Authority Budget of:

Old Bridge Housing Authority

State Filing Year

2019

APPROVED COPY

For the Period:

January 1, 2019

to

December 31, 2019

www.oldbridgehousing.com

Authority Web Address



Division of Local Government Services

2019 HOUSING AUTHORITY BUDGET

Certification Section

OLD BRIDGE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM JANUARY 1, 2019 TO DECEMBER 31, 2019

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. Curt CPA RMA Date: 11/14/2018

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

D.	
By:	D-4-1
By	Date:

2019 PREPARER'S CERTIFICATION

OLD BRIDGE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM: 1-1-2019

TO:

12-31-2019

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:	Tu dul								
Name:	THOMAS FURLON	THOMAS FURLONG, CPA							
Title:	FEE ACCOUNTAN	FEE ACCOUNTANT							
Address:	470 HIGHWAY 79,	SUITE 2							
i.	MORGANVILLE, N	J 07751							
Phone Number:	umber: 732-591-2300 Fax Number: 732-591-2525								
E-mail address	nail address thomasfurlongcpa@gmail.com								

2019 APPROVAL CERTIFICATION

OLD BRIDGE (Name)

HOUSING AUTHORITY BUDGET

1-1-2019

TO:

12-31-2019

FROM:

FISCAL YEAR:

E-mail address

true cobody of 5:31-2	opy of the Annual Budg of the <u>OLD BRIDGE</u> 2.3, on the <u>16TH</u> date of the da	et and Capital Budget/Pro_Housing Authority, at any ofOCTOBER	ogram approved to open public median open public median by 2018 g in the resoluti	hedules appended hereto, are a by resolution by the governing eting held pursuant to N.J.A.C. on represents not less than a
	Officer's Signature:	and the second	went	
	Name:	ERIC CHUBENKO		
	Title:	EXECUTIVE DIRECTO	OR	
	Address:	2000 ROUTE 18 NORT	TH, SUITE 100	
		OLD BRIDGE, NJ 0885	57	
	Phone Number:	732-607-6383	Fax Number:	732-679-0894

obtha@optonline.net

INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.oldbridgehousing.com	
All authoriti	es shall maintain eith		page on the municipality's or county's Internet
website. Th	e purpose of the web	site or webpage shall be to pro	ovide increased public access to the authority's
operations as	nd activities. N.J.S.A	40A:5A-17.1 requires the foll	owing items to be included on the Authority's
website at a	minimum for public	disclosure. Check the boxes be	low to certify the Authority's compliance with
N.J.S.A. 40A	A:5A-17.1.		
X	A description of the	Authority's mission and respons	sibilities
X	The budgets for the	current fiscal year and immedia	tely preceding two prior years
x	The most recent Cor	aprehensive Annual Financial F	Report (Unaudited) or similar financial
			s Revenue and Expenditures Pie Charts or
	other types of Char	ts, along with other informati	on that would be useful to the public in
	understanding the	finances/budget of the Author	rity)
x	The complete (All D	2000) 200001 14 OX //1 A	N. G
IX.	immediately two pri		dit Synopsis) of the most recent fiscal year and
	minediately two pit	n years	
X	The Authority's rule	s, 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		
x	Notice posted pursue	nt to the "Onen Dublic Meeting	a A 422 for and weather of the A 11 24
		, date, location and agenda of ea	s Act" for each meeting of the Authority,
	seeming for the time	, date, recation and agenda of ea	acii ineeting
X	The approved minus	es of each meeting of the Autho	ority including all resolutions of the board and
		at least three consecutive fiscal	
x	The name mailing a	dragg alactronia mail addragg	and above according to
21	exercises day-to-day	supervision or management over	and phone number of every person who er some or all of the operations of the
	Authority	supervision of management ove	er some or an or the operations of the
X	A list of attorneys, a	lvisors, consultants and any oth	er 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 rend	dered to the Authority.
It is hereby of	certified by the below	authorized representative of	the Authority that the Authority's website or
webpage as i	identified above comp	olies with the minimum statuto	pry requirements of N.J.S.A. 40A:5A-17.1 as
listed above.	A check in each of the	above boxes signifies compliant	nce.
Na £ 0.60	O 4'C 1		
Name of Office	cer Certifying complia	nce	ERIC CHUBENKO
Title of Office	er Certifying complian	ce	EXECUTIVE DIRECTOR \
)0 20mb.mr		
Signature		TF X2 E T 8	Jen Jun Vales

2019 HOUSING AUTHORITY BUDGET RESOLUTION

OLD BRIDGE (Name)

FISCA	L YEAR: F	ROM:	1/1/2019	TO:	12/31/2019	
WHEREAS, the Annual Budget 1/1/2019 and ending, 12/Authority at its open public mee	31/2019 has bee	en presented h	efore the gover	ousing Authoring body of	rity for the fiscal yethe OLD BRIDG	ar beginning, E Housing
WHEREAS, the Annual Budger including any Accumulated De; and	t as introduced refficit if any, of \$ _	lects Total Re 1,825,950	venues of \$ and	1,836,020 nd Total Unre	, Total Apestricted Net Position	opropriations, on utilized of
WHEREAS, the Capital Budget Unrestricted Net Position planne	as introduced refled to be utilized as	ects Total Cap funding there	ital Appropriatiof, of \$0	ons of \$	0 ; and	and Total
WHEREAS, the schedule of re- anticipated revenues to satisfy a outlays, debt service requirement contracts and agreements; and	all obligations to	the holders of	bonds of the A	Authority, to r	neet operating expe	enses, capital
WHEREAS, the Capital Budget funds; rather it is a document authorization to expend funds for resolution, by a project financin or other means provided by law.	to be used as par or the purposes do g agreement, by r	t of the said	Authority's pla section of the	nning and ma	anagement objective be granted elsewh	es. Specific ere: by bond
NOW, THEREFORE BE IT RE public meeting held on10 Budget/Program of theOLD 12/31/2019 is hereby approved.	0/16/2018 th D BRIDGE Ho	at the Annual	Budget, inclu	iding all rela	ted schedules, and	the Capital
BE IT FURTHER RESOLVED meet all proposed expenditures/coutstanding debt obligations, car	expenses and all co	ovenants, term	s and provision	s as stipulated	I in the said Housin	nt amount to g Authority's
BE IT FURTHER RESOLVED Annual Budget and Capital Budget (Secretary's Signature)	, that the governi	ng body of the	12/18/2018	OGE Hous (Date)		consider the
Governing Body Member:	Recorded V Aye	ote Nay	Abstain	Absent		
LANCE HILFMAN RAMON PAULINO BRENDA DUNLOP DUPRE ANDERSON	X X			X		
JUNE DUNGEE CORRINE RODRIGUEZ	$\sqrt{}$			X		

2019 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2019 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS OLD BRIDGE

(Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

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). NONE
- 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. NONE
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. NONE
- 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. N/A
- 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
- 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) N/A

HOUSING AUTHORITY CONTACT INFORMATION 2019

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

Name of Authority:	OLD BRIDGE HOUSING A	UTHORIT	Y					
Federal ID Number:	22-3076229							
Address:	2000 ROUTE 18 NORTH, SI	UITE 100						
City, State, Zip:	OLD BRIDGE		NJ	08857				
Phone: (ext.)	732-607-6383	Fax:	732-6	679-0894				
Preparer's Name:	THOMAS FURLONG							
Preparer's Address:	470 HIGHWAY 79, SUITE 2							
City, State, Zip:	MORGANVILLE		NJ	07751				
Phone: (ext.)	732-591-2300	Fax:	732-5	591-2525				
E-mail:	thomasfurlongcpa@gmail.com							
Chief Executive Officer:	ERIC CHUBENKO							
Phone: (ext.)	732-607-6383	Fax:	732-679	9_0894				
E-mail:	obtha@optonline.net		752 07	7 0071				
Chief Financial Officer:	NONE							
Phone: (ext.)		ıx:	4.6					
E-mail:								
Name of Auditor:								
Name of Firm:	HYMANSON, PARNES &	& GIAMPA	AOLO	-				
Address:	467 MIDDLETOWN-LIN							
City, State, Zip:	LINCROFT		NJ	07738				
Phone: (ext.)	732-842-4550	Fax:	732-842					
E-mail:								

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

OLD BRIDGE

(Name)

	FISCAL YEAR:	FROM:	1/1/2019	TO:	12/31/2019
2) 3) 4) 5)	nswer all questions below completely and Provide the number of individuals empreported on the Authority's Form W-3 Provide the amount of total salaries and Recent W-3 Available 2017 or 2018) Provide the number of regular voting no Provide the number of alternate voting Did any person listed on Page N-4 have on Page N-4 during the current fiscal year cluding the names of the individuals and Did all individuals that were required to year (Most Recent Filing that March of their relationship with the Authority actually filed at http://www.state.nj.u	ployed in (Use, Transmittal d wages as reparametrial of the members of the members of the a family or lear?	e Most Recent W-3 of Wage and Tax S oorted on the Author f Wage and Tax State governing body: the governing body: business relationshi _ If "yes," attach a their positions at the cial Disclosure State 1019 deadline has p as required? (Check ons/dlgs/resources/	Available tatements: prity's Fornatements: 7 0 p with any description and desc	other person listed n of the relationship the current fiscal sor 2019) because f individuals person as
	Statement and an explanation as to the Does the Authority have any amounts remployees or highest compensated emptheir position, the amount receivable, at Was the Authority a party to a business a. A current or former commissioner of a current or former compensated employee? b. A family member of a current or for compensated employee? c. An entity of which a current or former compensated employee (or family in the answer to any of the above is "yes the distribution of the above is "yes the compensated employee".	those individuate reason for the receivable from bloyees?nand a descriptor transaction was, officer, key commer commissioner commissioner commissioner there	ials who failed to fir failure to file. In current or former If "yes," and ion of the amount do ith one of the followers or higher sioner, officer, key enof) was an officer of the followers of the followers.	tle a Finance commission trach a list trach a list true to the Asserting parties of compension employee, or direct or	cial Disclosure coners, officers, key of those individuals, uthority. s: ated employee? or highest r highest indirect owner?
9)	of the commissioner, officer, key empthereof) of the Authority; the name of the amount paid; and whether the translibent contract? A personal benefit contract that benefits, directly or indirectly of the person designated by the transfer arrangement, the premiums paid, and in	ployee, or his the entity and saction was s nt fiscal year p ntract is generately, the trans or.	ghest compensated relationship to the ubject to a competion of premiums, direct rally any life insuration, a member of If "yes," attach a	employee individualitive bid procetly or indince, annuit the transferdescription	(or family member; l or family member; ocess. rectly, on a personal y, or endowment ror's family, or any

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 Authorities procedures for all employees. No Employees 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? 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 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 "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? 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? 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? "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? If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS

OLD BRIDGE

(Name)

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

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 <u>former</u> 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 <u>former</u> 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.

Total:	14				10	ω :	7 Eric Chubenko	6 Corrine Rodriguez	5 June Dungee	4 Dupre Anderson	3 Brenda Dunlap	2 Ramon Paulino	1 Lance Hilfman	Name
							Executive Director	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner	Chairperson	·C Title
							(S)	2 X	2 X	2 X	2 X	2 X	5 X	Average Hours Dedicated to Per Week Average Hours
							× ×	×	×	×	×	×	×	Former Highest Compensated Employee Ney Employee
														Reportable Compensation from Authority (W-2/1099) Other (autiallowance expense expense account, Base payment i Salary/ lieu of haal Stipend Bonus benefits, et
· s														Cher (auto allowance, expense account, payment in lieu of health benefits, etc.)
													32	Estimated amount of other compensation from the Authority (health benefits, pension, etc.)
	00	0 0	0 0			0 0	0.0	0 7	0 7	0 7	0 5	0	S	Total Compensation of from Authority
>							0 Carteret H.A.	0 None	0 None	0 None	0 Kean University	one	Roselle Board of Ed.	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (1) See note below
							Executive Director				Grant Admin		Tea	Positions held at Other Public Other State Other Dublic Other Dublic Other Dublic
ll so							40				3.5		\$ 35	Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column O
														Reportable Compensation from Other Public Entities (W-2) 1099)
, v														Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)
\$. 0	0	.0	0	0.0	5 6	0 0				1	Total Compensation All Public

Schedule of Health Benefits - Detailed Cost Analysis

Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box) Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box) Single Coverage **GRAND TOTAL** Employee Cost Sharing Contribution (enter as negative -) Employee & Spouse (or Partner) Employee & Spouse (or Partner) Single Coverage Employee Cost Sharing Contribution (enter as negative -) Family Parent & Child Retirees - Health Benefits - Annual Cost Subtotal Employee Cost Sharing Contribution (enter as negative -) Parent & Child Family Employee & Spouse (or Partner) Parent & Child Single Coverage Commissioners - Health Benefits - Annual Cost Subtotal Active Employees - Health Benefits - Annual Cost **Proposed Budget** (Medical & Rx) # of Covered Members For the Period 0 0 0 Old Bridge Housing Authority
January 1, 2019 Estimate per Annual Cost Proposed **Employee** Budget ⟨> Proposed Estimate Total Cost Budget Yes or No Yes or No (Medical & Rx) # of Covered Current Year **Members** ರ 0 0 0 per Employee Current Year **Annual Cost** December 31, 2019 Ś Total Prior Year Cost \$ Increase Ś (Decrease) % Increase (Decrease) #DIV/0! #DIV/0!

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

Schedule of Accumulated Liability for Compensated Absences

For the Period Old Bridge Housing Authority

January 1, 2019

to

December 31, 2019

Complete the below table for the Authority's accrued liability for compensated absences.

Total liability for accumulated compensated absences at beginning of current year \$ Individuals Eligible for Benefit **Gross Days of Accumulated** Compensated Absences at beginning of Current Year **Absence Liability** Dollar Value of Compensated Accrued Approved (check applicable items) Legal Basis for Benefit Labor Agreement Resolution Individual Employment Agreement

None

The total Amount Should agree to most recently issued audit report for the Authority

Schedule of Shared Service Agreements

Old Bridge Housing Authority

For the Period

January 1, 2019

December 31, 2019

South Amboy Housing Authority Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services. Name of Entity Providing Service Old Bridge Housing Authority Name of Entity Receiving Service Type of Shared Service Provided Management Services Also provides inspections/ admin. staffing 1/1/2018 Comments (Enter more specifics if needed) Agreement Effective Date Agreement End Date 12/31/2018 ↔ Amount to be Received by/ Authority Paid from 120,000

2019 HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

Old Bridge Housing Authority
For the Period January 1, 2019 to

December 31, 2019

3.6% 6.7% All Operations All Operations 4.0% 4.0% -35.7% 3.6% 2.0% 4.2% 4.0% Proposed vs. % Increase (Decrease) Adopted #DIV/0! #DIV/0i #DIV/0! #DIV/0! #DIV/0i #DIV/0! 64,580 3,980 66,200 70,180 (5,580)20 64,600 70,180 70,180 Proposed vs. (Decrease) \$ Increase Adopted ↶ 198,020 FY 2018 Adopted 1,771,120 300 1,771,420 15,650 1,557,750 1,755,770 1,755,770 1,755,770 Operations Total All Budget S 320 1,835,700 1,836,020 202,000 1,623,950 10,070 1,825,950 1,825,950 1,825,950 Operations Total All S S Other Programs XXXXXXXXXX XXXXXXXXX XXXXXXXXXX XXXXXXXXX FY 2019 Proposed Budget \$ 1,835,700 \$ 202,000 10,070 320 1,623,950 1,825,950 1,836,020 1,825,950 1,825,950 Voucher Housing Ś XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX XXXXXXXXX Section 8 ₩. S Public Housing Management Ś Less: Total Unrestricted Net Position Utilized Total Principal Payments on Debt Service in Total Appropriations and Accumulated Total Other Non-Operating Appropriations Total Non-Operating Appropriations Total Operating Appropriations Total Interest Payments on Debt Total Anticipated Revenues Total Cost of Providing Services Total Non-Operating Revenues Net Total Appropriations ANTICIPATED SURPLUS (DEFICIT) Total Operating Revenues Total Administration Lieu of Depreciation Accumulated Deficit APPROPRIATIONS Deficit REVENUES

Revenue Schedule

Old Bridge Housing Authority For the Period

January 1, 2019

December 31, 2019

		EV 2010	Proposed B	udaot		FY 2018 Adopted	\$ Increase (Decrease) Proposed vs.	% Increase (Decrease) Proposed vs.
	Public Housing	F1 2013	Housing	uugei	Total All	Budget	Adopted	Adopted
	Management	Section 8	Voucher	Other Programs	Operations	Total All Operations	All Operations	All Operations
OPERATING REVENUES				-				· iii operations
Rental Fees								
Homebuyers' Monthly Payments					\$	\$ -	\$ =	#DIV/0!
Dwelling Rental					183			#DIV/0!
Excess Utilities						2	2	#DIV/0!
Non-Dwelling Rental		9			(8)	*		#DIV/0!
HUD Operating Subsidy					796	p 2	÷	#DIV/0!
New Construction - Acc Section 8					85	*		#DIV/0!
Voucher - Acc Housing Voucher			1809000		1,809,000	1,745,020	63,980	3.7%
Total Rental Fees			1,809,000		1,809,000	1,745,020	63,980	3.7%
Other Operating Revenues (List)								
Ports			24500		24,500	24,000	500	2.1%
Frauds			2200		2,200	2,100	100	4.8%
Type in (Grant, Other Rev)					322	=	2	#DIV/0!
Type in (Grant, Other Rev)					===			#DIV/0!
Type in (Grant, Other Rev)					383	₹:	€	#DIV/0!
Type in (Grant, Other Rev)					::::	5	-	#DIV/0!
Type in (Grant, Other Rev)					1901	¥:	2	#DIV/0!
Type in (Grant, Other Rev)						-		#DIV/0!
Type in (Grant, Other Rev)					-	· ·	-	#DIV/0!
Type in (Grant, Other Rev)						, E	5	#DIV/0!
Type in (Grant, Other Rev)					19.1	(€	2	#DIV/0!
Type in (Grant, Other Rev)					127.	1.0	8	#DIV/0!
Type in (Grant, Other Rev)					(2)	(#)	*	#DIV/0!
Type in (Grant, Other Rev)					97	N/E		#DIV/0!
Type in (Grant, Other Rev)					100	5 *1	*	#DIV/0!
Type in (Grant, Other Rev)					1 1	828	¥	#DIV/0!
Type in (Grant, Other Rev)					18	*	5	#DIV/0!
Type in (Grant, Other Rev)					5-	160	20	#DIV/0!
Type in (Grant, Other Rev)					95	125	*	#DIV/0!
Type in (Grant, Other Rev)								#DIV/0!
Total Other Revenue	(4)	-	26,700			26,100	600	2.3%
Total Operating Revenues	(5)		1,835,700		1,835,700	1,771,120	64,580	3.6%
NON-OPERATING REVENUES								
Other Non-Operating Revenues (List)								
Type in					-	•		#DIV/0!
Type in					*	(%)	+5	#DIV/0!
Type in					=	=	•	#DIV/0!
Type in						380	*	#DIV/0!
Type in					*	520	- 2	#DIV/0!
Type in					*.	37		#DIV/0!
Total Other Non-Operating Revenue		(*)	(4)			<u> </u>		#DIV/0!
Interest on Investments & Deposits (List)					1			
Interest Earned			320		320	300	20	6.7%
Penalties						(3)	18:	#DIV/0!
Other							24	#DIV/0!
Total Nan Operation Reviews			320		320	300	20	6.7%
Total Non-Operating Revenues TOTAL ANTICIPATED REVENUES			320		320	300	20	6.7%
TOTAL ANTICIPATED REVENUES	\$ -	\$ -	\$ 1,836,020	5	\$1,836,020	\$ 1,771,420	\$ 64,600	3.6%

Prior Year Adopted Revenue Schedule

Old Bridge Housing Authority

Public Housing Management Section 8 Moucher Other Programs Operations		FY 2018 Adopted Budget							
Persant No. Rev. Fee		577							
Rental Fees	0050 1700 000	Management	Section 8	Voucher	Other Programs	Operations			
Homebuyers' Monthly Payments Dwelling Rental									
Dwelling Rental Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher Total Rental Fees Total Interest Earned Total Interest Ear						i .			
Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher 1,745,020 1,74						\$ =			
Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8						5			
HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher Total Rental Fees 1,745,020 1,7									
New Construction - Acc Section 8 Voucher - Acc Housing Voucher Total Retrail Fees	_					. =			
Total Rental Fees		-				2			
Total Rental Fees									
Other Revenue (List)									
Ports) E.	1,745,020		1,745,020			
Frauds Type in (Grant, Other Rev) Type in (Grant									
Type in (Grant, Other Rev) Type in (Grant, Other									
Type in (Grant, Other Rev) Type in (Grant, Other		1		2,100		2,100			
Type in (Grant, Other Rev) Type in (Grant, Other						2			
Type in (Grant, Other Rev) Type in (Grant, Other	·					9			
Type in (Grant, Other Rev)									
Type in (Grant, Other Rev)			74						
Type in (Grant, Other Rev) Type in (Grant	•					#			
Type in (Grant, Other Rev) Type in (Grant	· · · · · · · · · · · · · · · · · · ·					읙			
Type in (Grant, Other Rev) Type in Type i						=			
Type in (Grant, Other Rev) Total Other Revenue Total Operating Revenues Other Non-Operating Revenues (List) Type in T						ž			
Type in (Grant, Other Rev) Total Other Revenue - 26,100 - 26,100 Total Other Revenues - 1,771,120 - 1,771,120 Type in						5			
Type in (Grant, Other Rev) Total Other Revenue Total Operating Revenues **Total Other Revenue** **Total Operating Revenues** **ONN-OPERATING REVENUES** **Other Non-Operating Revenues** **Interest on Investments & Deposits** Interest Earned Penalties Other **Total Interest Total Interest Total Interest - 300 - 300 Total Non-Operating Revenues - 300 - 300 Tota	· · · · · · · · · · · · · · · · · · ·					*			
Type in (Grant, Other Rev) Total Other Revo Total Other Revenue Total Operating Revenues **Total Other Non-Operating Revenues** Type in						*			
Type in (Grant, Other Rev) Total Other Revenue Total Operating Revenues Total Non-Operating Revenues Type in T						5			
Type in (Grant, Other Rev) Total Other Revenue Total Operating Revenues Total Operating Revenues Total Operating Revenues NON-OPERATING REVENUES Other Non-Operating Revenues (List) Type in						量			
Type in (Grant, Other Rev) - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <						2			
Type in (Grant, Other Rev) Type in (Grant, Other Rev) Total Other Revenue	·								
Type in (Grant, Other Rev)									
Total Other Revenue - 26,100 26,100 Total Operating Revenues - 1,771,120 1,771,120 NON-OPERATING REVENUES - 1,771,120 - 1,771,120 Other Non-Operating Revenues (List) - <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td>						-			
Total Operating Revenues NON-OPERATING REVENUES Other Non-Operating Revenues (List) Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Interest Total Non-Operating Revenues 300 - 300 Total Non-Operating Revenues 300 - 300						72			
NON-OPERATING REVENUES Other Non-Operating Revenues (List) Type in Type in Type in Type in Type in Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Interest Total Non-Operating Revenues - 300 - 300 Total Non-Operating Revenues - 300 - 300		2	3	26,100	-	26,100			
Other Non-Operating Revenues (List) Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues - 300 - 300	Total Operating Revenues			1,771,120		1,771,120			
Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues - 300 - 300 Total Non-Operating Revenues - 300 - 300									
Type in Type in Type in Type in Type in Type in Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues Total Non-Operating Revenues - 300 - 300 - 300	, ,	()							
Type in Type in Type in Type in Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues - 300 - 300 Total Non-Operating Revenues - 300 - 300						100			
Type in Type in Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues - 300 - 300 Total Non-Operating Revenues						·			
Type in Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues Total Non-Operating Revenues Interest Same Same Same Same Same Same Same Same						177			
Type in Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned Penalties Other Total Interest Total Non-Operating Revenues Other Total Non-Operating Revenues Sevenues Other Total Non-Operating Revenues						7.85			
Other Non-Operating Revenues Interest on Investments & Deposits Interest Earned 300 300 Penalties Other Total Interest - 300 300 Total Non-Operating Revenues - 300 300									
Interest on Investments & Deposits 300 300 Interest Earned 300 300 Penalties - - Other - 300 - 300 Total Interest - 300 - 300 Total Non-Operating Revenues - 300 - 300						941			
Interest Earned 300 300 Penalties - - Other - 300 - Total Interest - 300 - 300 Total Non-Operating Revenues - 300 - 300	Other Non-Operating Revenues		¥	-	-	- 2			
Penalties - 300 - 300 Other - 300 - 300 Total Interest - - 300 - 300 Total Non-Operating Revenues - 300 - 300	Interest on Investments & Deposits								
Other - 300 300 Total Interest - - 300 - 300 Total Non-Operating Revenues - 300 - 300	Interest Earned			300		300			
Total Interest - - 300 - 300 Total Non-Operating Revenues - - 300 - 300	Penalties	1				-			
Total Non-Operating Revenues - 300 - 300	Other					-			
	Total Interest			300	<u> </u>	300			
TOTAL ANTICIPATED REVENUES \$ - \$ 1,771,420 \$ - \$1.771,420				300	2	300			
· · · · · · · · · · · · · · · · · · ·	TOTAL ANTICIPATED REVENUES	\$ -	\$ 2	\$ 1,771,420	\$	\$1,771,420			

Appropriations Schedule

Old Bridge Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

				19		FY 20	18 Adopted	\$ Increase (Decrease) Proposed vs.	% Increase (Decrease Proposed v
9		FY	2019 Propose	ed Budget			Budget	Adopted	Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All		otal Ali	All Operations	All 0
PERATING APPROPRIATIONS		Sections	Voucher	Other Programs	Operations		erations	All Operations	An Operatio
dministration									
Salary & Wages					Š -	\$		\$ -	#DIV/0!
Fringe Benefits						Ψ.		W 25	#DIV/0!
Legal			16,200		16,200		16,500	(300)	-1
Staff Training			5,000		5,000		5,150	(150)	∞ -2
Travel			3,000		3,000		3,100	(100)	-3
Accounting Fees			13,400		13,400		13,000	400	3
Auditing Fees			6,000		6,000		5,770	230	4
Miscellaneous Administration*			158,400		158,400		154,500	3,900	2
Total Administration			202,000	-	202,000		198,020	3,980	2
t of Providing Services			202,000		202,000		138,020	3,360	2
Salary & Wages - Tenant Services					701			2	#DIV/0!
Salary & Wages - Maintenance & Operation							-	25	#DIV/0!
Salary & Wages - Protective Services							-	:: =	#DIV/0!
Salary & Wages - Utility Labor					(2)				#DIV/0!
Fringe Benefits								- 3	-
Tenant Services					1 22			* 2	#DIV/0
Utilities					22			- G	
Maintenance & Operation								8	#DIV/0
Protective Services							983		#DIV/0! #DIV/0!
Insurance			8,250		0.250		0.250	-	
Payment in Lieu of Taxes (PILOT)			8,230		8,250		8,250		0
Terminal Leave Payments							3.00		#DIV/0
Collection Losses									#DIV/0
Other General Expense			15 700		15 700		45.500	**	IIDIV/0
Rents			15,700		15,700		15,500	200	1
Extraordinary Maintenance			1,600,000		1,600,000		1,534,000	66,000	4
Replacement of Non-Expendible Equipment					281		2,800	*	#DIV/0!
Property Betterment/Additions							5.20	-	#DIV/0!
Miscellaneous COPS*									#DIV/0!
Total Cost of Providing Services			1 (22 050		4 500 000		300		#DIV/0!
al Principal Payments on Debt Service in Lieu of			1,623,950		1,623,950		1,557,750	66,200	4
	VVVVVVVVVV	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Total Operating Appropriations				XXXXXXXXX					#DIV/0!
N-OPERATING APPROPRIATIONS			1,825,950		1,825,950		1,755,770	70,180	4
	VVAAAAAAAA								
rations & Maintenance Reserve	XXXXXXXXXX >	XXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	54 -		·	2	#DIV/0!
ewal & Replacement Reserve								7.5	#DIV/0!
				1	18		300		#DIV/0!
nicipality/County Appropriation er Reserves							747	2	#DIV/0!
L									#DIV/0!
Total Non-Operating Appropriations					-		140	*	#DIV/0!
AL APPROPRIATIONS			1,825,950		1,825,950		1,755,770	70,180	4.
UMULATED DEFICIT					27			<u> </u>	#DIV/01
AL APPROPRIATIONS & ACCUMULATED									
CIT			1,825,950		1,825,950		1,755,770	70,180	4.
ESTRICTED NET POSITION UTILIZED									
icipality/County Appropriation			- 4		9		27		#DIV/0!
er 🗆					35.			41	#DIV/0!
L.			*				12,	2)	#DIV/0!
Total Unrestricted Net Position Utilized AL NET APPROPRIATIONS									

OLD BRIDGE HOUSING AUTHORITY MISCELLANEOUS ADMINISTRATION

Item	2040	2040
ltem	2018	2019
	Budget	Budget
Publications	500	600
Membership Dues	2,050	2,100
Telephone Costs/Internet	6,200	6,400
Computer Consultant	2,050	2,100
Office Supplies	3,600	3,700
Advertising	1,000	1,100
Postage	3,100	3,200
Equipment Maintenance	1,050	1,100
Payroll Services	0	0
Computer Support	3,100	3,200
Utilities	1,550	1,600
Minutes (Labor)	1,850	1,900
Background Checks	1,250	1,400
Consulting	1,550	1,600
Management Fees	125,650	128,400
Total	154,500	158,400

Prior Year Adopted Appropriations Schedule

Old Bridge Housing Authority

	Public Housing		Y 2018 Adopted Bud	get	Total All
	Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING APPROPRIATIONS		occion o	Tiousing voucher	Other Programs	Орегация
Administration					
Salary & Wages					
Fringe Benefits					\$
Legal			45.500		
Staff Training			16,500		16,50
Travel			5,150		5,15
Accounting Fees			3,100		3,10
Auditing Fees Auditing Fees			13,000		13,00
Miscellaneous Administration*			5,770		5,77
			154,500		154,50
Total Administration			198,020	2 950	198,02
Cost of Providing Services					
Salary & Wages - Tenant Services					
Salary & Wages - Maintenance & Operation					
Salary & Wages - Protective Services					
Salary & Wages - Utility Labor					
Fringe Benefits					
Tenant Services					
Utilities					
Maintenance & Operation		×			
Protective Services					
Insurance			8,250		8,25
Payment in Lieu of Taxes (PILOT)					
Terminal Leave Payments					
Collection Losses					
Other General Expense	1		15,500		15,50
Rents	1		1,534,000		1,534,00
Extraordinary Maintenance	1		, ,		,
Replacement of Non-Expendible Equipment	1				
Property Betterment/Additions					
Miscellaneous COPS*					
Total Cost of Providing Services			1,557,750	-	1,557,75
Total Principal Payments on Debt Service in Lieu					2,001,10
of Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	
Total Operating Appropriations	-	*		700000000000000	1,755,77
NON-OPERATING APPROPRIATIONS			2// 00// / 0		1,733,77
Total Interest Payments on Debt	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	**************	
Operations & Maintenance Reserve		700000000000000000000000000000000000000	700000000000	700000000000000000000000000000000000000	
Renewal & Replacement Reserve					
Municipality/County Appropriation					
Other Reserves					
Total Non-Operating Appropriations					
TOTAL APPROPRIATIONS			1,755,770	<u>R</u>	1,755,77
ACCUMULATED DEFICIT			1,735,770		1,755,77
OTAL APPROPRIATIONS & ACCUMULATED DEFICIT			. ===		
			1,755,770		1,755,77
JNRESTRICTED NET POSITION UTILIZED					
Municipality/County Appropriation	-				
Other Tatal Hannah in A Mar B. 111 - 1111					
Total Unrestricted Net Position Utilized	= =			×	
TOTAL NET APPROPRIATIONS	\$ -	\$ -	\$ 1,755,770	\$	\$ 1,755,770

^{*} 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 87,788.50 \$ 87,788.50

Debt Service Schedule - Principal

		Total Principal Outstanding	\$	Ñ	E 3	•	\$				
		Thereafter									
		2024									
		2023									
	ı in	2022				*					
uthority	Fiscal Year Ending in	2021					\$				
Old Bridge Housing Authority	1	2020				•8	\$	vice.	Standard & Poors	9	
	Dronocod	Budget Year 2019						he rating by ratings ser	Fitch	If no Rating type in Not Applicable	וופ נאלב ווו ומסר שלאווכם
×		Adopted Budget Year 2018				((4))	v.	d rating and the year of t	Moody's	If no Rat	
If Authority has no debt X this box			Type in Issue Name Type in Issue Name	Type in Issue Name	Type in Issue Name	TOTAL PRINCIPAL LESS: HUD SUBSIDY	NET PRINCIPAL	Indicate the Authority's most recent bond rating and the year of the rating by ratings service.	Bond Rating Year of Last Rating	0	

Debt Service Schedule - Interest

		Total Interest Payments Outstanding	1	î	Ü		8	**	٠
		To Thereafter	1				62		\$
		2024					5(60)		\$ -
		2023					ī		\$ -
		2022							\$
Old Bridge Housing Authority Fiscal Year Ending in	2021					r		\$	
						٠		\$ -	
	2020						1	s	
		Proposed Budget Year 2019						4	A
×		Adopted Budget Year 2018					MUS		^
If Authority has no debt X this box			Type in Issue Name Type in Issue Name	Type in Issue Name	Type in Issue Name	TOTALINTEREST	LESS: HUD SUBSIDY	NICT INTEREST	INC. INC. ENESS.

Net Position Reconciliation

Old Bridge Housing Authority

For the Period January 1, 2019

Jailualy 1, 2019

to December 31, 2019

FY 2019 Proposed Budget

Housing Voucher

Public Housing Management

Section 8

Operations

Other Programs

Total All

857,266

856,555

711

101,950

101,950

15,650

15,650

1,061,385

\$2,020,601

1,917,940

\$ 102,661

TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)

Less: Invested in Capital Assets, Net of Related Debt (1)

Less: Restricted for Debt Service Reserve (1)

Less: Other Restricted Net Position (1)

Total Unrestricted Net Position (1)

Less: Designated for Non-Operating Improvements & Repairs

Less: Designated for Rate Stabilization

Less: Other Designated by Resolution

Plus: Accrued Unfunded Pension Liability (1)

Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)

Plus: Estimated Income (Loss) on Current Year Operations (2)

Plus: Other Adjustments (attach schedule)

UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET

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)

				٠
19	9.00	117,600	Ø.	117,600
×		9	1	(*)
Ē	×	3.	Ñ	(<u>)</u>
ij	1		(i)	1
91	(90)	Δ)	E	¥
\$ '	1	\$ 117,600 \$	\$ -	\$ 117,600

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

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.

91,298

\$ 91,298

2019 OLD BRIDGE

(Name)

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

OLD BRIDGE

(Name)

FISCAL	YEAR:	FROM:	1/1/2019	TO:	12/31/2019
It is hereby ce a true copy of the Capital nnual Budget, by the gover day of	Budget/P ning body	rogram appro	ved, pursuant to Ho	NIA	get/Program annexed hereton C. 5:31-2.2, along with the authority, on the
			OR		
X] It is hereby outhority have elected <u>NOT</u> N.J.A.C. 5:31-2.2 for the	to adopt	a Capital Bud	get /Program fo	r the afo	resaid fiscal year nursuant
-			n . 0		
Officer's Signature:	90	Chul	reuso		
Name:	ERIC (CHUBENKO	90		
Title:	EXECU	JTIVE DIRE	CTOR		
Address:	2000 R	OUTE 18 NO	ORTH, SUITE 1	00	
		RIDGE, NJ 0	·		
Phone Number:	732-60		Fax Number	er: 73	32-679-0894
E-mail address	obtha@	optonline.net			

2019 CAPITAL BUDGET/PROGRAM MESSAGE

OLD BRIDGE Housing Authority

(Name)

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

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?
- 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?
- 3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?
- 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.
- 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.
- 6. Have the projects been reviewed and approved by HUD?

Add additional sheets if necessary.

Proposed Capital Budget

Old Bridge Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

			Fu	nding Sources		
			Renewal &			
	Estimated Total	Unrestricted Net	Replacement	Debt		Other
	Cost	Position Utilized	Reserve	Authorization	Capital Grants	Sources
Public Housing Management						
Type in Description	\$					
Type in Description						
Type in Description	*					- 1
Type in Description						
Total		-				
Section 8						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	2					
Total					2	76
Housing Voucher						
Type in Description						
Type in Description	(a)					
Type in Description	0.2					
Type in Description						
Total		-	*		(F)	65
Other Programs						
Type in Description	343					
Type in Description						
Type in Description						1
Type in Description		Y .				1
Total		2	12:			
TOTAL PROPOSED CAPITAL BUDGET	\$ -	\$ -	\$ -	\$ -	\$ - \$	3

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

Old Bridge Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

Fiscal Year Beginning in

	Estimate Cos		Current Budget Year 2019	2020	2021	2022	2023	2024
Public Housing Management	-							2024
Type in Description	\$	1.51	\$					
Type in Description				8				
Type in Description		::::	æ					
Type in Description		160		1				
Total		-						
Section 8)—————————————————————————————————————			S				
Type in Description		-						
Type in Description			-					
Type in Description		÷**	-					
Type in Description		-	-	9				
Total		= 5						
Housing Voucher								
Type in Description		=27						
Type in Description		94						
Type in Description		17.1						
Type in Description		-	-					
Total	0	-	-					
Other Programs								
Type in Description =		2	¥				***************************************	
Type in Description		2						
Type in Description		-	_					1
Type in Description								
Total			-	(4)				
TOTAL	\$		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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

Old Bridge Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

			Funding Sources							
				Renewal &						
	Estimate		Unrestricted Net	Replacement	Debt					
	Co	st	Position Utilized	Reserve	Authorization	Capital Grants	Other Sources			
Public Housing Management		1 - 1:	W							
Type in Description	\$	(#0)								
Type in Description		(a)								
Type in Description										
Type in Description		*								
Total		-	7	-	7.0	95	-			
Section 8	-									
Type in Description		(4.)			7					
Type in Description		-								
Type in Description										
Type in Description	_	(A)								
Total		Ψ.				. (F)				
Housing Voucher										
Type in Description	8	2								
Type in Description										
Type in Description		>								
Type in Description		=								
Total		-	-	-	-	/8.				
Other Programs										
Type in Description		Ш								
Type in Description		er e								
Type in Description		~								
Type in Description		Ē.,								
Total		*	165	(=	#		-			
TOTAL	\$	_	\$	\$ =	\$ =	\$	\$ =			
Total 5 Year Plan per CB-4	\$		H eren				*			
Balance check		- If	amount is other than ze.	ro, verify that proi	ects listed above	match projects lis	ted 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.