#. (203) 337-8830
TDD#. 1-800-545-1833 Ext. 226
www.bridgeporthousing.org



Shante T. Hanks, Chairperson
Commissioners:
Rev. Sulton Stack, Jr.
Daniel Ford, Esquire
Dulce Nieves

Housing and Urban Development
Hartford Field Office
One Corporate Center
20 Church Street, 19th Floor
Hartford, CT 06103-3220
July 22, 2011

For the attention of: Jennifer Gottlieb-Elazhari

Reference: **Second Increment RHF Plan – Use and Accumulation of Second Increment RHF Funds**

Dear Ms Gottlieb-Elazhari,

The Housing Authority of the City of Bridgeport (HACB) would like to accumulate five years of second increment Replacement Housing Factor (RHF) grants, totaling approximately \$2,115,108 to be used as collateral in a Capital Fund Finance Program (CFFP) which would partly fund the construction of thirty five (35) new two bedroom apartments at 46 Albion Street. All thirty five (35) apartments would be replacement Public Housing/ACC for the former Father Panik Village. The HACB needs these funds to have sufficient funds to construct these units.

The subject grants are:

CT R001 502-11	\$ 423,021 (estimate)
CT R001 502-12	\$ 423,021 (estimate)
CT R001 503-13	\$ 423,021 (estimate)
CT R001 503-14	\$ 423,021 (estimate)
CT R001 503-15	\$ 423,021 (estimate)

It is our understanding from the information posted on the Capital Fund webpage that the obligation end date for these funds will be 10/29/2013. The HACB will construct the units in accordance with the requirements found at 24 CFR Part 941 and will meet the newly established obligation and disbursement deadlines.

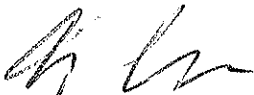
The HACB confirms that its Capital Fund Program Annual Statement/Performance and Evaluation report has been approved by HUD on September 17, 2010. The HACB also confirms that its Five-Year and Annual Plan was approved on September 17, 2010. The 2011 Five Year

and Annual Plan was transmitted to HUD on July 22, 2011. The HACB is in compliance with the obligation and expenditure deadlines on all of its Capital Funds Grants and is current on its LOCCS reporting.

The HACB recognizes that in order to meet the leverage requirement, it must secure at least \$697,985 in firm financial commitments for additional funds. It is the intention of HACB to use in part the equity of approximately \$3,683,661 from the sale of 4% Low Income Housing tax Credits to meet the matching requirement. When these funds are secured, we will submit written documentation confirming the funding.

If you have any questions, please contact Christine Hermann, Director of Planning, Development and Modernization at (203) 337-8917 or chermann@bridgeporthousing.org

Yours sincerely



Nicholas Calace
Executive Director
Housing Authority of the City of Bridgeport



ncalace@bridgeporthousing.org
203-337-8900

Cc: Peter Hance
Christine Hermann
Joseph Macneil
Efrem Levy

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

Part I: Summary		Grant Type and Number		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Bridgeport		Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26-R001-50110		FFY of Grant Approval:	
Date of CFFP:		Revised Annual Statement (revision no.)			
Type of Grant		Performance and Evaluation Report for Period Ending: 6/30/2011		Final Performance and Evaluation Report	
Original Annual Statement		Revised		Total Actual Cost 1	
Performance and Evaluation Report		Revised		Expended	
Line	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$	47,002.00		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment - Nonexpendable				
12	1470 Non Dwelling Structures				
13	1475 Non Dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4	\$	423,022.00		

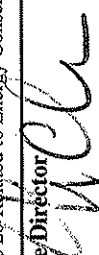
- 1 To be completed for the Performance and Evaluation Report.
- 2 To be completed for the Performance and Evaluation Report or a Revised Annual Statement
- 3 PHA's with under 250 units in management may use 100% of CFP grant for operations.
- 4 RHF funds shall be included here

Part I: Summary		FFY of Grant: 2010	
PHA Name: Housing Authority of the City of Bridgeport		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26-R001-50110 Date of CFFP:			
Type of Grant		Revised Annual Statement (revision no.)	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Final Performance and Evaluation Report	
Performance and Evaluation Report for Period Ending: 6/30/2011		Total Estimated Cost	
Summary by Development Account		Revised 2	
Line		Original	Total Actual Cost 1
			Obligated
			Expended
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2-19)	\$ 470,024.00	\$ -
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	
			
Date		Date:	
7/27/11			

- 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 PHA's with under 250 units in management may use 100% of CFF grant for operations.
- 4 RHF funds shall be included here

Part I: Summary		FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Bridgeport		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26-R001-50109 Date of CFPP:			
Type of Grant		Revised Annual Statement (revision no.)	
<input type="checkbox"/>	Original Annual Statement	<input type="checkbox"/>	Final Performance and Evaluation Report
<input checked="" type="checkbox"/>	Performance and Evaluation Report for Period Ending: 6/30/2011	<input type="checkbox"/>	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost 1
		Original	Obligated
		Revised	Expended
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21)		
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)		
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition		
9	1450 Site Improvements		
10	1460 Dwelling Structures		
11	1465.1 Dwelling Equipment - Nonexpendable		
12	1470 Non Dwelling Structures		
13	1475 Non Dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities 4		

- 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 PHA's with under 250 units in management may use 100% of CFP grant for operations.
- 4 RHF funds shall be included here

Part I: Summary		FFY of Grant: 2009	
PHA Name: Housing Authority of the City of Bridgeport		FFY of Grant Approval:	
Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: CT26-R001-50109 Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011 <input checked="" type="checkbox"/> Summary by Development Account		Revised Annual Statement (revision no.) Final Performance and Evaluation Report	
Line	Summary by Development Account	Total Estimated Cost	Total Actual Cost 1
		Original	Obligated
18a	1501 Collateralization or Debt Service paid by the PHA	\$ 394,839.00	\$ 394,839.00
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		\$ 376,276.89
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2-19)	\$ 394,839.00	\$ 394,839.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director 		Signature of Public Housing Director	
Date 7/20/11		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 PHA's with under 250 units in management may use 100% of CFP grant for operations.
- 4 RHF funds shall be included here

