2015 RECEIVED OCT 2 6 2015

Housing Authority of the City of Cape May

Housing Authority Budget

capemayha.org (Authority Web Address)

Department Of



Division of Local Government Services

2015 HOUSING AUTHORITY BUDGET

Certification Section

HOUSING AUTHORITY OF THE CITY OF CAPE MAY HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM OCTOBER 1, 2015 TO SEPTEMBER 30, 2016

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

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CERTIFICA	TION OF ADO	OPTED BUDGET	ı
 fied that the adopted Bu		-	* *

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

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

By:	Date:

2015 PREPARER'S CERTIFICATION

HOUSING AUTHORITY OF THE CITY OF CAPE MAY

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

OCT. 1, 2015

TO: SEI

SEPT. 30, 2016

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:	Linda M Cavallo								
Name:	Linda M. Cavallo								
Title:	Fee Accountant								
Address:	2581 E Chestnut Ave.,	2581 E Chestnut Ave., Suite B							
	Vineland, NJ 08361	Vineland, NJ 08361							
Phone Number:	856-696-8000	596-8000 Fax Number: 856-794-1295							
E-mail address	linda@avenacpa.com								

2015 APPROVAL CERTIFICATION

HOUSING AUTHORITY OF THE CITY OF CAPE MAY HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

It is hereby certified that the Housing Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the Housing Authority of the City of Cape May, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 20th day of July, 2015.

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:	Carol	accerbe	W.						
Name:	Carol Hackenberg								
Title:	Executive Director	Executive Director							
Address:	639 Lafayette Street	639 Lafayette Street							
	Cape May, NJ 08204	<u> </u>							
Phone Number:	609-884-8703 Fax Number: 609-884-9028								
E-mail address	chackenberg@capen	nayha.org							

INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.capemayha.org					
	s shall maintain eithe			_			
operations an	purpose of the webs d activities. N.J.S.A. minimum for public of 5A-17.1.	40A:5A-17.1 requi	res the follow	wing items to	be included on	the Authority	
	-2						
	A description of the	Authority's mission	and responsi	bilities			
	Commencing with 2 prior years	013, the budgets for	the current fi	iscal year and i	immediately pre	ceding two	
	The most recent Con information	nprehensive Annual	Financial Re	port (Unaudite	ed) or similar fin	ancial	
	Commencing with 2 two prior years	012, the complete a	nnual audits o	of the most reco	ent fiscal year ar	nd immediatel	
	•	es, regulations and official policy statements deemed relevant by the go ty to the interests of the residents within the authority's service area or					
□ (I	Notice posted pursua setting forth the time	-	-		meeting of the A	Authority,	
	Beginning January 1 resolutions of the bo						
	The name, mailing a exercises day-to-day Authority			-			
D	A list of attorneys, accorporation or other preceding fiscal year	organization which	received any	remuneration	of \$17,500 or m		
webpage as i	certified by the below dentified above comp A check in each of the	plies with the mini	mum statuto	ry requiremen			
Name of Office	cer Certifying complia	ance		Carol	Hacken	nberg	
Title of Office	er Certifying complian	100 Secreto	ryld	secuti	ive Dir	ector	
Signature			O C	aro Co	Jours	berg	

Page C-4

2015 HOUSING AUTHORITY BUDGET RESOLUTION HOUSING AUTHORITY OF THE CITY OF CAPE MAY

FISCAL YEAR:

FROM:

OCT. 1, 2015

TO: SEPT. 30, 2016

WHEREAS, the Annual Budget and Capital Budget for the Housing Authority of the City of Cape May for the fiscal year beginning, October 1, 2015 and ending, September 30, 2016 has been presented before the governing body of the Housing Authority of the City of Cape May at its open public meeting of July 20, 2015; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$695,330, Total Appropriations, including any Accumulated Deficit if any, of \$694,780 and Total Unrestricted Net Position utilized of 0; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$71,010 and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$0; and

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

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

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Housing Authority of the City of Cape May, at an open public meeting held on July 20, 2015 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Housing Authority of the City of Cape May for the fiscal year beginning, October 1, 2015 and ending, September 30, 2016 is hereby approved; and

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

BE IT FURTHER RESOLVED, that the governing body of the Housing Authority of the City of Cape May will consider the

Annual Budget and Capital Budget/Program for adoption on September 21, 2015.

retary's Signature)

Recorded Vote

Governing Body Member:

Aye

Abstain

7/30/15

Thomas Hynes Pat M. Swain

Jean Capilli **Thomas White Tony Williams**

Frank Acker

Nay

Absent

2015 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2015 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS HOUSING AUTHORITY OF THE CITY OF CAPE MAY

AUTHORITY BUDGET

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

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

SEE NEXT PAGE FOR ANSWERS

- 1. Complete a brief statement on the 2015 proposed Annual Budget and make comparison to the 2014 adopted budget. Explain any variances over +/-10% for each 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. For example, if the anticipated HUD Operating Subsidy has increased 15%, provide documentation that supports the increased HUD Operating Subsidy to the Housing Authority.
- 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% from the current year adopted budget.
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program.
- 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.
- 5. Is the Authority required to implement project-based budgeting and asset management under HUD rules and regulations? If yes, has the Authority's governing body adopted a project-based budget?
- 6. The proposed budget must not reflect an anticipated deficit from 2015 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.
- 7. Attach a schedule of the Authority's existing rate structure (rent, maintenance/utilities, etc.) and a schedule of the proposed rate structure for the upcoming fiscal year. Explain any proposed changes in the rate structure and attach the resolution approving the change in the rate structure, if applicable.
- 8. Attach a copy of the Authority's most recent Annual Operating Data submission to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) under the Authority's Continuing Disclosure Agreements for any debt issuances outstanding. Examples of Annual Operating Data may include rents and collections; number of tenants; number of available housing units; etc. See Local Finance Notice 2014-9 for more information.

2015 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS HOUSING AUTHORITY OF THE CITY OF CAPE MAY

AUTHORITY BUDGET

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

- 1. The 2015 proposed Annual Budget is primarily based on the September 30, 2014 year end data and the first six months of the current year (YE 9-30-2015). A slight increase in rental revenue is anticipated based on the current trend. Operating subsidy is based on the anticipated funding level of 85% as published by HUD. Capital funding decreased by \$20,080. This amount was already utilized in the current fiscal year for maintenance expenses. Interest income is expected to decrease due to less principal invested during the year. Income from excess utilities and other non-operating income are expected to increase slightly based on the activity of the current fiscal year. Administrative expenses are anticipated to be approximately the same. The cost of providing services is expected to increase by \$20,200 due to an increase in maintenance salaries and material costs. More of the maintenance work is being done in house and less outside contractors will be utilized.
- 2. The proposed Annual Budget will not have a significant impact on Anticipated Revenues. The total increase in revenues is approximately 3% which is not significant.
- 3. The local/regional economy is in a recession. The majority of our tenants have trouble finding and keeping a job. Their income is greatly impacted by the local job market/economy which is subject to seasonal changes. The Capital Budget will be used for operations so the local economy will have little effect on it.
- 4. N/A
- 5. No
- 6. N/A
- 7. N/A
- 8. N/A

HOUSING AUTHORITY CONTACT INFORMATION 2015

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

Name of Authority:	Housing Authority of the City of Cape May					
Address:	639 Lafayette Street					
City, State, Zip:	Cape May		NJ	08204		
Phone: (ext.)	609-884-8703	609-884-8703 Fax:		34-9028		
D 1 N	The As M. Consults CDA					
	Linda M. Cavallo, CPA 2581 E. Chestnut Ave. Suite B					
Preparer's Name: Preparer's Address: City, State, Zip:	2581 E. Chestnut Ave.		NJ	08361		
Preparer's Address:	2581 E. Chestnut Ave. Suite B	Fax:		08361 94-1295		

Chief Executive Officer:	Carol Hackenberg	Carol Hackenberg						
Phone: (ext.)	609-884-8703 Fax: 609-884-9028							
E-mail:	chackenberg@capemayha.org							

Chief Financial Officer: Carol Hackenberg							
Phone: (ext.)	609-884-8703	Fax:	609-884-9028				
E-mail:	chackenberg@cape	chackenberg@capemayha.org					

Name of Auditor:	Frank DeFroda, CPA	Frank DeFroda, CPA						
Name of Firm:	Barbacane Thornton &	Barbacane Thornton & Company						
Address:	200 Springer Building	200 Springer Building						
	3411 Silverside Road							
City, State, Zip:	Wilmington		DE	19810				
Phone: (ext.)	302-478-8940	302-478-8940 Fax:		78-0133				
E-mail:	fdefroda@btcpa.com	fdefroda@btcpa.com						

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

Housing Authority of the City of Cape May

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

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

1)	Provide the number of individuals employed in calendar year 2013 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements:4
2)	Provide the amount of total salaries and wages for calendar year 2013 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: \$146,289
3)	Provide the number of regular voting members of the governing body:6_
4)	Provide the number of alternate voting members of the governing body:0
5)	Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page
-,	N-4 during the current fiscal year? No If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.
6)	Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year because
-,	of their relationship with the Authority file the form as required?Yes If "no," provide a list of
	those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file.
7)	Does the Authority have any amounts receivable from current or former commissioners, officers, key
")	employees or highest compensated employees? No If "yes," attach a list of those individuals, their
	position, the amount receivable, and a description of the amount due to the Authority.
8)	Was the Authority a party to a business transaction with one of the following parties:
0)	a. A current or former commissioner, officer, key employee, or highest compensated employee? No
	 b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee?No
	c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? No
	If the answer to any of the above is "yes," attach a description of the transaction including the name of the
	commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and
	whether the transaction was subject to a competitive bid process.
9)	Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that
	benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person
	designated by the transferor. No If "yes," attach a description of the arrangement, the premiums
	paid, and indicate the beneficiary of the contract.
10)	Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include
	whether the Authority's process includes any of the following: 1) review and approval by the commissioners or
	a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized
	entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5)
	written employment contract. Attach narrative.
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?No
	"yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for
	each expenditure listed.

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE (CONTINUED) HOUSING AUTHORITY OF THE CITY OF CAPE MAY

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

120	
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
	a. First class or charter travel No b. Travel for companions No
	c. Tax indemnification and gross-up paymentsNo d. Discretionary spending account No
	, _, , , , , _ , , ,
	f. Payments for business use of personal residence No
	· · · · · · · · · · · · · · · · · · ·
	g. Vehicle/auto allowance or vehicle for personal useYes (Carol Hackenberg, the Executive Director, uses a company vehicle.
	Her personal use is reported as additional compensation on her W-2)
	h. Health or social club dues or initiation fees No
	i. Personal services (i.e.: maid, chauffeur, chef)No
	If the answer to any of the above is "yes," attach a description of the transaction including the name and
	position of the individual and the amount expended.
14)	Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred by
,	employees and/or commissioners during the course of Authority business and does that policy require
	substantiation of expenses through receipts or invoices prior to reimbursement? Yes _ If "no," attach an
	explanation of the Authority's process for reimbursing employees and commissioners for expenses.
15)	Did the Authority make any payments to current or former commissioners or employees for severance or
,	termination?NoIf "yes," attach explanation including amount paid.
16)	Did the Authority make any payments to current or former commissioners or employees that were contingent
	upon the performance of the Authority or that were considered discretionary bonuses?No If "yes,"
	attach explanation including amount paid.
17)	Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by
	submitting its audited annual financial statements, annual operating data, and notice of material events to the
	Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required?
	_N/A If "no," attach a description of the Authority's plan to ensure compliance with its Continuing
	Disclosure Agreements in the future.
18)	Did the Authority receive any notices from the Department of Housing and Urban Development or any other
	entity regarding maintenance or repairs required to the Authority's facilities to bring them into compliance with
	current regulations and standards that it has not yet taken action to remediate?No If "yes," attach
	explanation as to why the Authority has not yet undertaken the required maintenance or repairs and describe
	the Authority's plan to address the conditions identified.
19)	Did the Authority receive any notices of fines or assessments from the Department of Housing and Urban
	Development or any other entity due to noncompliance with current regulations?NoIf "yes," attach a
	description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine
	or assessment.
20)	Has the Authority been deemed "troubled" by the Department of Housing and Urban Development?No
	If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's
	plan to address the conditions identified.

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

Cape May Housing Authority

September 30, 2016

9

For the Períod October 1, 2015

	Total Compensation Al Public Entities	\$ 84,420	35,780	73,730	55,160	21,000	<u>*</u>	Ĭ	•	ě	ŝ	*	Ť	ě	•		270,090
	Estimated amount of other compensation from Other Public Entities (health benefits, persion, payment in lieu of health benefits, etc.)	•	•	•	,												5
	Reportable Compensation from Other Public Entries (W-2/1099)	0	0	•	0	0											
	Names of Other Average Hours Public Entities per Week where Dedicated to hdividual is an Positions held Positions at Total Employee or at Other Public Other Public Compensation Member of the Entities Listed in Entities Listed in From Authority Governing Body Column O Column O	N/A	N/A	K/A	N/A	N/A											18.1
	Positions held ** Other Public Entities Listed in Y Column 0	None	None	None	None	None											
	Names of Other Public Entities where hidydual is an Positions hel Total Employee or at Other Pub Compensation Member of the Entities Listed from Authority Governing Body Column O	N/A	N/A		N/A	N/A		_			_		_	_			-1
	Total Total , Compensation	1/3			55,160	21,000						•	•				270,090
,	Estin amount compe fron Auth (health pension	w	10,580	21,230	17,300	6,000	•										\$ 75,140
ensation from 2/ 1099)	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)	\$ 1,390		*	3			35			(i)	*					- \$ 1,390
Reportable Compensation from Authority (W-2/ 1099)	Base Salary/ Stipend Bonus	\$ 63,000 \$	25,200	005	. 860	000	<i>x</i>	o o	an an		•	œ.					5193,560 \$
	표 경 중 Former Highest Compensated Employee	3 5	*1	N N	31	#					_					_	5193
Position	Key Employee Officer	×	×	×	×	×											
ı	Average Hours per Week to Dedicated to Position	35	35	35	x	SI		×	×	×	×	×				_	
	Tete	Executive Directo	Office Manager	Maint: Supervisor	Maintenance	Maintenance	Chairman	Vice Chairman	Commissioner	Commissioner	Commissioner	Commissioner					
	Name	1 Carol Hackenberg Executive Directo	2 Maryellen Francki Office Manager	3 Joseph Culligan	4 Robert Martin	5 Willie Hicks	6 Thomas Hines	7 Patricia Swain	8 Jean Capilli	9 Frank Auker	10 Tony Williams	11 Thomas White	77	13	14	23	Total:

Enter the total number of employees/ independent contractors who received more than \$100,000 in total reportable compensation for the most recent fiscal year completed:

Schedule of Health Benefits - Detailed Cost Analysis

September 30, 2016

2

Cape May Housing Authority
Period October 1, 2015

For the Period

	# of Covered Members (Medical	Annual Cost Estimate per Employee	Total Cost Estimate	# of Covered Members	Annual Cost			
	& Rx) Proposed Budget	Proposed Budget	Proposed Budget	(Medical & Rx) Current Year	per Employee Current Year	Total Current Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
A 48. (Free land)				í		i		
Active Employees - Realth Benefits - Annual Cost		ı			ı	ı	ı	
Single Coverage	1	\$ 11,040	\$ 11,040	1	\$ 10,240	\$ 10,240	\$ 800	7.8%
Parent & Child	2	20,355	40,710	2	18,880	37,760	2,950	7.8%
Employee & Spouse (or Partner)	1	17,250	17,250	1	16,000	16,000	1,250	7.8%
Family			*					#DIV/0i
Employee Cost Sharing Contribution (enter as negative -)			(060'6)			(8,330)	(094)	9.1%
Subtotal	4		59,910	4		55,670	4,240	7.6%
Commissioners - Health Benefits - Annual Cost								
Single Coverage			S.			ð.	31	#DIV/0i
Parent & Child			9			٠	9	#DIV/0i
Employee & Spouse (or Partner)			: 				· · ·	#DIV/0i
Family			Ď			٠	*	#DIV/0i
Employee Cost Sharing Contribution (enter as negative -)							***	#DIV/0i
Subtotal	0			0		×	*	#DIV/0i
Retirees - Health Benefits - Annual Cost								
Single Coverage			7.			*	16	#DIV/0!
Parent & Child			.			3	**	#DIV/0i
Employee & Spouse (or Partner)	1	6,000	6,000	1	5,530	5,530	470	8.5%
Family			(i			(()	84	#DIN/0i
Employee Cost Sharing Contribution (enter as negative -)							4	#DIN/0i
Subtotal	1		6,000	1		5,530	470	8.5%
GRAND TOTAL	5		\$ 65,910	5	000	\$ 61,200	\$ 4,710	7.7%
Is medical coverage provided by the SHBP (Yes or No)? Is prescription drug coverage provided by the SHBP (Yes or No)?			YES					

Schedule of Accumulated Liability for Compensated Absences

Cape May Housing Authority

For the Period

October 1, 2015

2

September 30, 2016

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

Agreement (check applicable items) Legal Basis for Benefit Employment leubivibn Resolution Agreement Approved Labor **Absence Liability** 4,236 1,670 546 1,614 **Dollar Value of** Compensated Accrued 32 **Gross Days of Accumulated Compensated Absences at** beginning of Current Year Individuals Eligible for Benefit **MARYELLEN FRANCKE** CAROL HACKENBERG JOSEPH CULLIGAN ROBERT MARTIN

8,066 Total liability for accumulated compensated absences at beginning of current year \$

Schedule of Shared Service Agreements

Cape May Housing Authority

October 1, 2015

For the Period

2

September 30, 2016

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	Name of Entity Receiving Service Type of Shared Service Provided	Type of Shared Service Provided	Comments (Enter more specifics if needed)	Agreement Effective Date	Agreement End Date	Amount to be Received by/ Paid from Authority
	N/A					

2015 HOUSING AUTHORITY BUDGET

Financial Schedules Section

2015 Budget Summary

Cape May Housing Authority October 1, 2015 to

For the Period

September 30, 2016

				Proposed Budget	et		Current Year Adopted Budget	\$ Increase (Decrease) Proposed vs. Current Year	% Increase (Decrease) Proposed vs. Current Year
	Publi	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operation	All Operations All Operations
REVENUES									
Total Operating Revenues	٠	616,320	⋄	٠ •	€	\$ 616,320	\$ 577,710	\$ 38,610	6.7%
Total Non-Operating Revenues		8,000		1303	71,010	79,010	065'66	(20,580)	-20.7%
Total Anticipated Revenues		624,320			71,010	695,330	677,300	18,030	2.7%
APPROPRIATIONS									
Total Administration		186,740			7.6	186,740	180,500	6,240	3.5%
Total Cost of Providing Services		437,030			71,010	508,040	496,360	11,680	2.4%
Net Principal Payments on Debt Service in Lieu of Depreciation			H						i0/\nq#
Total Operating Appropriations		623,770		•	71,010	694,780	676,860	17,920	2.6%
Net Interest Payments on Debt Total Other Non-Operating Appropriations Total Non-Operating Appropriations		5 5 (25)		7.00 5.00	RE RE	•0 •0 ((•0)	# # E		#DIV/0! #DIV/0!
Accumulated Deficit		*			(4)				io/\\ld#
Total Appropriations and Accumulated Deficit		623,770			71,010	694,780	676,860	17,920	2.6%
Less: Total Unrestricted Net Position Utilized	ļ	*			74	*			#DIV/0!
Net Total Appropriations		623,770			71,010	694,780	676,860	17,920	7.6%
ANTICIPATED SURPLUS (DEFICIT)	w	550	w	\$	•	\$ 550	\$ 440	\$ 110	25.0%

2015 Revenue Schedule

Cape May Housing Authority

For the Period

October 1, 2015

September 30, 2016

			Proposed Bu	dget		Current Year Adopted Budget	\$ Increase (Decrease) Proposed vs. Current Year	% Increase (Decrease) Proposed vs. Current Year
No.	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING REVENUES	•							
Rental Fees								
Homebuyers' Monthly Payments					\$ =	\$	\$	#DIV/0!
Dwelling Rental	306,360				306,360	304,000	2,360	0.8%
Excess Utilities	5,700				5,700	5,000	700	14.0%
Non-Dwelling Rental					100	981	120	#DIV/01
HUD Operating Subsidy	304,260				304,260	268,710	35,550	13.2%
New Construction - Acc Section 8					(540)	(9)	12	#DIV/01
Voucher - Acc Housing Voucher					900	(**		#DIV/0!
Total Rental Fees	616,320	,			616,320	577,710	38,610	6.7%
Other Operating Revenues (List)								
Other Revenue 1					, i	340		#DIV/0!
Other Revenue 2					i i i		(€	#DIV/0!
Other Revenue 3						ě.		#DIV/0!
Other Revenue 4					521	72	/2	#DIV/0!
Total Other Revenue			*		S S S S S S S S S S S S S S S S S S S		(4)	#DIV/0!
Total Operating Revenues	616,320		(2)		616,320	577,710	38,610	6.7%
NON-OPERATING REVENUES							3	-
Grants & Entitlements (List)								
Grant #1-Capital Funds				71,010	71,010	91,090	(20,080)	-22.0%
Grant #2					100			#DIV/0!
Grant #3					· ·	-	3.0	#DIV/01
Grant #4					17 2 0	993		#DIV/01
Total Grants & Entitlements		40	799	71,010	71,010	91,090	(20,080)	-22.0%
Local Subsidies & Donations (List)								
Local Subsidy #1					150	47	-	#DIV/01
Local Subsidy #2					587	741) E	#DIV/01
Local Subsidy #3					(#3	340		#DIV/01
Local Subsidy #4	01-				848	- 1		#DIV/0!
Total Local Subsidies & Donations	100	*?	265	24	i 196			#DIV/01
Interest on Investments & Deposits								
Investments	1,000				1,000	2,000	(1,000)	-50.0%
Security Deposits								#DIV/0!
Penalties Penalt					190	2.27	-	#DIV/0!
Other Investments	8				180			#DIV/0!
Total Interest	1,000				1,000	2,000	(1,000)	-50.0%
Other Non-Operating Revenues (List)								
Other Non-Operating #1-Lafe Fees, etc	7,000				7,000	6,500	500	7.7%
Other Non-Operating #2						~	-	#DIV/0!
Other Non-Operating #3					· · · · · · · · · · · · · · · · · · ·	380		#DIV/0!
Other Non-Operating #4	7 000				7.000	C F00	F00	#DIV/0I
Other Non-Operating Revenues Total Non-Operating Revenues	7,000 8,000	2.41		71,010		6,500 99,590	/20 500	7.7%
TOTAL ANTICIPATED REVENUES	\$ 624,320						\$ 18,030	-20.7% 2.7%
TO THE MILLION FOR WEARINGS	3 024,320	<u> </u>	•	7 71,010	\$ 033,330 	\$ 677,300	\$ 18,030	2.7%

2014 Revenue Schedule

Cape May Housing Authority

For the Period

October 1, 2015

to

September 30, 2016

Current Year Adopted Budget

	Public Housing		Housing		Total All
	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES					
Rental Fees					
Homebuyers' Monthly Payments					\$ =
Dwelling Rental	304,000				304,000
Excess Utilities	5,000				5,000
Non-Dwelling Rental	3,000				3,000
HUD Operating Subsidy	268,710				268,710
New Construction - Acc Section 8	200,710				200,710
Voucher - Acc Housing Voucher					18
Total Rental Fees	577,710		-		577,710
Other Operating Revenues (List)	377,710				377,710
Other Revenue 1					
Other Revenue 2					
Other Revenue 3					10.00
Other Revenue 4					-
					[0.00]
Total Other Revenue	577,710	•	-	•	577.740
Total Operating Revenues	5//,/10				577,710
NON-OPERATING REVENUES					
Grant & Entitlements (List)				01 000	01 000
Grant #1-Capital Funds Grant #2				91,090	91,090
Grant #3					~
Grant #4				04.000	04.000
Total Grants & Entitlements		ž.	•	91,090	91,090
Local Subsidies & Donations (List)					
Local Subsidy #1					•
Local Subsidy #2					*
Local Subsidy #3					- 3
Local Subsidy #4					:*:
Total Local Subsidies & Donations	2	-	-	12	-
Interest on Investments & Deposits					
Investments	2,000				2,000
Security Deposits					-
Penalties					150
Other Investments	2.000				2.000
Total Interest	2,000	-	123	-	2,000
Other Non-Operating Revenues (List)	6 500				C E00
Other Non-Operating #1-Lafe Fees, etc Other Non-Operating #2	6,500				6,500
Other Non-Operating #2					190
Other Non-Operating #4					
Other Non-Operating Revenues	6,500		140		6,500
Total Non-Operating Revenues	8,500			91,090	99,590
TOTAL ANTICIPATED REVENUES	\$ 586,210	\$ -	\$ -	\$ 91,090	\$ 677,300
TOTAL ANTICIPATED NEVEROLS	3 380,210	7	γ -	31,030	\$ 077,300

2015 Appropriations Schedule

Cape May Housing Authority

For the Period

October 1, 2015

to

September 30, 2016

\$ Increase

% Increase

										\$ Increase	% Increase
										(Decrease)	(Decrease)
									urrent Year	Proposed vs.	Proposed vs.
			F	Proposed Bud	get			_Add	pted Budget	Current Year	Current Year
	Public H	lousing		Housing			Total All		Total All		
	Manag	ement	Section 8	Voucher	Other Program	ns	Operations		Operations	All Operations	All Operations
OPERATING APPROPRIATIONS											
Administration											
Salary & Wages	\$	88,200					\$ 88,200	\$	85,000	\$ 3,200	3.8%
Fringe Benefits		35,020					35,020		35,000	20	0.1%
Legal		10,000					10,000		9,000	1,000	11.1%
Staff Training		2,800					2,800		3,500	(700)	-20.0%
Travel		200					200		500	(300)	-60.0%
Accounting Fees		10,000					10,000		10,000	=	0.0%
Auditing Fees		9,000					9,000		9,000	₽	
Miscellaneous Administration*		23,000					23,000		28,500	(5,500)	-19.3%
Total Administration		178,220					178,220		180,500	(2,280)	-1.3%
Cost of Providing Services										(2/200/	
Salary & Wages - Tenant Services											#DIV/01
Salary & Wages - Maintenance & Operation		105,360					105,360		90,660	14,700	16.2%
· -		105,500					105,500		30,000	14,700	
Salary & Wages - Protective Services									*:	-	#DIV/01
Salary & Wages - Utility Labor		TO 500					50. COO		50.220	- (500)	#DIV/0!
Fringe Benefits		59,630					59,630		60,220	(590)	-1.0%
Tenant Services		1,000					1,000		1,000	-	0.0%
Utilities	1	192,320			71	,010	263,330		262,410	920	0.4%
Maintenance & Operation		61,000					61,000		56,240	4,760	8.5%
Protective Services									5	-	#DIV/01
Insurance		22,000					22,000		22,000	-	0.0%
Payment in Lieu of Taxes (PILOT)		4,240					4,240		3,830	410	10.7%
Terminal Leave Payments									1.0		#DIV/01
Collection Losses							90		(0)	93	#DIV/0!
Other General Expense											#DIV/0!
Rents							Tall'		10	2	#DIV/0!
Extraordinary Maintenance							,			•	#DIV/0!
Replacement of Non-Expendible Equipment										-	#DIV/0!
Property Betterment/Additions											#DIV/0!
Miscellaneous COPS*											#DIV/OI
Total Cost of Providing Services		145,550			71	010	516,560	\===	496,360	20,200	4.1%
Net Principal Payments on Debt Service in Lieu of		113,330		-7	- 13	010	520,500		430,300	20,200	4.170
Depreciation							22		10	20	#DIV/01
•		523,770	-		71	.010	694,780		676,860	17,920	2.6%
Total Operating Appropriations		225,770			/1	,010	034,760		070,000	17,320	2.070
NON-OPERATING APPROPRIATIONS											upu dal
Net Interest Payments on Debt							-			\$	#DIV/0!
Operations & Maintenance Reserve							2.0		*	=2	#DIV/0!
Renewal & Replacement Reserve										9	#DIV/0!
Municipality/County Appropriation							(4)		646	*5	#DIV/0I
Other Reserves									1.002		#DIV/01
Total Non-Operating Appropriations				-		- 2			- in-	-	#DIV/0I
TOTAL APPROPRIATIONS	6	23,770	-		71	010	694,780		676,860	17,920	2.6%
ACCUMULATED DEFICIT										<u> </u>	#DIV/01
TOTAL APPROPRIATIONS & ACCUMULATED											
DEFICIT	6	23,770			71	.010	694,780		676,860	17,920	2.6%
UNRESTRICTED NET POSITION UTILIZED											
Municipality/County Appropriation		¥3				p.:			.00	¥5	#DIV/0I
Other									950		#DIV/OI
Total Unrestricted Net Position Utilized						1			1.0	140	#DIV/01
TOTAL NET APPROPRIATIONS	\$ 6	23,770 \$	-	\$ -		010	\$ 694,780	\$	676,860	\$ 17,920	2.6%
				_	7.2			-	5, 0,000	- 1/2=0	2.070

^{*} 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

31,188.50 \$

\$

3,550.50 \$34,739.00

2014 Appropriations Schedule

Cape May Housing Authority

For the Perlod

October 1, 2015

to

September 30, 2016

Current	Year Ado	pted Budget
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	Public Housing	CAl 0	Housing	Other Deserve	Total All
ADED STATE ADDRODDISTIONS	Management	Section 8	Voucher	Other Programs	Operations
OPERATING APPROPRIATIONS					
Administration	4 05 000				Å 05.000
Salary & Wages	\$ 85,000				\$ 85,000
Fringe Benefits	35,000				35,000
Legal	9,000				9,000
Staff Training	3,500				3,500
Travel	500				500
Accounting Fees	10,000				10,000
Auditing Fees	9,000				9,000
Miscellaneous Administration*	28,500				28,500
Total Administration	180,500				180,500
Cost of Providing Services					
Salary & Wages - Tenant Services					
Salary & Wages - Maintenance & Operation	90,660				90,660
Salary & Wages - Protective Services					
Salary & Wages - Utility Labor					
Fringe Benefits	60,220				60,220
Tenant Services	1,000				1,000
Utilities	176,660			85,750	262,410
Maintenance & Operation	50,900			5,340	56,240
Protective Services					*
Insurance	22,000				22,000
Payment in Lieu of Taxes (PILOT)	3,830				3,830
Terminal Leave Payments					*
Collection Losses					š
Other General Expense					9
Rents					9
Extraordinary Maintenance					*
Replacement of Non-Expendible Equipment					*
Property Betterment/Additions					
Miscellaneous COPS*					
Total Cost of Providing Services	405,270	- 6		91,090	496,360
Net Principal Payments on Debt Service in Lieu					
of Depreciation					
Total Operating Appropriations	585,770			91,090	676,860
NON-OPERATING APPROPRIATIONS					3
Net Interest Payments on Debt					
Operations & Maintenance Reserve					
Renewal & Replacement Reserve	*				
Municipality/County Appropriation					
Other Reserves					2
Total Non-Operating Appropriations					
TOTAL APPROPRIATIONS	585,770	(*		91,090	676,860
ACCUMULATED DEFICIT					
TOTAL APPROPRIATIONS & ACCUMULATED					
DEFICIT	585,770			91,090	676,860
UNRESTRICTED NET POSITION UTILIZED	303,770			51,030	570,000
Municipality/County Appropriation	8	-		25	
Other Total Unrestricted Net Position Utilized					-
rotal officestricted Net Position offized		\$	\$ -		\$ 676,860

^{*} 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

\$ 29,288.50 \$

> -

4,554.50 \$33,843.00

5 Year Debt Service Schedule - Principal

Cape May Housing Authority

				Fiscal Year	Fiscal Year Beginning in					
	Current Year (2014)	2015	2016	2017	7 2018	2019	2020	.0 Thereafter		Total Principal Outstanding
Debt Issuance #1	\$	\$	\$	\$	vs ⊕	₩	\$	\$	\$	•
Debt Issuance #2	•	×		٠	×	я	•	es	ı	•
Debt Issuance #3	*	*		¥;	•	•()	(1)	(190)	•	٠
Debt Issuance #4	•	*				•0	346	130		•
TOTAL PRINCIPAL					e	. 10	S ™ 8	2•0		
rece, ulin clinciny	•				e					2
NESS HOUS SOBSIDE	\ \strace{1}{2}	l v	S	s,	\$	S	s	\$.	\$	٠

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

	Standard & Poors	N/A	N/A
	Fitch	N/A	N/A
וושורתור חור עותוחות ביותו	Moody's	N/A	N/A
		Bond Rating	Year of Last Rating

5 Year Debt Service Schedule - Interest

Cape May Housing Authority

						Fiscal	Fiscal Year Beginning in	in					
	Current Year	Year					DO						Total Interest Payments
	(2014)	3	2015		2016		2017	2018	2019	2020		Thereafter	Outstanding
Debt Issuance #1	w	1	s,	٠	s	\$	\$		\$	S	\$	8)	\$
Debt Issuance #2	9	•		9		ù	Х	æ		×	3.	٠	
Debt Issuance #3		•		٠		ï	ř	29		% <u>.</u>	į	A	
Debt Issuance #4				•		Ü	ě	nĐ)		·	*	•	
TOTAL INTEREST		4		١		,	×	ř			•	•	
LESS: HUD SUBSIDY		не				•	(0			×		•	
NET INTEREST	45	١.	\$		\$	s	\$	•	\$	\$ -	\$ -	9	\$

2015 Net Position Reconciliation

Cape May Housing Authority

For the Period October 1, 2015

to September 30, 2016

Proposed Budget

	Total /	Total All Operations	
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	\$	1,495,904	
Less: Invested in Capital Assets, Net of Related Debt (1)		1,196,968	
Less: Restricted for Debt Service Reserve (1)		*	
Less: Other Restricted Net Position (1)		•	
Total Unrestricted Net Position (1)		298,936	
Less: Designated for Non-Operating Improvements & Repairs		*	
Less: Designated for Rate Stabilization		ŧ	
Less: Other Designated by Resolution		*	
Plus: Accrued Unfunded Pension Liability (1)		3	
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)		8	
Plus: Estimated Income (Loss) on Current Year Operations (2)		550	
Plus: Other Adjustments (attach schedule)		*	
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET		299,486	
Unrestricted Net Position Utilized to Balance Proposed Budget		(*)	
Unrestricted Net Position Utilized in Proposed Capital Budget		9.	
Appropriation to Municipality/County (3)		•	
Total Unrestricted Net Position Utilized in Proposed Budget		*	
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR (4)	\$	299,486	

(1) Total of all operations for this line item must agree to audited financial statements.

(2) Include budgeted and unbudgeted use of unrestricted net position in the current year's operations.

(3) Amount may not exceed 5% of total operating appropriations. See calculation below.

Maximum Allowable Appropriation to Municipality/County

(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.

31,189

2015 Housing Authority of the City of Cape May

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2015 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

HOUSING AUTHORITY OF THE CITY OF CAPE MAY

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

Annua	ue copy of the Capital I	Budget/Program approved	l, pursuant to N.J	udget/Program annexed heret .A.C. 5:31-2.2, along with the City of Cape May, on the 20
		o	R	
		ital Budget /Program for		Housing Authority hav cal year, pursuant to N.J.A.C
	Officer's Signature: Name: Title:	Carol Hackenberg Executive Director	nxerbe	ng .
	Address:	639 Lafayette Street Cape May, NJ 08204		
	Phone Number:	609-884-8703	Fax Number:	609-884-9028
	E-mail address	chackenberg@capemay	ha.org	

2015 CAPITAL BUDGET/PROGRAM MESSAGE

HOUSING AUTHORITY OF THE CITY OF CAPE MAY

FISCAL YEAR: FROM: OCT. 1, 2015 TO: SEPT. 30, 2016

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?

YES-Capital funds are used for operating expenses.

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?

N/A - No capital fund financing

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

NO

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

NO

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

NONE

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

YES

Add additional sheets if necessary.

2015 Proposed Capital Budget

Cape May Housing Authority

For the Period October 1, 2015 to

September 30, 2016

Funding Sources

			Renewal &			
	Estimated Total	Unrestricted Net Replacement	Replacement	Debt		Other
	Cost	Position Utilized	Reserve	Authorization	Authorization Capital Grants	Sources
Project A - Operations	\$ 71,010				\$ 71,010	
Project B Description	•6					
Project C Description	*(
Project D Description	(1)					
Project E Description	100					
Project F Description	9					
Project G Description	9					
TOTAL PROPOSED CAPITAL BUDGET	\$ 71,010	٠ \$	\$	Ş	\$ 71,010 \$	\$

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

5 Year Capital Improvement Plan

	September 30, 2016
Housing Authority	to
Cape May Housing A	October 1, 2015
	For the Period

Fiscal Year Beginning in

	Estin	Estimated Total	Cur	Current Year						
	ļ	Cost	Propo	Proposed Budget	2016	2017	2018	2019	2020	0
Project A - Operations	ς,	71,010	φ.	71,010						
Project B Description		•		¥.						
Project C Description		,		t						
Project D Description		ā								
Project E Description		,		()						
Project F Description		9		9						
Project G Description		*								
TOTAL	\$	71,010	\$	71,010 \$	9	٠,	\$	ςs. '	٠.	'

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

Cape May Housing Authority

	ē	For the Period	October 1, 2015	to	Septembe	September 30, 2016	
				Fu	Funding Sources		
				Renewal &		181	
	Estim	Estimated Total	Unrestricted Net	Replacement	Debt		
		Cost	Position Utilized	Reserve	Authorization	Authorization Capital Grants Other Sources	Other Sources
Project A - Operations	ς	71,010				\$ 71,010	
Project B Description		٠					
Project C Description		(1)					
Project D Description							
Project E Description		(
Project F Description		i					
Project G Description		•					
TOTAL	₩	71,010	\$	\$	ا د	\$ 71,010 \$	\$
Total 5 Year Plan per CB-4	∽	71,010					
Balance check		fl -	 If amount is other than zero, verify that projects listed above match projects listed on CB-4. 	o, verify that proje	ects listed above m	atch projects liste	d 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.