

Part I: Summary	
PHA Name: Lowell Housing Authority	Grant Type and Number Capital Fund Program Grant No: MA01P00150117 DRAFT Replacement Housing Factor Grant No: Date of CFFP:
FFY of Grant: 2017 FFY of Grant Approval: 2017	

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

Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	553,339			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	276,670			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	83,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,853,687			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	0			
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.

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Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
<input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> 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)	2,766,696			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities	55,000			
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		
(Original signature required) Assistant Executive Director/Acting Executive Director					

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Part II: Supporting Pages								
PHA Name: Lowell Housing Authority		Grant Type and Number Capital Fund Program Grant No: MA01P00150117 DRAFT CFFP (Yes/ No): No Replacement Housing Factor Grant No:				Federal FFY of Grant: 2017		
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	
PHA Wide	Operations	1406	1698 units	553,339				
PHA Wide	Administration	1410	1698 units	276,670				
AMP 1	Fees and Costs – roof repairs	1430	3,500 ft ²	5,000				
AMP 1	Fees and Costs – exterior renovations – entry and storm doors	1430	100 units	5,000				
AMP 3	Fees and Costs – roof replacement	1430	7 buildings	10,000				
AMP 3	Fees and Costs – elevator modernization	1430	1 elevator	18,000				
AMP 3	Fees and Costs – boiler decentralization	1430	2 boilers	20,000				
AMP 3	Fees and Costs – laundry room ADA upgrades	1430	1 laundry	5,000				
AMP 4	Fees and Costs – Kitchen and Bath Mod	1430	15 units	20,000				
AMP 1	Roof repairs	1460	3,500 ft ²	190,000				
AMP 1	Exterior Renovations – entry and storm doors	1460	100 units	185,429				
AMP 3	Roof Replacement	1460	7 buildings	200,000				
AMP 3	Elevator modernization	1460	1 elevator	200,000				

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² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: Lowell Housing Authority			Grant Type and Number Capital Fund Program Grant No: MA01P00150116 CFFP (Yes/ No): No Replacement Housing Factor Grant No:			Federal FFY of Grant: 2016		
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	
AMP 3	Boiler decentralization	1460	2 boilers	200,000				
AMP 3	Laundry Room ADA upgrades	1460	1 laundry	50,000				
AMP 4	Kitchen and Bath Renovations	1460	15 units	828,258				

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: Lowell Housing Authority				Federal FFY of Grant: 2017	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

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

