Authority Budget of:

LOGAL COVESTIONICES

Old Bridge Housing Authority 1:06

State Filing Year

2020

For the Period:

January 1, 2020

to

December 31, 2020

 $\underline{www.oldbridgehousing.com}$

APPROVED COPY

Authority Web Address



Division of Local Government Services

2020 (2020-2021) HOUSING AUTHORITY BUDGET

Certification Section

2020 (2020-2021)

0	OLD BRIDGE	
	(Name)	

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM JANUARY 1, 2020 TO DECEMBER 31, 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 <u>N.J.S.A.</u> 40A:5A-11.

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

By: | aul D. (west CPA RMA Date: 11/15/2019

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: Taul D. Coret CPA, RAD Date: 1116/2020

2020 (2020-2021) PREPARER'S CERTIFICATION

OLD BRIDGE (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

1-1-2020

TO:

12-31-2020

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:	Jim tul		
Name:	THOMAS FURLONG,	CPA	
Title:	FEE ACCOUNTANT		
Address:	470 HIGHWAY 79, SU	TTE 2	
	MORGANVILLE, NJ 0	7751	
Phone Number:	732-591-2300	Fax Number:	732-591-2525
E-mail address	thomasfurlongcpa@gma	ail.com	

2020 (2020-2021) APPROVAL CERTIFICATION

OLD OLD	BRIDGE
-	(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 1-1-2020 TO: 12-31-2020

It is hereby certified that the H	lousing Au	thority Budget, i	ncluding all schedules ap	pended hereto, are a
true copy of the Annual Budge	et and Cap	ital Budget/Prog	ram approved by resolut	ion by the governing
body of the <u>OLD BRIDGE</u>				
5:31-2.3, on the15 TH		OCTOBER		•

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:	Mark his	ble	
Name:	MARK NOBLE		1
Title:	EXECUTIVE DIRECT	OR	
Address:	2000 ROUTE 18 NORT	ΓH, SUITE 100	
	OLD BRIDGE, NJ 088	57	
Phone Number:	732-607-6383	Fax Number:	732-679-0894
E-mail address	obtha@optonline.net		

INTERNET WEBSITE CERTIFICATION

Authority'	s Web Address:	www.oldbridgehousing.com	
		· · · · · · · · · · · · · · · · · · ·	page on the municipality's or county's Internet
website. The	e purpose of the webs	site or webpage shall be to pro	vide increased public access to the authority's
			owing items to be included on the Authority's
N.J.S.A. 40A	-	isclosure. Check the boxes bel	ow to certify the Authority's compliance with
	,		
X	A description of the	Authority's mission and respons	ibilities
x	The budgets for the	current fiscal year and immediat	ely preceding two prior years
x	information (Similar other types of Char	r information are items such a	eport (Unaudited) or similar financial s Revenue and Expenditures Pie Charts or on that would be useful to the public in ity)
\boxtimes	The complete (All Primmediately two primmediatel		lit Synopsis) of the most recent fiscal year and
х			statements deemed relevant by the governing within the authority's service area or
X		ant to the "Open Public Meetings, date, location and agenda of ea	s Act" for each meeting of the Authority, ach meeting
X		es of each meeting of the Autho at least three consecutive fiscal	rity including all resolutions of the board and years
X	-		nd phone number of every person who er some or all of the operations of the
×	corporation or other		er person, firm, business, partnership, remuneration of \$17,500 or more during the dered to the Authority.
as identified a		e minimum statutory requiremen	athority that the Authority's website or webpage ints of N.J.S.A. 40A:5A-17.1 as listed above. A
Name of Offi	cer Certifying complia	nce	MARK NOBLE
Title of Office	er Certifying complian	ce	EXECUTIVE DIRECTOR Mark Irble
Signature			Mak hobbe

2020 (2020-2021) HOUSING AUTHORITY BUDGET RESOLUTION

OLD BRIDGE

(Name)

FISCA	L ILAK: F	KUM:	1-1-2020	10:	12-31-2	020	
WHEREAS, the Annual Budget beginning, <u>1-1-2020</u> and endi <u>OLD BRIDGE</u> Housing Aut	ng, <u>12-31-2020</u> l	as been pre	sented before th	e governing boo	dy of the	the fiscal y	⁄eai
WHEREAS, the Annual Budget including any Accumulated Def of; and	as introduced refle cit if any, of \$	cts Total Re 1,922,800	venues of \$ an	1,936,000 d Total Unrestr	, To	tal Appropriatio	ns,
WHEREAS, the Capital Budget Unrestricted Net Position planne	as introduced reflect to be utilized as t	ects Total C funding ther	apital Appropria	ations of \$		and To	otal
WHEREAS, the schedule of reanticipated revenues to satisfy a outlays, debt service requirement contracts and agreements; and	all obligations to the	e holders o	f bonds of the	Authority, to m	neet operating	g expenses, cap	ital
WHEREAS, the Capital Budget funds; rather it is a document authorization to expend funds for resolution, by a project financing other means provided by law.	to be used as part or the purposes des	of the said cribed in th	Authority's plais section of the	anning and mare budget, must	nagement ob be granted e	jectives. Speci lsewhere; by bo	ific ond
NOW, THEREFORE BE IT RE on10-15-2019t	hat the Annual Bud	get, includii	ng all related scl	nedules, and the	Capital Bud	get/Program of	the
BE IT FURTHER RESOLVED, meet all proposed expenditures/e outstanding debt obligations, cap	expenses and all co	venants, terr	ns and provision	ns as stipulated	in the said H	ousing Authorit	t to ty's
BE IT FURTHER RESOLVED, Budget and Capital Budget/Prog	ram for adoption or	oody of the _ 112-17-20	OLD BRIDGE			onsider the Ann	ual
(Secretary's Signature)				(Date)	7		
Governing Body Member:	Recorded Vote Aye	Nay	Abstain	Absent			
LANCE HILFMAN	×						
RAMON PAULINO	×						
BRENDA DUNLOP				*			
DUPRE ANDERSON	*						
JUNE DUNGEE				*			
CORRINE RODRIGUEZ	×						

2020 (2020-2021) ADOPTION CERTIFICATION

OLD BRIDGE	
(Name)	

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 1-1-2020 TO: 12-31-2020

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the <u>OLD BRIDGE</u> Housing Authority, pursuant to <u>N.J.A.C. 5:31-2.3</u>, on the <u>17TH</u> day of, <u>DECEMBER</u>, <u>2019</u>.

Officer's Signature:	Mal	Loble	
Name:	MARK NOBLE		
Title:	EXECUTIVE DIRI	ECTOR	
Address:	2000 ROUTE 18 N OLD BRIDGE, NJ		
Phone Number:	732-607-6383	Fax Number:	732-679-0894
E-mail address	obtha@optonline.ne	et	

2020 (2020-2021) ADOPTED BUDGET RESOLUTION

OLD BRIDGE

(Name)

1-1-2020

12-31-2020

TO:

HOUSING AUTHORITY

FROM:

FISCAL YEAR:

WHEREAS, the Annual Budge beginning 1-1-2020 and OLD BRIDGE Housing	ending. 12-31-2020 b	as been presen	DBRIDGE Housing Authority for the fiscal year ted for adoption before the governing body of the 12-17-2019; and
WHEREAS, the Annual Budge in the same amount and title a which have been approved by t	s set forth in the introduced	and approved	tion reflects each item of revenue and appropriation budget, including all amendments thereto, if any nament Services; and
WHEREAS, the Annual Budg Appropriations, including any a utilized of \$0	Accumulated Deficit, if any,	reflects Total of \$1,922,	Revenues of \$, Total 800 and Total Unrestricted Net Position
WHEREAS, the Capital Budge Total Unrestricted Net Position	et as presented for adoption replanned to be utilized of \$_	reflects Total C	apital Appropriations of \$0 and; and
	that the Annual B Authority for the fiscal year	udget and Capi beginning,l	D BRIDGE Housing Authority, at an open publital Budget/Program of the 1-1-2020 and, ending, 12-31-2020 is hereb
item of revenue and appropriati	on in the same amount and to	tle as set forth	get/Program as presented for adoption reflects eac in the introduced and approved budget, including a the Division of Local Government Services.
(Secretary's Signature)	Voble		12/17/2019 (Date)
Governing Body Member:	Recorded Vote Aye Nay	Abstain	Absent
LANCE HILFMAN RAMON PAULINO BRENDA DUNLOP DUPRE ANDERSON JUNE DUNGEE	X X X X		

2020 (2020-2021) HOUSING AUTHORITY BUDGET

Narrative and Information Section

2020(2020-2021) HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS OLD BRIDGE

(Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:

1-1-2020

TO:

12-31-2020

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

- 1. Complete a brief statement on the 2020/2020-2021 proposed Annual Budget and make comparison to the 2019/2019-2020 adopted budget for each *Revenues and Appropriations*. Explain any variances over +/-10% (As shown on budget pages F-2 and F-4 explain the reason for changes for each <u>revenue</u> and <u>appropriation</u> changing more than 10%) for each individual revenue and appropriation line item. 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. (Example Rate Increase authorized by resolution or by HUD). SEE ATTACHED
- 2. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. Example would be effect on a recession in the economy on the housing Authority NONE
- **3.** 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. NONE
- 4. Identify any sources of funds transferred to the County/Municipality as a Pilot Payments, or a shared service and explain the reason for the transfer -- Housing Authorities cannot transfer Unrestricted Net Position (i.e.: to balance the County/Municipality budget, etc.). N/A
- 5. The proposed budget must not reflect an anticipated deficit from 2020/2020-2021 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. NONE

(Prepare a response to deficits in most recent audit report pertaining to Deficits to Unrestricted Net Position caused by recording <u>Pension and Post-Employment Benefits liabilities as required by GASB 68 and GASB 75</u>).

PHA has no employees so there is no liability.

OLD BRIDGE HOUSING AUTHORITY BUDGET VARIANCES IN EXCESS OF 10% DECEMBER 31ST, 2020

Operating Devenues:	O	pera	ting	Revenue	es:
---------------------	---	------	------	---------	-----

Portable Revenue-(-34.7%) PHA absorbed several Port in units reducing the revenue earned.

Interest-(+837%) –Increase in reserve balance allowed for additional interest earnings.

Operating Appropriations:

NONE

HOUSING AUTHORITY CONTACT INFORMATION AUTHORITY CONTACT INFORMATION 2020 (2020-2021)

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

Name of Authority:	OLD BRIDGE HOUSING AU	JTHORIT	Y	
Federal ID Number:	22-3076229			
Address:	2000 ROUTE 18 NORTH, SU	JITE 100		
City, State, Zip:	OLD BRIDGE		NJ	08857
Phone: (ext.)	732-607-6383	Fax:	732-6	79-0894
Preparer's Name:	THOMAS FURLONG, CPA			
Preparer's Address:	470 HIGHWAY 79, SUITE 2		· · · · · · · · ·	
City, State, Zip:	MORGANVILLE		NJ	07751
Phone: (ext.)	732-591-2300	Fax:	732-5	91-2525
E-mail:	thomasfurlongcpa@gmail.com	n		
~				
Chief Executive Officer:(1) MARK NOBLE			
Chief Executive Officer:(Phone: (ext.)	1) MARK NOBLE 732-607-6383	Fax:	732-679	-0894
		Fax:	732-679	-0894
Phone: (ext.)	732-607-6383 obtha@optonline.net	Fax:	732-679	-0894
Phone: (ext.) E-mail:	732-607-6383 obtha@optonline.net		732-679	-0894
Phone: (ext.) E-mail: Chief Financial Officer(1	732-607-6383 obtha@optonline.net NONE		732-679	-0894
Phone: (ext.) E-mail: Chief Financial Officer(1) Phone: (ext.)	732-607-6383 obtha@optonline.net NONE		732-679	-0894
Phone: (ext.) E-mail: Chief Financial Officer(1) Phone: (ext.) E-mail:	732-607-6383 obtha@optonline.net NONE	x:		-0894
Phone: (ext.) E-mail: Chief Financial Officer(1) Phone: (ext.) E-mail: Name of Auditor:	732-607-6383	x:	OLO	-0894
Phone: (ext.) E-mail: Chief Financial Officer(1) Phone: (ext.) E-mail: Name of Auditor: Name of Firm:	732-607-6383 obtha@optonline.net NONE Far HYMANSON,PARNES &	x:	OLO	07738
Phone: (ext.) E-mail: Chief Financial Officer(1) Phone: (ext.) E-mail: Name of Auditor: Name of Firm: Address:	732-607-6383 obtha@optonline.net NONE Fax HYMANSON,PARNES & 467 MIDDLETOWN-LING	x:	OLO OAD	07738

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

OLD BRIDGE

	(Name)	
	FISCAL YEAR: FROM: 1-1-2020 TO: 12-31-2020	
	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 2018 or 2019) a reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements:0	as
2)	Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Mo	of
2)	Recent W-3 Available 2018 or 2019) Transmittal of Wage and Tax Statements: 0	St
3)	Provide the number of regular voting members of the governing body: (Even if not a	II
	commissioners have been appointed (Total Commissioners are either 5 or 7 as per statute for y	
	Authority)	,
4)) Provide the number of alternate voting members of the governing body: (Maximum is	2)
5)) Did any person listed on Page N-4 have a family or business relationship with any other person list	
	on Page N-4 during the current fiscal year? <u>no</u> If "yes," attach a description of the relations	ship
-	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	
	(Most Recent Filing that March 31, 2019 or 2020 deadline has passed 2019 or 2020) because of	
	relationship with the Authority file the form as required? (Checked to see if individuals actually file	
	6/ =	If
	"no," provide a list of those individuals who failed to file a Financial Disclosure Statement and ar	1
7)	explanation as to the reason for their failure to file.	1
7)	Does the Authority have any amounts receivable from current or former commissioners, officers, 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.	uais,
8)		
٠,	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 compensations.	sated
	employee?no	
	c. An entity of which a current or former commissioner, officer, key employee, or highest compens	sated
	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 n	
	of the commissioner, officer, key employee, or highest compensated employee (or family men	
	thereof) of the Authority; the name of the entity and relationship to the individual or family mem the amount paid; and whether the transaction was subject to a competitive bid process.	oer,
9)		onal
7)	benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowmen	
	contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or	
	other person designated by the transferor If "yes," attach a description of the arrangem	
	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 Authorities procedures for all individuals listed on Page N-4 (2 of 2). No Employees.

Page N-3 (1 of 2)

11)	Did the Authority pay for meals or catering during the current fiscal year? <u>no</u> <i>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.</i>
12)	Did the Authority pay for travel expenses for any employee or individual listed on Page N-4?
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 travelno b. Travel for companionsno c. Tax indemnification and gross-up paymentsno d. Discretionary spending accountno
	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 <u>and</u> does that policy require substantiation of expenses through receipts or invoices prior to reimbursement? <u>yes</u> 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)
	Did the Authority make any payments to current or former commissioners or employees for severance or termination? If "yes," attach explanation including amount paid.
	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?
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. (If no bonded Debt answer is Not Applicable)
	Did the Authority receive any notices from the Department of Environmental Protection or any other entity regarding maintenance or repairs required to the Authority's systems to bring them into compliance with current regulations and standards that it has not yet taken action to remediate?
19)	Did the Authority receive any notices of fines or assessments from the Department of Environmental Protection or any other entity due to noncompliance with current regulations (i.e.: sewer overflow, etc.)? 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.
	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.
21)	Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? <u>no</u> 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: F

FROM:

1-1-2020

TO:

12-31-2020

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

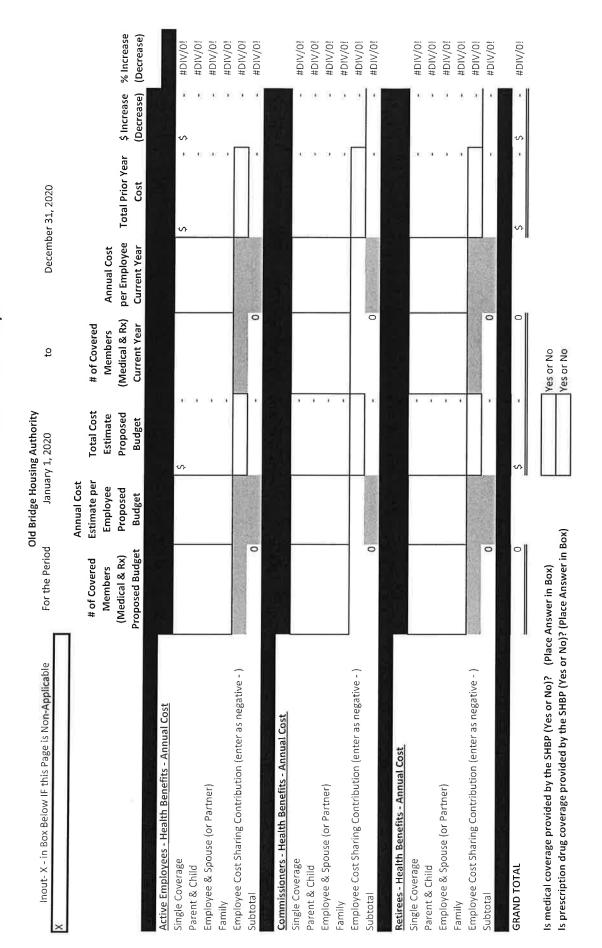
- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <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 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: (<u>Use the Most Recent W-2 available 2018 or 2019</u>. 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, 2020, the <u>most recent W-2</u> and 1099 should be used 2019 or 2018 (60 days prior to start of budget year is November 1, 2019, with 2018 being the most recent calendar year ended), and for fiscal years ending June 30, 2020, the calendar year 2019 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2019 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)

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		1								Total	Con		Entities	v															S		
		S				Estimated amount	of other	compensation from	Other Public Entities	(health benefits,	pension, payment in	lieu of health	benefits, etc.)																S		
		60							Reportable	Compensation	from Other																		S		
		Ö				Average	Hours per	Week	Dedicated to	Positions at	Other Public	Entities Listed	in Column O	\$ 35	100	EL PL				40											
		d						a)		Positions held	at Other Public	l) Entities Listed in	Column O	Teacher		Grant Admin				Executive Director											
		0				140	Names or Other	Public Entities where	Individual is an	Employee or	Member of the	8	See note below	Roselle Board of Ed.	0 None	0 Kean University	0 None	0 None	0 None	0 South Amboy H.A.									*	 -	
		Z									Total	Compensation	from Authority	s	0	0	0	0	0	0	0	0	0	0	0				\$		
		Σ				Lotte artist	cerminated	amount of other	compensation	from the	Authority	(health benefits,	pension, etc.)																		
		TOTAL PROPERTY.	nsation from	2/ 1099)		Other (211to			expense	account,	payment in	lieu of health	benefits, etc.)																,		
Old Bridge Housing Authority	December 31, 2020	X	Reportable Compensation from	Authority (W-2/ 1099)							Base	Salary/	Stipend Bonus																· · · ·		
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old Bric	-	Ξ		e e		ŀ	ligl	nes	t C			nsa plo																			
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	- 1	u							Cc	mı		sio		×	×	×	×	×	×	×											
	For the Period January 1, 2020	O		37						Average Hours	per Week	Dedicated to	Position	X S	2 X	2 X	2 X	2 X	2 X	2											
	For the Period	0											Title	Chairperson	Vice Chair	Commissioner	Commissioner	Commissioner	Commissioner	Executive Director											
		B											Name	1 Lance Hilfman	2 Ramon Paulino	3 Brenda Dunlap	4 Dupre Anderson	5 June Dungee	6 Corrine Rodriguez	7 Mark Noble	∞	6	10	11	12	13	14	15	Total:		

(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



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

Schedule of Accumulated Liability for Compensated Absences

Old Bridge Housing Authority

For the Period

January 1, 2020

ţ,

December 31, 2020

Legal Basis for Benefit

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

Agreement (check applicable items) Employment leubivibal Resolution Agreement rapor Approved Absence Liability Dollar Value of Compensated Accrued Total liability for accumulated compensated absences at beginning of current year \$ **Gross Days of Accumulated Compensated Absences at** beginning of Current Year Individuals Eligible for Benefit None

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

Schedule of Shared Service Agreements

128,000 Amount to be Received by/ Paid from Authority 12/31/2020 \$ Agreement **End Date** Agreement 1/1/2020 Effective Date December 31, 2020 Comments (Enter more specifics if Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services. needed) Name of Entity Receiving Service Type of Shared Service Provided Old Bridge Housing Authority Management Services January 1, 2020 Old Bridge Housing Authority For the Period Name of Entity Providing Service If No Shared Services X this Box South Amboy Housing Authority

2020 (2021) HOUSING AUTHORITY BUDGET

Financial Schedules Section

Old Bridge Housing Authority January 1, 2020 to For the Period

December 31, 2020

		FY 2	FY 2020 Proposed Budget	l Budget			FY 2019 Ado Budget	FY 2019 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted		% Increase (Decrease) Proposed vs. Adopted
SAL INJURA	Public Housing Management	Section 8	Housing Voucher	Other Programs		Total All Operations	Tota	Total All Operations	All Ope	rations A	All Operations All Operations
KEVENDES Total Operating Revenues	·	v	4 1 933 000	v	·	000		7.00		0	i
		.) -			T,333,000	-1 ^-	1,033,70U	ሱ	97,300	%s.
Total Non-Operating Revenues	•03		3,000		ě	3,000		320		2,680	837.5%
Total Anticipated Revenues	(1)	(46)	1,936,000		*	1,936,000	1	1,836,020		086'66	5.4%
APPROPRIATIONS											
Total Administration			199,600		<u>(</u>	199,600		202,000		(2,400)	-1.2%
Total Cost of Providing Services	,		1,723,200		ý.	1,723,200	T	1,623,950		99,250	6.1%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX	XXXXXXXXXX				·		*	#DIV/0!
Total Operating Appropriations	((•)*	340	1,922,800		i ()	1,922,800	F	1,825,950		96,850	5.3%
Total Interest Payments on Debt Total Other Non-Operating Appropriations	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	ē	7902 - 291		E IS		i) i	#DIV/0!
Total Non-Operating Appropriations	•)	•			ā					•	#DIV/0i
Accumulated Deficit			8			3.		1		3	#DIV/0!
Total Appropriations and Accumulated Deficit	V#IC	3.43	1,922,800		<u> </u>	1,922,800	Ħ	1,825,950		96,850	5.3%
Less: Total Unrestricted Net Position Utilized		3.60	(*)		ĕ	V 3		Î			#DIV/0!
Net Total Appropriations			1,922,800			1,922,800	ed	1,825,950		96,850	5.3%
ANTICIPATED SURPLUS (DEFICIT)	v.	₩.	\$ 13,200	₩	٠,	13,200	φ.	10,070	₩.	3,130	31.1%

Revenue Schedule

Old Bridge Housing Authority

For the Period

January 1, 2020

to

December 31, 2020

\$ Increase

% Increase

Part
Public Housing Management
Public Housing Housing Management Section 8 Voucher Other Programs Total All Operations All Operations Al
Definition Part P
Rental Fees
Homebuyers' Monthly Payments S S S S S S S S S S S S S S S S S S
Dwelling Rental Excess Utilities Swort-Dwelling Rental Swort-Dwelling Rental Swort-Dwelling Rental Swort-Dwelling Rental Swort-Dwelling Rental Swort-Dwelling Rental Swort-Part Swor
Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher Total Rental Fees 1,915,000 1,915,000 1,809,000 106,000 Total Rental Fees 1,915,000 1,915,000 1,809,000 106,000 Total Rental Fees 1,915,000 1,809,000 106,000 Total Rental Fees 1,915,000 1,809,000 1,809,000 106,000
Non-Dwelling Rental
Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher Total Rental Fees 1,915,000 1,915,000 1,915,000 1,809,000 106,000 Total Rental Fees 1,915,000 1,915,000 1,809,000
New Construction - Acc Section 8 Youcher - Acc Housing Voucher 1,915,000 1,915,000 1,809,000 106,000 1
New Construction - Acc Section 8 1,915,000 1,915,000 1,809,000 106
Total Rental Fees 1,915,000 1,915,000 1,809,000 106,000
Total Rental Fees 1,915,000 1,915,000 1,809,000 106,000
Dither Operating Revenues (List) Ports 16,000 16,000 24,500 (8,500) Frauds 2,000 2,000 2,200 (200) Type in (Grant, Other Rev)
Frauds 2,000 2,000 2,200 (200) Type in (Grant, Other Rev)
Frauds 2,000 2,000 2,200 (200) Type in (Grant, Other Rev) -
Type in (Grant, Other Rev) Type in (Grant, Other
Type in (Grant, Other Rev)
Type in (Grant, Other Rev) Type in (Grant, Other
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) #DIV
Type in (Grant, Other Rev) - #DIV
Type in (Grant, Other Rev) - #DIV
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Type in (Grant, Other Rev) - - #DIV Type in (Grant, Other Rev) - - #DIV Type in (Grant, Other Rev) - - #DIV
Type in (Grant, Other Rev) - #DIV Type in (Grant, Other Rev) - #DIV
Type in (Grant, Other Rev) #DIV
Type in (Grant, Other Nev)
Type in (Grant, Other Rev) #DIV
The Control of the Co
Total Operating Revenues - 1,933,000 - 1,933,000 97,300 NON-OPERATING REVENUES 97,300
Other Non-Operating Revenues (List)
Type in #DIV
Type in #DIV,
Type in - #DIV,
Type in #DIV,
Type in #DIV,
Total Other Non-Operating Revenue #DIV,
Interest on Investments & Deposits (List)
Interest Earned 3,000 3,000 320 2,680 8
Penalties #DIV,
Other #DIV,
Total Interest - 3,000 - 3,000 320 2,680 8
Total Non-Operating Revenues - 3,000 - 3,000 320 2,680 8
TOTAL ANTICIPATED REVENUES \$ - \$ - \$ 1,936,000 \$ - \$1,936,000 \$ 99,980

Prior Year Adopted Revenue Schedule

Old Bridge Housing Authority

		FY 201	9 Adopted Bud	get	
	Public Housing	_	Housing		Total All
	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES					
Rental Fees					
Homebuyers' Monthly Payments					\$
Dwelling Rental					
Excess Utilities					-
Non-Dwelling Rental					-
HUD Operating Subsidy					~
New Construction - Acc Section 8					¥
Voucher - Acc Housing Voucher			1,809,000		1,809,000
Total Rental Fees			1,809,000		1,809,000
Other Revenue (List)					
Ports			24,500		24,500
Frauds			2,200		2,200
Type in (Grant, Other Rev)					3
Type in (Grant, Other Rev)					5.
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)	1				
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)	1				-
Type in (Grant, Other Rev)					2
Type in (Grant, Other Rev)					2
Type in (Grant, Other Rev)					17
Type in (Grant, Other Rev)					1 %
Type in (Grant, Other Rev)					16
Type in (Grant, Other Rev)					121
Type in (Grant, Other Rev)					02
Type in (Grant, Other Rev)					\ _
Type in (Grant, Other Rev)					<u> </u>
Total Other Revenue			26,700		26,700
Total Operating Revenues			1,835,700		1,835,700
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)					
Type in					3.55s
Type in					
Type in				1	S#3
Type in				. 1	927
Type in					34
Type in					
Other Non-Operating Revenues					
Interest on Investments & Deposits					
Interest Earned			320		320
Penalties				1	870
Other					<u> </u>
Total Interest	/S		320	*	320
Total Non-Operating Revenues		(Se)	320	= =	320
TOTAL ANTICIPATED REVENUES	\$ -	\$ - 5	1,836,020	\$ -	\$1,836,020

Appropriations Schedule

Old Bridge Housing Authority

For the Period

January 1, 2020

December 31, 2020

	Public Housing	FY	2020 Propose	ed Budget	Tabal All	FY 2019 Adopted Budget Total All	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Operations	All Operations	All Operations
OPERATING APPROPRIATIONS								
Administration	ii.				i.e.			
Salary & Wages	1] \$ -	\$ -	\$ -	#DIV/0!
Fringe Benefits					÷5		9	#DIV/0!
Legal			16,200		16,200	16,200	12	0.0%
Staff Training			5,000		5,000	5,000		0.0%
Travel			3,000		3,000	3,000	56	0.0%
Accounting Fees			13,400		13,400	13,400		0.0%
Auditing Fees			6,000		6,000	6,000		0.0%
Miscellaneous Administration*			156,000		156,000	158,400	(2,400)	-1.5%
Total Administration			199,600			202,000	(2,400)	-1.2%
Cost of Providing Services							(-,:,	
Salary & Wages - Tenant Services					1	24	-	#DIV/0!
Salary & Wages - Maintenance & Operation	1							#DIV/0!
Salary & Wages - Protective Services					741			#DIV/0!
Salary & Wages - Utility Labor						25	9	#DIV/0!
Fringe Benefits	di'						8	#DIV/0!
Tenant Services					943	154	9	#DIV/0!
Utilities								#DIV/0!
Maintenance & Operation					150	(2)		#DIV/0!
Protective Services					1/24	(8)	9	#DIV/0!
Insurance	1		7,500		7,500	8,250	(750)	-9.1%
Payment in Lieu of Taxes (PILOT)	1		7,500		/,500	0,230	(750)	#DIV/0!
Terminal Leave Payments						100	Ŷ.	#DIV/0!
Collection Losses						- 2		#DIV/0!
Other General Expense			15,700		15,700	15,700		0.0%
Rents	1		1,700,000		1,700,000	1,600,000	100,000	6.3%
Extraordinary Maintenance			1,700,000		1,700,000	1,000,000	-	#DIV/0!
Replacement of Non-Expendible Equipment						10 8 2	*	•
Property Betterment/Additions					1			#DIV/0!
Miscellaneous COPS*							ă	#DIV/0!
			1 722 200		1 722 700	1 (22 050	00.350	#DIV/0!
Total Cost of Providing Services			1,723,200		1,723,200	1,623,950	99,250	6.1%
Total Principal Payments on Debt Service in Lieu of								
Depreciation	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			XXXXXXXXXX	4 000 000	4.025.050	05.050	#DIV/0!
Total Operating Appropriations			1,922,800		1,922,800	1,825,950	96,850	5.3%
NON-OPERATING APPROPRIATIONS								
Total Interest Payments on Debt	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(XXXXXXXXXXX	xxxxxxxxxx	XXXXXXXXXX			=	#DIV/0!
Operations & Maintenance Reserve					:20	883	*	#DIV/0!
Renewal & Replacement Reserve						363		#DIV/0!
Municipality/County Appropriation					(A)		5	#DIV/0!
Other Reserves					(+)			#DIV/0!
Total Non-Operating Appropriations	2					-4		#DIV/0!
TOTAL APPROPRIATIONS			1,922,800	18	1,922,800	1,825,950	96,850	5.3%
ACCUMULATED DEFICIT								#DIV/0!
TOTAL APPROPRIATIONS & ACCUMULATED								
DEFICIT		0.00	1,922,800	- 2	1,922,800	1,825,950	96,850	5.3%
UNRESTRICTED NET POSITION UTILIZED								
Municipality/County Appropriation	90	(e)	*			30	*	#DIV/0!
Other						NI.	<u> </u>	#DIV/0!
Total Unrestricted Net Position Utilized		12.			2	31		#DIV/0!
TOTAL NET APPROPRIATIONS	\$ - \$		1,922,800	\$	\$ 1,922,800	\$ 1,825,950	\$ 96,850	5.3%
* Miscellaneous line items may not exceed 5% of to	otal operating appr	opriations show	n below. If amour	nt in miscellaneous is	greater than the amo	unt shown below.		
then the line item must be itemized above.	1 0				J ==== ===============================			
5% of Total Operating Appropriations	\$ - \$	- 9	96,140.00	\$ -	\$ 96,140.00			
1 2Obb	. *	•	,2,0,00	•	, 20,2.0.00			

OLD BRIDGE HOUSING AUTHORITY MISCELLANEOUS ADMINISTRATION

Item	2019	2020
	Budget	Budget
Publications	600	500
Membership Dues	2,100	2,000
Telephone Costs/Internet	6,500	6,000
Computer Consultant	2,100	2,000
Office Supplies	3,900	3,600
Advertising	1,100	1,000
Postage	3,200	2,900
Equipment Maintenance	1,200	1,000
Payroll Services	0	0
Computer Support	3,300	3,100
Utilities	1,600	1,500
Minutes (Labor)	1,800	1,700
Background Checks	1,400	1,200
Consulting	1,600	1,500
Management Fees	128,000	128,000
Total	158,400	156,000

Prior Year Adopted Appropriations Schedule

Old Bridge Housing Authority

		F	Y 2019 Adopted Bud	get	
	Public Housing				Total All
	Management	Section 8	Housing Voucher	Other Programs	Operations
OPERATING APPROPRIATIONS	17.				
Administration					
Salary & Wages					\$
Fringe Benefits					2
Legal			16,200		16,200
Staff Training			5,000	1	5,000
Travel			3,000		3,000
Accounting Fees			13,400		13,400
Auditing Fees			6,000		6,000
Miscellaneous Administration*			158,400		158,400
Total Administration	-		202,000	2	202,000
Cost of Providing Services					
Salary & Wages - Tenant Services					7.5
Salary & Wages - Maintenance & Operation					(e)
Salary & Wages - Protective Services					:(€:
Salary & Wages - Utility Labor					3.5
Fringe Benefits					(1 <u>9</u>)
Tenant Services					
Utilities					-2
Maintenance & Operation				ľ	74
Protective Services					10 4 3
Insurance			8,250		8,250
Payment in Lieu of Taxes (PILOT)					(188)
Terminal Leave Payments					(%)
Collection Losses					: 5 51
Other General Expense			15,700		15,700
Rents			1,600,000		1,600,000
Extraordinary Maintenance					**
Replacement of Non-Expendible Equipment					360
Property Betterment/Additions					:#E
Miscellaneous COPS*					
Total Cost of Providing Services			1,623,950	<u> </u>	1,623,950
Total Principal Payments on Debt Service in Lieu					
of Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXX	
Total Operating Appropriations		(e	1,825,950	•	1,825,950
NON-OPERATING APPROPRIATIONS					
Total Interest Payments on Debt	XXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXX	120
Operations & Maintenance Reserve					(- 8)
Renewal & Replacement Reserve					1 4 51
Municipality/County Appropriation					(m)
Other Reserves					(*)
Total Non-Operating Appropriations	1,5			:55	350
TOTAL APPROPRIATIONS	, with	853	1,825,950	.50	1,825,950
ACCUMULATED DEFICIT					
TOTAL APPROPRIATIONS & ACCUMULATED					
DEFICIT	0.74	.50	1,825,950		1,825,950
UNRESTRICTED NET POSITION UTILIZED	.=				
Municipality/County Appropriation		720	*	*	-
Other					421
		(4)			
Total Unrestricted Net Position Utilized	(4)		\$ 1,825,950		

^{*} 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 \$ - \$ 91,297.50 \$ - \$ 91,297.50

Debt Service Schedule - Principal

If Authority has no debt X this box	×		Old Bridge Housing Authority	ng Authority					
				Fiscal Year Ending in	ng in				
	Adopted Budget Year 2019	Proposed Budget Year 2020	2021	2022	2023	2024	2025	Thereafter	Total Principal Outstanding
Type in Issue Name									\$
Type in Issue Name									
Type in Issue Name									
Type in Issue Name									
TOTAL PRINCIPAL	•					(4			P:
LESS: HUD SUBSIDY									
NET PRINCIPAL	\$	\$	\$	\$	\$. \$	S	s	\$
Indicate the Authority's most recent bond rating and the year of the rating by ratings service.	ond rating and the year o	f the rating by rating	ys service.						
	Mondin	Litch	Charles O bear						

s service.	Standard & Poors		plicable
of the rating by rating	Fitch		If no Rating type in Not Applicable
t bond rating and the year	Moody's		If no
Indicate the Authority's most recent bond rating and the year of the rating by ratings service.		Bond Rating Year of Last Rating	

Debt Service Schedule - Interest Old Bridge Housing Authority

		2021							s	
	Proposed Budget Year	2020					•		\$	
×	Adopted Budget	Year 2019							\$	
If Authority has no debt X this box			Type in Issue Name	TOTAL INTEREST	LESS: HUD SUBSIDY	NET INTEREST				

			FISCAL YEAR ENGING IN	ending in				
dopted Budget Year 2019	Proposed Budget Year 2020	2021	2022	2023	2024	2025	 Thereafter	Total Interest Payments Thereafter Outstanding
								×
								10
								10
Î								i.
ě.	K 23		ě				306	45
								900
	\$	S	\$	\$ -	٠ ٠	·	\$	S

Net Position Reconciliation

Old Bridge Housing Authority

For the Period Jai

January 1, 2020

to December 31, 2020

FY 2020 Proposed Budget

Operations \$2,082,076 1,061,385

Other Programs

Housing Voucher

Section 8

Public Housing Management

Total All

868,987 151,704

857,032

11,955

151,704

1,061,385

1,918,417

163,659

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)

37,368

37,368

10,030

10,030

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)

- 199,102	(i	ï		ť.	- \$ 199,102
199,102	<u>i</u>	*	•		199,102 \$
a.	R	Ä	6	3	٠,
a	1	r	(106)	(I	\$.
					\$

(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.

96,140 \$ Maximum Allowable Appropriation to Municipality/County

96,140

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.

2020 (2020-2021) OLD BRIDGE

(Name)

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2020 (2020-2021) CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

OLD BRIDGE

		(Ivali	10)		
FISCAL	YEAR:	FROM:	1-1-2020	ГО:	12-31-2020
I I It is hereby certified that the I of the Capital Budget/Program by the governing body of the	approve	ed, pursuant to	N.J.A.C. 5:31-2.2,	along	with the Annual Budget
		(OR		
It is hereby certified that the gone NOT to adopt a Capital Budge the following reason(s):	t /Progra	m for the afore	said fiscal year, pu	rsuant	Authority have elected to N.J.A.C. 5:31-2.2 for
Officer's Signature:		Mark 1	oble		
Name:	MARI	K NOBLE			
Title:	EXEC	UTIVE DIRE	CTOR		
Address:		ROUTE 18 NC BRIDGE, NJ 0	RTH, SUITE 100 8857		
Phone Number:	732-60	7-6383	Fax Number:	732	2-679-0894
E-mail address	obtha(a	optonline.net			

2020 (2020-2021) CAPITAL BUDGET/PROGRAM MESSAGE

OLD BRIDGE Housing Authority

(Name)

FISCAL YEAR:

FROM:

1-1-2020

TO:

12-31-2020

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 each municipality or county affected by the actions of the authority participated in the development of the capital plan and reviewed or approved the plans or projects included within the Capital Budget/Program (This may include the governing body or certain officials such as planning boards, Construction Code Officials) as to these Projects?
- 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 a long-term (5 years or more) infrastructure needs and other capital items (Vehicles, Equipment) needs assessment been prepared?
- 4. If amounts are on Page CB-3 in the column Debt Authorizations. Indicate the primary source of funding the debt service for the Debt Authorizations (Example HUD Funding or Other sources)
- 5. Have the current capital projects been reviewed and approved by HUD?

Add additional sheets if necessary.

Proposed Capital Budget

Old Bridge Housing Authority

For the Period

January 1, 2020

to

December 31, 2020

				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	16					
Type in Description						
Total	(6)	. *			#	Xe:
Section 8						
Type in Description	72					
Type in Description						
Type in Description	644					
Type in Description						
Total	12E		=	*	4	2 8 2
Housing Voucher					=	
Type in Description						
Type in Description	:*:					- 1
Type in Description	5=6					
Type in Description	<u>%</u>					
Total			9	ją.	ŧ	·
Other Programs		2				
Type in Description						
Type in Description						
Type in Description						
Type in Description						
Total		#_				
TOTAL PROPOSED CAPITAL BUDGET	\$ -	\$ =	\$ -	\$ -	\$ - :	5 -

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, 2020

to

December 31, 2020

Fiscal Year Beginning in

	Estimate		Current B	_	2021	2022	2022	2024	2025	
	Co:	St .	Year 20	020	2021	2022	2023	2024	2025	
Public Housing Management				è						
Type in Description	\$	*	\$:-						
Type in Description		-		-						
Type in Description		2		2						
Type in Description		<u> </u>		•						
Total		5_0	7		₩.	9 7	-			- 5
Section 8			-	10						
Type in Description				- [
Type in Description		×		=						
Type in Description		2		~						
Type in Description		-		-						
Total	-	8	-		J.	9				.6
Housing Voucher			.,							
Type in Description		*		- [
Type in Description		×		-						
Type in Description		2		-						
Type in Description		<u></u>		2						
Total		===		= -	3.5	•	ŝ			- 2
Other Programs	-		-							
Type in Description				- [
Type in Description		=								
Type in Description		2		4						
Type in Description		2		2						
Total					**	-	=			V27
TOTAL	\$		\$	1	\$ - \$	- 5	5	\$	\$	

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, 2020 to December 31, 2020

				Funding Sources						
			·	Renewal &						
	Estimated 1	Total	Unrestricted Net	Replacement	Debt					
	Cost	<u> </u>	Position Utilized	Reserve	Authorization	Capital Grants	Other Sources			
Public Housing Management										
Type in Description	\$	=20								
Type in Description		100								
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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.