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

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

Part I: Summary

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750115 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2015** **FFY of Grant Approval: 2015**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:1)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	10,000	0.00		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	0.00	10,000		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	75,906	75,906		
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	30,000	30,000		
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

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

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

Part I: Summary

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750115 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2015** **FFY of Grant Approval: 2015**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 1)**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
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)	115,906	115,906		
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	**Date** 9/24/15	**Signature of Public Housing Director**	**Date**

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

Part II: Supporting Pages

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750115 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2015**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA-Wide	Operations	1406		10,000	0.00	0.00	0.00	
HA-Wide	Office Furniture and Equipment-(administrative offices server, office furniture for three administrative offices and conference room, eight computer upgrades)	1475	8 workstations 1 server	30,000	30,000	30,000	24,341.54	
HA-Wide	Interior Painting of Vacant Units	1460	12	6,453	6,453	0.00		
HA-Wide	Replace Flooring in Vacant Units	1460	12	6,453	6,453	0.00		
HA-Wide	Replace Stoves	1460	105	53,000	53,000	0.00		
HA-Wide	Replace Hood Fans	1460	105	10,000	10,000	0.00		
HA-Wide	Administration	1410		0.00	10,000	0.00		

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

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Part II: Supporting Pages

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750115 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2015**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	

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

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: North Andover Housing Authority

Federal FFY of Grant: 2015

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	04/12/2017		04/12/2019		
Morkeski Meadows	04/12/2017		04/12/2019		

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

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: North Andover Housing Authority					**Federal FFY of Grant: 2014**
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	04/12/2017		04/12/2019		

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

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Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
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Expires 4/30/2011

Part I: Summary

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750114 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2014** **FFY of Grant Approval: 2014**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:2)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	10,536	0.00		
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	0.00	10,536		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	0.00	20,000		
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable	63,000	83,000		
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] PHAs with under 250 units in management may use 100% of CFP Grants for operations.
[4] RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750114 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2014** **FFY of Grant Approval: 2014**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 2)**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
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)	113,536	113,536		
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	63,000	83,000		

Signature of Executive Director	**Date** 9/24/15	**Signature of Public Housing Director**	**Date**

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

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

Part II: Supporting Pages

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750114 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2014**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA-Wide	Operations	1406		10, 536.00	0.00			
HA-Wide	Morkeski-Replace Boilers	1465.1	2	75,000.00	83,000.00	75,000.00	0.00	
HA-Wide	Replace Out Door Benches	1450	10	8,000.00	0.00			
HA-Wide	Site Improvements-tree removal, thatching/seeding	1450		20,000.00	20,000.00			
HA-Wide	Administration	1410		0.00	10,536.00	0.00	0.00	

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

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Expires 4/30/2011

Part II: Supporting Pages

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750114 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2014**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	

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

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

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

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: North Andover Housing Authority

Federal FFY of Grant: 2014

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	05/12/2016		05/12/2018		

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

U.S. Department of Housing and Urban Development
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Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: North Andover Housing Authority

Federal FFY of Grant: 2014

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

Part I: Summary

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750113 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant: 2013** **FFY of Grant Approval: 2013**

Type of Grant
☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no:2)**
☐ **Performance and Evaluation Report for Period Ending:** ☐ **Final Performance and Evaluation Report**

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised[2]	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) [3]	22,000	22,000	22,000	22,000
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 Improvement				
10	1460 Dwelling Structures	38,018.00	80,018.00	80,018.00	19,495.48
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	22,000	0.00	0.00	0.00
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities [4]				

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[2] To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750113 Replacement Housing Factor Grant No: Date of CFFP:	**FFY of Grant:2013** **FFY of Grant Approval: 2013**

Type of Grant

☐ **Original Annual Statement** ☐ **Reserve for Disasters/Emergencies** ☒ **Revised Annual Statement (revision no: 2)**

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost [1]	
		Original	Revised [2]	Obligated	Expended
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)	112,018	112,018		
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	**Date** 9/24/15	**Signature of Public Housing Director**	**Date**

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

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

Part II: Supporting Pages

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750113 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2013**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	
HA-Wide	Operations	1406		22,000.00	22,000.00	22,000.00	22,000.00	
HA-Wide	Interior Painting of Vacant Units	1460		18,000.00	18,000.00	18,000.00	9,335.03	
HA-Wide	Interior Painting of Common Areas	1460		10,000.00	26,000.00	26,000.00		
HA-Wide	Replace Flooring in Vacant Units	1460		25,018.00	25,018.00	25,018.00	10,160.45	
HA-Wide	Replace Flooring in Common Areas	1460		5,000.00	21,000.00	21,000.00	0.00	
HA-Wide	Landscaping	1450		10,000.00	0.00	0.00	0.00	
HA-Wide	Articulated Boom Lift	1475		22,000.00	0.00	0.00	0.00	

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

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Part II: Supporting Pages

PHA Name: North Andover Housing Authority	**Grant Type and Number** Capital Fund Program Grant No: MA06P10750113 CFFP (Yes/ No): Replacement Housing Factor Grant No:	**Federal FFY of Grant: 2013**

Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised [1]	Funds Obligated[2]	Funds Expended[2]	

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

U.S. Department of Housing and Urban Development
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Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: North Andover Housing Authority

Federal FFY of Grant: 2013

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	05/12/2016		05/12/2018		

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

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Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: North Andover Housing Authority

Federal FFY of Grant: 2014

Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates [1]
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide	9/08/2015	9/08/2015	9/08/2017		

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