



MUSCATINE MUNICIPAL HOUSING AGENCY

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## MEMORANDUM

**TO:** Gregg Mandsager, City Administrator  
**FROM:** Richard Yerington, Housing Administrator  
**DATE:** August 13, 2013  
**RE:** Capital Funding 2014 – IA05P04950113

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**INTRODUCTION:** Muscatine Municipal Housing Agency (MMHA) annually receives Capital Funding Program Formula Grants (CFP) for the purpose of improving living conditions at Sunset Park and Clark House. Earlier this month we were informed our allocation for Fiscal Year 2014 will be \$156,062.

**BACKGROUND:** In our budget planning process earlier this year we had projected (CFP) grants at \$150,000, a difference of \$ 6,062 from the actual awarded.

In processing this grant the housing administrator must execute three copies of the Capital Fund Program Amendment and develop the agency's annual statement.

**RECOMMENDATION/RATIONALE:** The Muscatine City Council, acting as the MMHA Board of Commissioners, accepts the grant by way of resolution and authorizes the housing administrator to execute the required documentation.

Attached,  
Resolution  
Capital Fund Program Amendment  
HUD-50075.1 Annual Statement

**RESOLUTION NO. \_\_\_\_\_**

**A RESOLUTION ACCEPTING CAPITAL FUNDING GRANT  
IA05P0495013 AND CFP ANNUAL STATEMENTS; AUTHORIZING THE HOUSING  
ADMINISTRATOR TO EXECUTE THE CONSOLIDATED ANNUAL CONTRIBUTIONS  
CONTRACT ON BEHALF OF THE BOARD OF COMMISSIONERS**

**WHEREAS,** the Muscatine Municipal Housing Agency (MMHA) has been awarded \$156,062.00 in formula grant capital funding for FY 2014 by HUD; and

**WHEREAS,** updates and revisions to the MMHA FY 2014 Capital Fund Budget and its Annual Statement/Performance and Evaluation Report have been completed without substantial deviation; and

**WHEREAS,** the Muscatine City Council, acting as the MMHA Board of Commissioners, has reviewed the HUD-50075.1 Annual statement;

**NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF MUSCATINE, IOWA** to accept this CFP grant, adopt the HUD-50075.1 annual statement and authorize the Muscatine Housing Administrator to execute the required documentation.

**PASSED, APPROVED AND ADOPTED** this 15<sup>th</sup> day of August 2013.

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DEWAYNE M. HOPKINS, MAYOR

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GREGG MANDSAGER, CITY CLERK

## 2013 Capital Fund

**Capital Fund Program  
(CFP) Amendment  
To The Consolidated Annual Contributions  
Contract (form HUD-53012)**

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

Whereas, (Public Housing Authority) Muscatine Municipal Housing Agency IA049 (herein called the "PHA") and the United States of America, Secretary of Housing and Urban Development (herein called "HUD") entered into Consolidated Annual Contributions Contract(s) ACC(s) Numbers(s) KC-9164 dated 2/11/2005

Whereas, HUD has agreed to provide CFP assistance, upon execution of this Amendment, to the PHA in the amount to be specified below for the purpose of assisting the PHA in carrying out capital and management activities at existing public housing developments in order to ensure that such developments continue to be available to serve low-income families. HUD reserves the right to provide additional CFP assistance in this FY to the PHA. HUD will provide a revised ACC Amendment authorizing such additional amounts.

\$ \$156,062.00 for Fiscal Year 2013 to be referred to under Capital Fund Grant Number IA05P04950113  
PHA Tax Identification Number (TIN): On File DUNS Number: On File

Whereas, HUD and the PHA are entering into the CFP Amendment Number \_\_\_\_\_

Now Therefore, the ACC(s) is (are) amended as follows:

1. The ACC(s) is (are) amended to provide CFP assistance in the amount specified above for capital and management activities of PHA developments. This amendment is a part of the ACC(s).

2. The capital and management activities shall be carried out in accordance with all HUD regulations and other requirements applicable to the Capital Fund Program.

3. (Check one)

a. For Non-qualified PHAs:

\_\_\_\_\_ (i) In accordance with the HUD regulations, the Annual PHA Plan has been adopted by the PHA and approved by HUD, and may be amended from time to time. The capital and management activities shall be carried out as described in the CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1).

OR

\_\_\_\_\_ (ii) If the Annual PHA Plan has not been adopted by the PHA and approved by HUD, the PHA may use its CFP assistance under this contract for work items contained in its CFP-Five-Year Action Plan (HUD-50075.2), before the Annual PHA Plan is approved.

b. For Qualified PHAs:

\_\_\_\_\_ (i) The CFP Annual Statement/Performance and Evaluation Report (HUD-50075.1) has been adopted by the PHA and verified by HUD. The capital and management activities shall be carried out as described therein.

OR

\_\_\_\_\_ (ii) If the CFP Annual Statement/Performance and Evaluation Report has not been adopted by the PHA and/or verified by HUD, the PHA may use its CFP assistance under this contract for work items contained in its approved CFP 5-Year Action Plan (HUD-50075.2), before the CFP Annual Statement/Performance and Evaluation Report is adopted by the PHA and verified by HUD.

For cases where HUD has approved a Capital Fund Financing Amendment to the ACC (CFP Amendment attached), HUD will deduct the payment for amortization scheduled payments from the grant immediately on the effective date of this CFP Amendment. The payment of CFP funds due per the amortization schedule will be made directly to a designated trustee (Trustee Agreement attached) within 3 days of the due date.

Regardless of the selection above, the 24 month time period in which the PHA must obligate this CFP assistance pursuant to section 9(j)(1) of the United States

The PHA acknowledges its responsibility for adherence to this amendment. The parties have executed this Amendment, and it will be effective 9/9/2013. This is the date on which CFP assistance becomes available to the PHA for obligation.

**U.S. Department of Housing and Urban Development**

By \_\_\_\_\_ Date: \_\_\_\_\_

Title \_\_\_\_\_

**PHA Executive Director**

By \_\_\_\_\_ Date: \_\_\_\_\_

Title \_\_\_\_\_

Part I: Summary					
PHA Name: Muscatine Municipal Housing Agency		Grant Type and Number Capital Fund Program Grant No: IA05P04950113 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2013 FFY of Grant Approval: 2014
<b>Type of Grant</b> <input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Performance and Evaluation Report for Period Ending:					
		<input type="checkbox"/> Revised Annual Statement (revision no: ) <input type="checkbox"/> Final Performance and Evaluation Report			
Line	Summary by Development Account	Original	Total Estimated Cost	Total Actual Cost <sup>1</sup>	
			Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	96,562			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	59,500			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report  
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and  
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development  
 Office of Public and Indian Housing  
 OMB No. 2577-0226  
 Expires 3/31/2014

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Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost <sup>1</sup>	
		Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)				
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director		Date	Signature of Public Housing Director		Date

<sup>1</sup> To be completed for the Performance and Evaluation Report.

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## Part II: Supporting Pages

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<sup>2</sup> To be completed for the Performance and Evaluation Report.

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