

Actual Modernization Cost Certificate

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

OMB Approval No. 2577-0157 (exp. 01/31/2017)

Capital Fund Program (CFP)

Public reporting burden for this collection of information is estimated to average 2 hours 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2577-0044 and 0157), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Do not send this form to the above address.

This collection of information requires that each Housing Authority (HA) submit information to enable HUD to initiate the fiscal closeout process. The information will be used by HUD to determine whether the modernization grant is ready to be audited and closed out. The information is essential for audit verification and fiscal close out. Responses to the collection are required by regulation. The information requested does not lend itself to confidentiality.

PHA Name:

Housing Authority of the City of Milwaukee

Modernization Project Number:

WI39P002501-13

The PHA hereby certifies to the Department of Housing and Urban Development as follows:

1. That the total amount of Modernization Cost (herein called the "Actual Modernization Cost") of the Modernization Grant, is as shown below:

A. Funds Approved	\$ 4,079,190
B. Funds Disbursed	\$ 4,079,190
C. Funds Expended (Actual Modernization Cost)	\$ 4,079,190
D. Amount to be Recaptured (A-C)	\$ 0.00
E. Excess of Funds Disbursed (B-C)	\$ 0.00

2. That all modernization work in connection with the Modernization Grant has been completed;

3. That the entire Actual Modernization Cost or liabilities therefor incurred by the PHA have been fully paid;

4. That there are no undischarged mechanics', laborers', contractors', or material-men's liens against such modernization work on file in any public office where the same should be filed in order to be valid against such modernization work;

5. That the time in which such liens could be filed has expired; and

6. That for any years in which the grantee is subject to the audit requirements of the Single Audit Act, 31 U.S.C. § 7501 et seq., as amended, the grantee has or will perform an audit in compliance with said requirements.

7. Please mark one:

☒ A. This grant will be included in the PHA's next fiscal year audit per the requirements of the Single Audit Act.

☐ B. This grant will not be included in the PHA's next fiscal year audit per the requirements of the Single Audit Act.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name & Title of Authorized Signatory (type or print clearly):

Antonio Perez, Secretary-Executive Director

Signature of Executive Director (or Authorized Designee):

X

Date:

9/10/17

For HUD Use Only

The Cost Certificate is approved for audit (if box 7A is marked):

Approved for Audit (Director, Office of Public Housing)

Date:

X

The costs shown above agree with HUD verified costs (if box 7A or 7B is marked):

Approved: (Director, Office of Public Housing)

Date:

X

(Follow form instructions)

Standard Form 425 - Revised 10/11/2011
OMB Approval Number: 0348-0061
Expiration Date: 2/28/2015

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0061), Washington, DC 20503.

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: Housing Authority of the City of Milwaukee		Grant Type and Number Capital Fund Program Grant No: WI39P00250113 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2013 FFY of Grant Approval:
Type of Grant <input 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 checked="" type="checkbox"/> 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	815,838	815,838	815,838	815,838
3	1408 Management Improvements	815,838	815,838	815,838	815,838
4	1410 Administration (may not exceed 10% of line 21)	407,919	407,919	407,919	407,919
5	1411 Audit	10,000	10,000	10,000	10,000
6	1415 Liquidated Damages				
7	1430 Fees and Costs	250,000	241,795	241,795	241,795
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	1,322,967	1,328,488	1,328,488	1,328,488
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures	226,095	228,779	228,779	228,779
13	1475 Non-dwelling Equipment	230,533	230,533	230,533	230,533
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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 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: Housing Authority of the City of Milwaukee		Grant Type and Number Capital Fund Program Grant No: W139P00250113 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2013 FFY of Grant Approval:
Type of Grant <input 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 checked="" 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)	4,079,190	4,079,190	4,079,190	4,079,190
21	Amount of line 20 Related to LBP Activities		2,500	2,500	2,500
22	Amount of line 20 Related to Section 504 Activities		24,703	24,703	24,703
23	Amount of line 20 Related to Security - Soft Costs		670,672	670,672	670,672
24	Amount of line 20 Related to Security - Hard Costs		11,439	11,439	11,439
25	Amount of line 20 Related to Energy Conservation Measures		73,480	73,480	73,480
Signature of Executive Director _____		Date _____		Signature of Public Housing Director _____	
				Date _____	

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Part II: Supporting Pages								
PHA Name: `Housing Authority of the City of Milwaukee			Grant Type and Number Capital Fund Program Grant No: WI39P00250113 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	
PHA Wide	Operations	1406		815,838	815,838	815,838	815,838	completed
PHA Wide	Management Improvements	1408		815,838	815,838	815,838	815,838	completed
PHA Wide	Administration	1410		407,919	407,919	407,919	407,919	completed
PHA Wide	Audit	1411		10,000	10,000	10,000	10,000	completed
PHA Wide	Architectural & Engineering	1430		250,000	241,795	241,795	241,795	completed
COMPLETED	Mitigation of environmental hazards	1460		50,000	50,000	50,000	50,000	completed
	REAC Inspection findings			10,000	0	0	0	
	ADA/504 Accommodations			1,345	1825	1,825	1,825	completed
Arlington Ct/WI002000013P	facade Restoration Elevator modernization	1460		0 0	0 4,266	4,266	4,266	completed
Becher Ct/WI002000018P	Elevator modernization,	1460		720	720	720	720	completed
College Ct/WI002000011P	Elevator modernization,	1460		35,716	35,434	35,434	35,434	completed
Hillside Tr/WI002000001P	Elevator modernization,	1460		6,692	13,776	13,776	13,776	completed
Holton Tr/WI002000008P	Facade restoration	1460		701,773	701,773	701,773	701,773	completed
Lincoln Ct/WI1002000019P	façade Restoration	1460		2,671	0	0	0	
Locust Ct/WI002000015P	Elevator Modernization	1460		0	6,644	6,644	6,644	completed
PHA-Wide	Non-Dwelling Equipment	1475		230,533	230,533	230,533	230,533	completed

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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	
Mitchell Ct/WI002000017P	Elevator modernization, elevator control room modifications Facade restoration	1460		49,353	49,353	49,353	49,353	completed
				464,697	464,697	464,697	464,697	completed
Westlawn/WI002000002P	Mgt office/maint facility improvements	1470		226,095	228,779	228,779	228,779	completed

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Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name:				Federal FFY of Grant:	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	9/15/2015	05/31/16	9/15/2017	08/01/17	
Arlington Ct/WI002000013P	9/15/2015	09/23/15	9/15/2017	09/09/16	
Becher Ct/WI002000018P	9/15/2015	09/23/15	9/15/2017	12/09/16	
College Ct/WI002000011P	9/15/2015	01/13/16	9/15/2017	09/09/16	
Hillside Tr/WI002000001P	9/15/2015	09/25/17	9/15/2017	12/09/16	
Holton Tr/WI002000008P	9/15/2015	12/08/15	9/15/2017	12/30/15	
Westlawn WI002000070P	9/15/2015	11/07/16	9/15/2017	01/11/17	
Locust Ct/WI002000015P	9/15/2015	12/27/16	9/15/2017	03/10/17	
Mitchell Ct/WI002000017P	9/15/2015	02/26/16	9/15/2017	08/26/16	