

Authority Budget of:

JUN 24 2019

South Amboy Housing Authority

State Filing Year

2019

APPROVED COPY

For the Period:

July 1, 2019

to

June 30, 2020

www.southamboyhousing.com

Authority Web Address



Division of Local Government Services

JUN 24 2019

RESOLUTION NO. 1196
APPROVING THE LATE FILING OF THE BUDGET FOR FISCAL YEAR
JULY 1, 2019 TO JUNE 30, 2020

WHEREAS, the Housing Authority of South Amboy is required to submit the approved Budget 60 days prior to the start of the fiscal year to the State of New Jersey, and;

WHEREAS, the Budget preparation was delayed until the Authority was able to reasonably determine amounts of insurance and health benefit expenses, and:

WHEREAS, the Authority has estimated the amounts of the insurance and health benefit expenses required to be included in the proposed budget.


NOW THEREFORE be it resolved by the Commissioners of the Housing Authority of South Amboy approving the late filing of the NJ Budget for the FYE June 30, 2020



SYLVESTER ATTARDI- Chairman

Attested to:

I hereby certify that there is appropriate funding in the budget for said expenditures.



MARK NOBLE
Secretary



WILLIAM KATCHEN, CPA.

Dated: June 17, 2019

Resolution was introduced by *Gulick*, moved by *O'Connor* and seconded by
Vote .

Sylvester Attardi
Joseph Connors
Paul Gulick
Grace Hoffman-Spencer
Edward O'Connor
Saverio Sagliocco
Lynn Ust

YES NO ABSTAIN ABSENT

✓
✓
✓
✓
✓

CERTIFICATION

I, Mark Noble Secretary of the Housing Authority of the City of South Amboy, in the County of Middlesex, State of New Jersey (the "Authority"), DO HEREBY CERTIFY that the foregoing annexed extract from the Minutes of a Regular Meeting of the Board of Commissioners of the Authority duly called and held on June 17, 2019, has been compared by me with the original minutes as officially recorded in my office in the Minute Book of such governing body and is a true, complete and correct copy thereof and of the whole of the original minutes so far as they relate to the subject matter referred to in the extract.

IN WITNESS WHEREOF, I have hereunto set my hand on behalf of the Authority and affixed the corporate seal of said Authority this 17th day of June, 2019.



MARK NOBLE Secretary of the Housing
Authority of the City of South Amboy

2019 HOUSING AUTHORITY BUDGET

Certification Section

2019

SOUTH AMBOY HOUSING AUTHORITY
(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM July 1, 2019 TO June 30, 2020

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

*State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services*

By: Paul D. Cwert CPA, RMA Date: 1/8/2020

CERTIFICATION OF ADOPTED BUDGET

It is hereby certified that the adopted Budget made a part hereof has been compared with the approved Budget previously certified by the Division, and any amendments made thereto. This adopted Budget is certified with respect to such amendments and comparisons only.

*State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services*

By: _____ Date: _____

2019 PREPARER'S CERTIFICATION

SOUTH AMBOY HOUSING AUTHORITY

(Name)

HOUSING AUTHORITY BUDGET

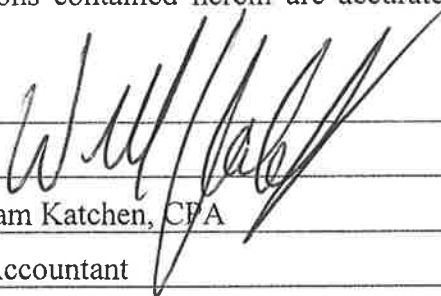
FISCAL
YEAR:

FROM: 7/1/2019

TO: 6/30/2020

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:			
Name:	William Katchen, CPA		
Title:	Fee Accountant		
Address:	596 Anderson Avenue, Suite 303, Cliffside Park, NJ 07010		
Phone Number:	201-943-4449	Fax Number:	201-943-5099
E-mail address	bill@katchencpa.com		

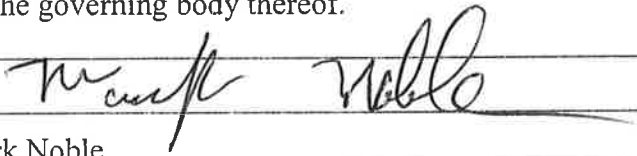
2019 APPROVAL CERTIFICATION
SOUTH AMBOY HOUSING AUTHORITY
(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: **FROM:7/1/2019** **TO:6/30/2020**

It is hereby certified that the Housing Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the South Amboy Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 17 day of June, 2019.

It is further certified that the recorded vote appearing in the resolution represents not less than a majority of the full membership of the governing body thereof.

Officer's Signature:			
Name:	Mark Noble		
Title:	Executive Director		
Address:	250 S. Broadway, South Amboy, NJ 08879		
Phone Number:	732-721-1831	Fax Number:	732-721-0377
E-mail address	mnoble@soamboyhousing.com		

INTERNET WEBSITE CERTIFICATION

Authority's Web Address: www.southamboyhousing.com

All authorities shall maintain either an Internet website or a webpage on the municipality's or county's Internet website. The purpose of the website or webpage shall be to provide increased public access to the authority's operations and activities. N.J.S.A. 40A:5A-17.1 requires the following items to be included on the Authority's website at a minimum for public disclosure. Check the boxes below to certify the Authority's compliance with N.J.S.A. 40A:5A-17.1.

- A description of the Authority's mission and responsibilities
- The budgets for the current fiscal year and immediately preceding two prior years
- The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information (**Similar information are items such as Revenue and Expenditures Pie Charts or other types of Charts, along with other information that would be useful to the public in understanding the finances/budget of the Authority**)
- The complete (All Pages) annual audits (Not the Audit Synopsis) of the most recent fiscal year and immediately two prior years
- The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- The approved minutes of each meeting of the Authority including all resolutions of the board and their committees, for at least three consecutive fiscal years
- The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

It is hereby certified by the below authorized representative of the Authority that the Authority's website or webpage as identified above complies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as listed above. A check in each of the above boxes signifies compliance.

Name of Officer Certifying compliance

Mark Noble

Title of Officer Certifying compliance

Executive Director

Signature



RESOLUTION NO: 1197

**SOUTH AMBOY HOUSING AUTHORITY
INTRODUCTION OF BUDGET FOR
FISCAL YEAR: FROM: JULY 1, 2019 to JUNE 30, 2020**

WHEREAS, the Annual Budget and Capital Budget for the South Amboy Housing Authority for the fiscal year beginning July 1, 2019 and ending June 30, 2020 has been presented before the Members of the South Amboy Housing Authority at its open public meeting of June 17, 2019; and

WHEREAS, the Annual Budget and the Capital Budget/Program as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including amendments thereto, if any, which have been approved by the Director of the Division of Local Governmental Services.

WHEREAS, the Annual Budget as presented introduced reflects total revenues of \$ 2,831,462.00 total appropriations, including any accumulated deficit if any, of \$ 2,796,120.00, and Fund Balance utilized of \$ 0.00; and

WHEREAS, the Capital Budget as introduced reflects total capital appropriations of \$ 122,500.00 and total fund balance planned to be utilized as funding thereof, of \$ 0.00; and

WHEREAS, the schedule of rents, fees and other user charges in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves, all as may be required by law, regulation or terms of contracts and agreements; and

WHEREAS, the Capital Budget/Program, pursuant to N.J.A.C. 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be sued as part of the said Authority's planning and management objectives. Specific authorization to spend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law.

NOW, THEREFORE BE IT RESOLVED, by the Members of the South Amboy Housing Authority, at an open meeting held on June 17, 2019 that the Annual Budget, including appended Supplemental Schedules, and the Capital Budget/Program of the South Amboy Housing Authority for the fiscal year period beginning July 1, 2019 and ending June 30, 2020 is hereby approved; and

BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in the said Housing Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements, and


BE IT FURTHER RESOLVED, that the Members of the South Amboy Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption in September 9, 2019.


SYLVESTER ATTARDI, Chairman

Attested to:

I hereby certify that there is appropriate funding in the budget for said expenditures.


MARK NOBLE, Secretary


WILLIAM KATCHEN, CPA.

Dated: June 17, 2019


Resolution was introduced by O'Connor, moved by Gulick and seconded by
. Vote .

	<u>YES</u>	<u>NO</u>	<u>ABSTAIN</u>	<u>ABSENT</u>
Sylvester Attardi	✓			✓
Joseph Connors	✓			
Paul Gulick	✓			✓
Grace Hoffman-Spencer	✓			
Edward O'Connor	✓			
Saverio Sagliocco	✓			
Lynn Ust				✓

CERTIFICATION

I, Mark Noble, Secretary of the Housing Authority of the City of South Amboy, in the County of Middlesex, State of New Jersey (the "Authority"), DO HEREBY CERTIFY that the foregoing annexed extract from the Minutes of a Regular Meeting of the Board of Commissioners of the Authority duly called and held on June 17, 2019, has been compared by me with the original minutes as officially recorded in my office in the Minute Book of such governing body and is a true, complete and correct copy thereof and of the whole of the original minutes so far as they relate to the subject matter referred to in the extract.

IN WITNESS WHEREOF, I have hereunto set my hand on behalf of the Authority and affixed the corporate seal of said Authority this 17th day of June, 2019.



Mark Noble, Secretary of the Housing
Authority of the City of South Amboy

2019 HOUSING AUTHORITY BUDGET

Narrative and Information Section

**2019 HOUSING AUTHORITY BUDGET MESSAGE &
ANALYSIS
SOUTH AMBOY HOUSING AUTHORITY
(Name)**

AUTHORITY BUDGET

**FISCAL
YEAR:**

FROM:7/1/2019

TO:6/30/2020

Answer all questions below. Attach additional pages and schedules as needed.

1. Complete a brief statement on the 2019/2019-2020 proposed Annual Budget and make comparison to the 2018/2018-2019 adopted budget for each operation. Explain any variances over +/-10% (**As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%**) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). **See attached description of variances.**
2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (**As shown on budget page F-2 explain reason for change for each revenue changing more than 10%**) from the current year adopted budget. **Service charges are principally based on HUD formula resulting in no impact to tenant rents**
3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. **The local economy is stable and not expected to impact the proposed budget.**
4. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. **It is not anticipated that unrestricted net position will be utilized.**
5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). **None, except for PILOT.**
6. The proposed budget must not reflect an anticipated deficit from 2019/2019-2020 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (**Prepare a response to deficits caused by the implementation of GASB 68, 45**). **The prior year accumulated deficit will be reduced based on the anticipated excess of surplus in operations in the proposed budget.**

SOUTH AMBOY HOUSING AUTHORITY

2019 NEW JERSEY BUDGET

PAGE N-1, QUESTION 1

Revenue:

- 1.) Hud proposed operating subsidy based on higher funding proration and utility cost funding.

Appropriations:

- 1.) Administrative salaries and wages are higher based on the hiring of a fulltime Executive Director.
- 2.) Miscellaneous administration costs are expected to be lower with the elimination of the shared services contract with Carteret Housing Authority.
- 3.) Salaries and wages for utility labor are budgeted lower with the reduction in staff.
- 4.) Fringe benefits are budgeted lower due to the reduction in staff.
- 5.) Maintenance costs are budgeted lower based on actual amounts.
- 6.) Insurance costs based on renewal premiums will be higher during the budget year.

HOUSING AUTHORITY CONTACT INFORMATION 2019

Please complete the following information regarding this Housing Authority. All information requested below must be completed.

Name of Authority:	South Amboy Housing Authority		
Federal ID Number:	22-6002641		
Address:	250 S. Broadway		
City, State, Zip:	South Amboy	NJ	08879
Phone: (ext.)	732-721-1831	Fax:	732-721-0377

Preparer's Name:	William Katchen, CPA		
Preparer's Address:	596 Anderson Avenue, Suite 303		
City, State, Zip:	Cliffside Park	NJ	07010
Phone: (ext.)	201-943-4449	Fax:	201-943-5099
E-mail:	bill@katchencpa.com		

Chief Executive Officer:	Mark Noble		
Phone: (ext.)	732-721-1831	Fax:	732-721-0377
E-mail:	mnobel@southamboyha.com		

Chief Financial Officer:	William Katchen, CPA		
Phone: (ext.)	201-943-4449	Fax:	201-943-5099
E-mail:	bill@katchencpa.com		

Name of Auditor:	Anthony Giampaolo, CPA		
Name of Firm:	Hymanson, Parnes and Giampaolo		
Address:	467 Middletown-Lincroft Road		
City, State, Zip:	Lincroft	NJ	07738
Phone: (ext.)	732-842-4550	Fax:	732-842-4551
E-mail:	tony@hpgnj.com		

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

SOUTH AMBOY HOUSING AUTHORITY (Name)

FISCAL
YEAR:

FROM: 7/1/2019

TO: 6/30/2020

Answer all questions below completely and attach additional information as required.

- 1) Provide the number of individuals employed in (Use **Most Recent W-3 Available 2017 or 2018**) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 18
- 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use **Most Recent W-3 Available 2017 or 2018**) Transmittal of Wage and Tax Statements: \$503,541
- 3) Provide the number of regular voting members of the governing body: 7
- 4) Provide the number of alternate voting members of the governing body: 0
- 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? No *If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.*
- 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year (**Most Recent Filing that March 31, 2018 or 2019 deadline has passed 2018 or 2019**) because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at <http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html> before answering) Yes **If "no,"** provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file.
- 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? No *If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority.*
- 8) Was the Authority a party to a business transaction with one of the following parties:
 - a. A current or former commissioner, officer, key employee, or highest compensated employee? No
 - b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? No
 - c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? No*If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process.*
- 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferor. No *If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract.*

- 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. ***Attach a narrative of your Authority's procedures for all employees. Annual Board review.***
- 11) Did the Authority pay for meals or catering during the current fiscal year? No *If "yes," attach a detailed list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed.*
- 12) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? Yes *If "yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed.*
- 13) Did the Authority provide any of the following to or for a person listed on Page N-4 or any other employee of the Authority:
- a. First class or charter travel No
 - b. Travel for companions No
 - c. Tax indemnification and gross-up payments No
 - d. Discretionary spending account No
 - e. Housing allowance or residence for personal use No
 - f. Payments for business use of personal residence No
 - g. Vehicle/auto allowance or vehicle for personal use No
 - h. Health or social club dues or initiation fees No
 - i. Personal services (i.e.: maid, chauffeur, chef) No
- If the answer to any of the above is "yes," attach a description of the transaction including the name and position of the individual and the amount expended.*
- 14) Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred by employees and/or commissioners during the course of Authority business and does that policy require substantiation of expenses through receipts or invoices prior to reimbursement? Yes *If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in answer)*
- 15) Did the Authority make any payments to current or former commissioners or employees for severance or termination? No *If "yes," attach explanation including amount paid.*
- 16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses? No *If "yes," attach explanation including amount paid.*
- 17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by submitting its audited annual financial statements, annual operating data, and notice of material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required? N/A *If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future.*
- 18) Did the Authority receive any notices from the Department of Housing and Urban Development or any other entity regarding maintenance or repairs required to the Authority's facilities to bring them into compliance with current regulations and standards that it has not yet taken action to remediate? No *If "yes," attach explanation as to why the Authority has not yet undertaken the required maintenance or repairs and describe the Authority's plan to address the conditions identified.*
- 19) Did the Authority receive any notices of fines or assessments from the Department of Housing and Urban Development or any other entity due to noncompliance with current regulations? No *If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment.*
- 20) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? No *If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.*

SOUTH AMBOY HOUSING AUTHORITY
 PAGE N-3, QUESTION # 12

INDIVIDUAL	DATE	ORGANIZATION	AMOUNT
Director of Operations	Sep-18	NJAHRA	646.74
3 Commissioners	Sep-18	NJAHRA	1293.48
Executive Director	Nov-18	NJNAHRO	493.2
Director of Operations	Nov-18	NJNAHRO	493.2
3 Commissioners	Nov-18	NJNAHRO	1479.6
Executive Director	Apr-19	NJNAHRO	714
Director of Operations	Apr-19	NJNAHRO	714
3 Commissioners	Apr-19	NJNAHRO	714

**AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES,
HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS
SOUTH AMBOY HOUSING AUTHORITY**

(Name)

**FISCAL
YEAR:**

FROM:7/1/2019

TO:6/30/2020

Complete the attached table for all persons required to be listed per #1-4 below.

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's former officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's former commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.

Commissioner: A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.

Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.

Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:

- a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
- b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.

Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.

Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.

Reportable compensation: The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2019 Most recent available W-2 and 1099 should be used (**2017 or 2018 Forms**)(60 days prior to start of budget year is November 1, 2018, with 2017 being the most recent calendar year ended), and for fiscal years ending June 30, 2019, the calendar year 2018 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2018 being the most recent calendar year ended).

Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

Authority Schedule of Commissioners, Officers, Key Employees, Highest Compensated Employees and Independent Contractors (Continued)

For the Period July 1, 2019 to June 30, 2020

A B C D E F G H I J K L M N O P Q R S T

Reproducible Compensation from Authority (W-2/1099)

Name	Title	Average Hours per Week Dedicated to Position	Position			Base Salary/ Stipend	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)	Estimated amount of other compensation from the Authority (health benefits, pension, etc.)	Total Compensation from Authority	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (1) See note below	Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column O	Reportable Compensation from Other Public Entities (W-2/1099)	Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)	Total Compensation All Public Entities
			Commissioner	Key Employee	Highest Compensated Employee									
1 Sylvester Attardi	Chairperson		X						None				0	0
2 Grace-Hoffman-Spence	Vice Chairperson		X						None				0	0
3 Edward O'Connor	Commissioner		X						None				0	0
4 Paul Gulick	Commissioner		X						None				0	0
5 Saviero Saggiocco	Commissioner		X						None				0	0
6 Joseph Connors	Commissioner		X						None				0	0
7 Mark Noble	Executive Director			X		54,090	5,410	59,500	NIPPRS		89,544		149,044	149,044
8 Larry Stratton	Director of Operations			X		118,480	41,468	159,948	None				159,948	159,948
9									0				0	0
10									0				0	0
11									0				0	0
12									0				0	0
13									0				0	0
14									0				0	0
15									0				0	0
Total:						\$ 172,570	\$ -	\$ 46,878	\$ 219,448		\$ 89,544	\$ -	\$ 308,992	\$ 308,992

(1) Insert "None" in this column for each individual that does not hold a position with another Public Entity

Schedule of Health Benefits - Detailed Cost Analysis

South Amboy Housing Authority
 For the Period July 1, 2019 to June 30, 2020

	# of Covered Members (Medical & Rx)		Annual Cost Estimate per Employee Proposed Budget		Total Cost Estimate Proposed Budget	# of Covered Members (Medical & Rx) Current Year	Annual Cost per Employee Current Year		Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
	Proposed Budget	Employee Proposed Budget	Employee Proposed Budget	Employee Proposed Budget			Current Year	Current Year			
Active Employees - Health Benefits - Annual Cost											
Single Coverage	2	\$ 11,324	\$ 22,648	6	\$ 11,247	\$ 67,482	\$ (44,834)	-66.4%			
Parent & Child	1	20,270	20,270	1	20,133	20,133	137	0.7%			
Employee & Spouse (or Partner)	2	31,594	63,188	1	31,380	31,380	31,808	101.4%			#DIV/0!
Family			(5,855)			(5,750)	(115)	2.0%			
Employee Cost Sharing Contribution (enter as negative -)	5		100,241	8		113,245	(13,004)	-11.5%			
Subtotal											
Commissioners - Health Benefits - Annual Cost											
Single Coverage											#DIV/0!
Parent & Child											#DIV/0!
Employee & Spouse (or Partner)											#DIV/0!
Family											#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)											#DIV/0!
Subtotal	0			0							#DIV/0!
Retirees - Health Benefits - Annual Cost											
Single Coverage	2	4,625	9,250	2	6,539	13,078	(3,828)	-29.3%			#DIV/0!
Parent & Child											#DIV/0!
Employee & Spouse (or Partner)	1	12,408	12,408	1	22,914	22,914	(10,506)	-45.8%			#DIV/0!
Family											#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)	3		21,658	3		35,992	(14,334)	-39.8%			#DIV/0!
Subtotal											
GRAND TOTAL	8		\$ 121,899	11		\$ 149,237	\$ (27,338)	-18.3%			

Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box) Yes No
 Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box) Yes No

Note: Remember to Enter an amount in rows for Employee Cost Sharing

2019 HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

For the Period **South Amboy Housing Authority** to **June 30, 2020**
July 1, 2019

	FY 2019 Proposed Budget				FY 2018 Adopted Budget		\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations		
REVENUES								
Total Operating Revenues	\$ 1,399,422	\$ -	\$ 1,274,800	\$ 152,500	\$ 2,826,722	\$ 2,707,474	\$ 119,248	4.4%
Total Non-Operating Revenues	4,740	-	-	-	4,740	4,740	-	0.0%
Total Anticipated Revenues	1,404,162	-	1,274,800	152,500	2,831,462	2,712,214	119,248	4.4%
APPROPRIATIONS								
Total Administration	310,600	-	107,400	117,250	535,250	502,290	32,960	6.6%
Total Cost of Providing Services	1,074,120	-	1,151,500	35,250	2,260,870	2,249,550	11,320	0.5%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	-	-	-	#DIV/0!
Total Operating Appropriations	1,384,720	-	1,258,900	152,500	2,796,120	2,751,840	44,280	1.6%
Total Interest Payments on Debt	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	-	-	-	#DIV/0!
Total Other Non-Operating Appropriations	-	-	-	-	-	-	-	#DIV/0!
Total Non-Operating Appropriations	-	-	-	-	-	-	-	#DIV/0!
Accumulated Deficit	-	-	-	-	-	-	-	#DIV/0!
Total Appropriations and Accumulated Deficit	1,384,720	-	1,258,900	152,500	2,796,120	2,751,840	44,280	1.6%
Less: Total Unrestricted Net Position Utilized	-	-	-	-	-	39,626	(39,626)	-100.0%
Net Total Appropriations	1,384,720	-	1,258,900	152,500	2,796,120	2,712,214	83,906	3.1%
ANTICIPATED SURPLUS (DEFICIT)	\$ 19,442	\$ -	\$ 15,900	\$ -	\$ 35,342	\$ -	\$ 35,342	#DIV/0!

Revenue Schedule

South Amboy Housing Authority
For the Period July 1, 2019 to June 30, 2020

	FY 2019 Proposed Budget				FY 2018 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations
OPERATING REVENUES							
<i>Rental Fees</i>							
Homebuyers' Monthly Payments					\$ -	\$ -	#DIV/0!
Dwelling Rental	823860				823,860	798,470	25,390 3.2%
Excess Utilities	27670				27,670	25,950	1,720 6.6%
Non-Dwelling Rental					-	-	#DIV/0!
HUD Operating Subsidy	445892				445,892	375,084	70,808 18.9%
New Construction - Acc Section 8					-	-	#DIV/0!
Voucher - Acc Housing Voucher			1259800		1,259,800	1,234,800	25,000 2.0%
Total Rental Fees	1,297,422	-	1,259,800	-	2,557,222	2,434,304	122,918 5.0%
<i>Other Operating Revenues (List)</i>							
Later charges and prorations	102000		15000	152500	269,500	273,170	(3,670) -1.3%
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	#DIV/0!
Total Other Revenue	102,000	-	15,000	152,500	269,500	273,170	(3,670) -1.3%
Total Operating Revenues	1,399,422	-	1,274,800	152,500	2,826,722	2,707,474	119,248 4.4%
NON-OPERATING REVENUES							
<i>Other Non-Operating Revenues (List)</i>							
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Total Other Non-Operating Revenue	-	-	-	-	-	-	#DIV/0!
<i>Interest on Investments & Deposits (List)</i>							
Interest Earned	4,740				4,740	4,740	- 0.0%
Penalties					-	-	#DIV/0!
Other					-	-	#DIV/0!
Total Interest	4,740	-	-	-	4,740	4,740	- 0.0%
Total Non-Operating Revenues	4,740	-	-	-	4,740	4,740	- 0.0%
TOTAL ANTICIPATED REVENUES	\$ 1,404,162	\$ -	\$ 1,274,800	\$ 152,500	\$ 2,831,462	\$ 2,712,214	\$ 119,248 4.4%

Prior Year Adopted Revenue Schedule

South Amboy Housing Authority

FY 2018 Adopted Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING REVENUES					
<i>Rental Fees</i>					
Homebuyers' Monthly Payments					\$ -
Dwelling Rental	798,470				798,470
Excess Utilities	25,950				25,950
Non-Dwelling Rental					-
HUD Operating Subsidy	375,084				375,084
New Construction - Acc Section 8					-
Voucher - Acc Housing Voucher			1,234,800		1,234,800
Total Rental Fees	1,199,504	-	1,234,800	-	2,434,304
<i>Other Revenue (List)</i>					
Later charges and prorations	103,000		15,000		118,000
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Total Other Revenue	103,000	-	15,000	-	118,000
Total Operating Revenues	1,302,504	-	1,249,800	-	2,552,304
NON-OPERATING REVENUES					
<i>Other Non-Operating Revenues (List)</i>					
Type in					-
Type in					-
Type in					-
Type in					-
Type in					-
Type in					-
Total Other Non-Operating Revenues	-	-	-	-	-
<i>Interest on Investments & Deposits</i>					
Interest Earned					-
Penalties					-
Other					-
Total Interest	-	-	-	-	-
Total Non-Operating Revenues	-	-	-	-	-
TOTAL ANTICIPATED REVENUES	\$ 1,302,504	\$ -	\$ 1,249,800	\$ -	\$ 2,552,304

Appropriations Schedule

South Amboy Housing Authority

For the Period July 1, 2019 to June 30, 2020

	FY 2019 Proposed Budget				FY 2018 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted	
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING APPROPRIATIONS								
<i>Administration</i>								
Salary & Wages	151,130		35,160	106,590	\$ 292,880	\$ 223,050	\$ 69,830	31.3%
Fringe Benefits	77,450		17,060	10,660	105,170	100,040	5,130	5.1%
Legal	10,500		7,000		17,500	17,500	-	0.0%
Staff Training	1,320		880		2,200	2,200	-	0.0%
Travel	9,000		6,000		15,000	15,000	-	0.0%
Accounting Fees	16,500		11,000		27,500	27,500	-	0.0%
Auditing Fees	5,500		5,500		11,000	11,000	-	0.0%
Miscellaneous Administration*	39,200		24,800		64,000	106,000	(42,000)	-39.6%
Total Administration	310,600		107,400	117,250	535,250	502,290	32,960	6.6%
<i>Cost of Providing Services</i>								
Salary & Wages - Tenant Services					-	-	-	#DIV/0!
Salary & Wages - Maintenance & Operation	227,620			30,000	257,620	245,360	12,260	5.0%
Salary & Wages - Protective Services					-	-	-	#DIV/0!
Salary & Wages - Utility Labor	29,120				29,120	56,310	(27,190)	-48.3%
Fringe Benefits	159,090			3,000	162,090	182,520	(20,430)	-11.2%
Tenant Services	3,800				3,800	3,800	-	0.0%
Utilities	361,110				361,110	336,390	24,720	7.3%
Maintenance & Operation	155,000				155,000	175,000	(20,000)	-11.4%
Protective Services					-	-	-	#DIV/0!
Insurance	72,250		1,500	2,250	76,000	62,000	14,000	22.6%
Payment in Lieu of Taxes (PILOT)	46,130				46,130	43,170	2,960	6.9%
Terminal Leave Payments					-	-	-	#DIV/0!
Collection Losses	5,000				5,000	5,000	-	0.0%
Other General Expense					-	-	-	#DIV/0!
Rents			1,150,000		1,150,000	1,125,000	25,000	2.2%
Extraordinary Maintenance	15,000				15,000	15,000	-	0.0%
Replacement of Non-Expendible Equipment					-	-	-	#DIV/0!
Property Betterment/Additions					-	-	-	#DIV/0!
Miscellaneous COPS*					-	-	-	#DIV/0!
Total Cost of Providing Services	1,074,120		1,151,500	35,250	2,260,870	2,249,550	11,320	0.5%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	-	#DIV/0!
Total Operating Appropriations	1,384,720		1,258,900	152,500	2,796,120	2,751,840	44,280	1.6%
NON-OPERATING APPROPRIATIONS								
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	-	#DIV/0!
Operations & Maintenance Reserve					-	-	-	#DIV/0!
Renewal & Replacement Reserve					-	-	-	#DIV/0!
Municipality/County Appropriation					-	-	-	#DIV/0!
Other Reserves					-	-	-	#DIV/0!
Total Non-Operating Appropriations					-	-	-	#DIV/0!
TOTAL APPROPRIATIONS	1,384,720		1,258,900	152,500	2,796,120	2,751,840	44,280	1.6%
ACCUMULATED DEFICIT								
TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT	1,384,720		1,258,900	152,500	2,796,120	2,751,840	44,280	1.6%
UNRESTRICTED NET POSITION UTILIZED								
Municipality/County Appropriation					-	-	-	#DIV/0!
Other					-	39,626	(39,626)	-100.0%
Total Unrestricted Net Position Utilized					-	39,626	(39,626)	-100.0%
TOTAL NET APPROPRIATIONS	\$ 1,384,720	\$ -	\$ 1,258,900	\$ 152,500	\$ 2,796,120	\$ 2,712,214	\$ 83,906	3.1%

* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations \$ 69,236.00 \$ - \$ 62,945.00 \$ 7,625.00 \$ 139,806.00

Prior Year Adopted Appropriations Schedule

South Amboy Housing Authority

FY 2018 Adopted Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING APPROPRIATIONS					
<i>Administration</i>					
Salary & Wages	\$ 67,940		\$ 59,730	\$ 95,380	\$ 223,050
Fringe Benefits	60,500		30,000	9,540	100,040
Legal	10,500		7,000		17,500
Staff Training	1,320		880		2,200
Travel	9,000		6,000		15,000
Accounting Fees	16,500		11,000		27,500
Auditing Fees	5,500		5,500		11,000
Miscellaneous Administration*	64,400		41,600		106,000
Total Administration	235,660	-	161,710	104,920	502,290
<i>Cost of Providing Services</i>					
Salary & Wages - Tenant Services					-
Salary & Wages - Maintenance & Operation	199,680			45,680	245,360
Salary & Wages - Protective Services					-
Salary & Wages - Utility Labor	56,310				56,310
Fringe Benefits	177,950			4,570	182,520
Tenant Services	3,800				3,800
Utilities	336,390				336,390
Maintenance & Operation	175,000				175,000
Protective Services					-
Insurance	62,000				62,000
Payment in Lieu of Taxes (PILOT)	43,170				43,170
Terminal Leave Payments					-
Collection Losses	5,000				5,000
Other General Expense					-
Rents			1,125,000		1,125,000
Extraordinary Maintenance	15,000				15,000
Replacement of Non-Expendible Equipment					-
Property Betterment/Additions					-
Miscellaneous COPS*					-
Total Cost of Providing Services	1,074,300	-	1,125,000	50,250	2,249,550
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	-
Total Operating Appropriations	1,309,960	-	1,286,710	155,170	2,751,840
NON-OPERATING APPROPRIATIONS					
Total Interest Payments on Debt	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	-
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve					-
Municipality/County Appropriation					-
Other Reserves					-
Total Non-Operating Appropriations	-	-	-	-	-
TOTAL APPROPRIATIONS	1,309,960	-	1,286,710	155,170	2,751,840
ACCUMULATED DEFICIT					-
TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT	1,309,960	-	1,286,710	155,170	2,751,840
UNRESTRICTED NET POSITION UTILIZED					
Municipality/County Appropriation	-	-	-	-	-
Other	2,716		36,910		39,626
Total Unrestricted Net Position Utilized	2,716	-	36,910	-	39,626
TOTAL NET APPROPRIATIONS	\$ 1,307,244	\$ -	\$ 1,249,800	\$ 155,170	\$ 2,712,214

* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations \$ 65,498.00 \$ - \$ 64,335.50 \$ 7,758.50 \$ 137,592.00

Debt Service Schedule - Principal

South Amboy Housing Authority

If Authority has no debt X this box

X

Type in Issue Name	Fiscal Year Ending in						Total Principal Outstanding
	Proposed Budget Year 2019	2020	2021	2022	2023	2024	
Adopted Budget Year 2018							
TOTAL PRINCIPAL	\$ -						\$ -
LESS: HUD SUBSIDY							
NET PRINCIPAL	\$ -						\$ -

Indicate the Authority's most recent bond rating and the year of the rating by ratings service.

Moody's	Standard & Poors
Fitch	
Year of Last Rating	

If no Rating type in Not Applicable

Debt Service Schedule - Interest

South Amboy Housing Authority

If Authority has no debt X this box

X

	Fiscal Year Ending in						Total Interest Payments Outstanding
	Proposed Budget Year 2019	2020	2021	2022	2023	2024	
Type in Issue Name							
Type in Issue Name							
Type in Issue Name							
Type in Issue Name							
TOTAL INTEREST	\$ -	-	-	-	-	-	-
LESS: HUD SUBSIDY	\$ -	-	-	-	-	-	-
NET INTEREST	\$ -	-	-	-	-	-	-

Net Position Reconciliation

South Amboy Housing Authority July 1, 2019 to June 30, 2020
 For the Period

FY 2019 Proposed Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	\$ 2,236,474	-	\$ (261,402)	-	\$ (1,195,971)
Less: Invested in Capital Assets, Net of Related Debt (1)					2,236,474
Less: Restricted for Debt Service Reserve (1)					-
Less: Other Restricted Net Position (1)			46,176		46,176
Total Unrestricted Net Position (1)	(3,171,043)	-	(307,578)	-	(3,478,621)
Less: Designated for Non-Operating Improvements & Repairs					-
Less: Designated for Rate Stabilization					-
Less: Other Designated by Resolution					-
Plus: Accrued Unfunded Pension Liability (1)	1,095,125		94,417		1,189,542
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)	2,592,896		320,471		2,913,367
Plus: Estimated Income (Loss) on Current Year Operations (2)	(2,716)		(36,910)		(39,626)
Plus: Other Adjustments (attach schedule)					-
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	514,262	-	70,400	-	584,662
Unrestricted Net Position Utilized to Balance Proposed Budget	-	-	-	-	-
Unrestricted Net Position Utilized in Proposed Capital Budget	-	-	-	-	-
Appropriation to Municipality/County (3)	-	-	-	-	-
Total Unrestricted Net Position Utilized in Proposed Budget	-	-	-	-	-
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR					
(4)	\$ 514,262	-	\$ 70,400	-	\$ 584,662

(1) Total of all operations for this line item must agree to audited financial statements.
 (2) Include budgeted and unbudgeted use of unrestricted net position in the current year's operations.
 (3) Amount may not exceed 5% of total operating appropriations. See calculation below.
 Maximum Allowable Appropriation to Municipality/County \$ 69,236 \$ - \$ 62,945 \$ 7,625 \$ 139,806
 (4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section.

2019
SOUTH AMBOY
HOUSING
AUTHORITY
(Name)

HOUSING
AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

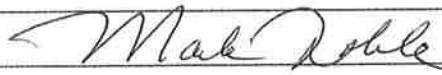
SOUTH AMBOY HOUSING AUTHORITY
(Name)

FISCAL YEAR: FROM: 7/1/2019 TO: 6/30/2020

It is hereby certified that the Housing Authority Capital Budget/Program annexed hereto is a true copy of the Capital Budget/Program approved, pursuant to N.J.A.C. 5:31-2.2, along with the Annual Budget, by the governing body of the South Amboy Housing Authority, on the 17 day of June, 2019.

OR

It is hereby certified that the governing body of the _____ Housing Authority have elected **NOT** to adopt a Capital Budget /Program for the aforesaid fiscal year, pursuant to N.J.A.C. 5:31-2.2 for the following reason(s): _____

Officer's Signature:			
Name:	Mark Noble		
Title:	Executive Director		
Address:	250 S. Broadway, South Amboy, NJ 08879		
Phone Number:	732-721-1831	Fax Number:	732-721-0377
E-mail address	mnobel@southamboyha.com		

2019 CAPITAL BUDGET/PROGRAM MESSAGE

South Amboy Housing Authority

(Name)

FISCAL
YEAR:

FROM:7/1/2019

TO:6/30/2020

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

1. Has the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority?

No.

2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?

No.

3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?

No.

4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives.

No.

5. Describe the impact on the schedule of rents and/or user charges if the proposed capital projects are undertaken. Indicate the impact on current and future year's schedules.

No impact, service charges\rents are based on HUD formula.

6. Have the projects been reviewed and approved by HUD?

Yes,

Add additional sheets if necessary.

Proposed Capital Budget

South Amboy Housing Authority

For the Period July 1, 2019 to June 30, 2020

	Estimated Total Cost	Funding Sources			
		Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants Other Sources
<i>Public Housing Management</i>					
Site Improvements\Dwell Structures	\$ 100,000				\$ 100,000
Equipment	15,000				15,000
A\E Fees	7,500				7,500
Type in Description	-				
Total	122,500	-	-	-	122,500
<i>Section 8</i>					
Type in Description	-				
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	-	-	-	-	-
<i>Housing Voucher</i>					
Type in Description	-				
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	-	-	-	-	-
<i>Other Programs</i>					
Type in Description	-				
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	-	-	-	-	-
TOTAL PROPOSED CAPITAL BUDGET	\$ 122,500	\$ -	\$ -	\$ -	\$ 122,500

Enter brief description of up to four projects for each operation above. For operations with more than four budgeted projects, please attach additional schedules. Input total amount of all projects for the operation on single line and enter "See Attached Schedule" instead of project description.

5 Year Capital Improvement Plan

South Amboy Housing Authority
 For the Period July 1, 2019 to June 30, 2020

Fiscal Year Beginning in

	Estimated Total Cost	Current Budget					
		Year 2019	2020	2021	2022	2023	2024
<i>Public Housing Management</i>							
Site Improvements\Dwell Struct	\$ 600,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000	\$ 100,000
Equipment	90,000	15,000	15,000	15,000	15,000	15,000	15,000
A\E Fees	45,000	7,500	7,500	7,500	7,500	7,500	7,500
Type in Description	-	-	-	-	-	-	-
Total	735,000	122,500	122,500	122,500	122,500	122,500	122,500
<i>Section 8</i>							
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Total	-	-	-	-	-	-	-
<i>Housing Voucher</i>							
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Total	-	-	-	-	-	-	-
<i>Other Programs</i>							
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Type in Description	-	-	-	-	-	-	-
Total	-	-	-	-	-	-	-
TOTAL	\$ 735,000	\$ 122,500	\$ 122,500	\$ 122,500	\$ 122,500	\$ 122,500	\$ 122,500

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

5 Year Capital Improvement Plan Funding Sources

South Amboy Housing Authority

For the Period

July 1, 2019

to

June 30, 2020

Funding Sources

	Estimated Total Cost	Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants	Other Sources
<i>Public Housing Management</i>						
Site Improvements\Dwell Struc	\$ 600,000				\$ 600,000	
Equipment	90,000				90,000	
A\E Fees	45,000				45,000	
Type in Description	-					
Total	735,000	-	-	-	735,000	-
<i>Section 8</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Housing Voucher</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Other Programs</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
TOTAL	\$ 735,000	\$ -	\$ -	\$ -	\$ 735,000	\$ -
Total 5 Year Plan per CB-4	\$ 735,000					
Balance check		- If amount is other than zero, verify that projects listed above match projects listed on CB-4.				

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.