

Original

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

**2016 HOUSING AUTHORITY BUDGET
TRANSMITTAL PACKAGE**

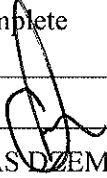
Submit all budget related materials in one package to: *Bureau of Authority Regulation Affairs, Division of Local Government Services, 101 South Broad Street, P.O. Box 803, Trenton, NJ 08625-0803*. Also submit **both** the Excel budget file a pdf copy of the budget package (introduced and adopted) to authoritiesunit@dca.nj.gov with the name of the authority in the subject line. Check the box of each item to indicate that it is included in budget or has been completed.

2016 Housing Authority Budget Document

- 2 copies of the budget document
- Authority Name and Fiscal Year are filled in
- Signature blocks on Pages C-2, C-3, C-4 and C-6 are filled in along with title, address, e-mail address, phone number and fax number
- Resolution of the Authority Commissioners approving the introduced budget is enclosed with properly recorded vote
- Proposed hearing date for adoption of Budget reflected in Authority Budget Resolution
- Authority Budget Resolution is signed with original hand written signature
- Budget Narrative and Information Section is complete

Capital Budget (Page CB-1 through CB-5)

- Authority Name and Fiscal Year are filled in
- Signature blocks on Page CB-1 are filled in along with title, address, e-mail address, phone number and fax number
- Capital Budget message is complete

Official's Signature:			
Name:	DOUGLAS DZEMA		
Title:	EXECUTIVE DIRECTOR		
Address:	650 WASHINGTON ROAD SAYREVILLE, NJ 08872		
Phone Number:	732-721-8400	Fax Number:	732-721-0062
E-mail address:	hapadoug@aol.com		

2016

SAYREVILLE

(name)

Housing Authority Budget

www.sayrevilleha.org

(Authority Web Address)

Department Of



**Community
Affairs**

Division of Local Government Services

RECEIVED
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LOCAL GOVT SERVICES

2016 HOUSING AUTHORITY BUDGET

Certification Section

2016

SAYREVILLE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM JANUARY 1, 2016 TO DECEMBER 31, 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

By: _____ Date: _____

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: Christine M. Zappacosta Date: 11/26/16

2016 PREPARER'S CERTIFICATION

SAYREVILLE


(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 1/1/2016 **TO:** 12/31/2016

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:			
Name:	THOMAS FURLONG, CPA		
Title:	DIRECTOR OF FINANCIAL OPERATIONS		
Address:	881 AMBOY AVE., PO BOX 390 PERTH AMBOY, NJ 08862		
Phone Number:	732-826-3118	Fax Number:	732-826-3111
E-mail address	tom@perthamboyha.org		

2016 APPROVAL CERTIFICATION

SAYREVILLE

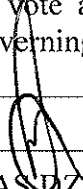
(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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 SAYREVILLE Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 10th day of November, 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:			
Name:	DOUGLAS DZEMA		
Title:	EXECUTIVE DIRECTOR		
Address:	650 WASHINGTON ROAD SAYREVILLE, NJ 08872		
Phone Number:	732-721-8400	Fax Number:	732-721-0062
E-mail address	hapadoug@aol.com		

INTERNET WEBSITE CERTIFICATION

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

- A description of the Authority's mission and responsibilities
- Commencing with 2013, the budgets for the current fiscal year and immediately preceding two prior years
- The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information
- Commencing with 2012, the complete annual audits of the most recent fiscal year and immediately two prior years
- The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- Beginning January 1, 2013, the approved minutes of each meeting of the Authority including all resolutions of the board and their committees, for at least three consecutive fiscal years
- The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

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


Name of Officer Certifying compliance

Douglas Dzema

Title of Officer Certifying compliance

Executive Director

Signature



2016 HOUSING AUTHORITY BUDGET RESOLUTION
SAYREVILLE
(Name)

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

WHEREAS, the Annual Budget and Capital Budget for the SAYREVILLE Housing Authority for the fiscal year beginning, 1/1/2016 and ending, 12/31/2016 has been presented before the governing body of the SAYREVILLE Housing Authority at its open public meeting of 11/10/2015; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$ 2,004,200, Total Appropriations, including any Accumulated Deficit if any, of \$ 2,000,500 and Total Unrestricted Net Position utilized of 0; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$ 0 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 SAYREVILLE Housing Authority, at an open public meeting held on 11/10/2015 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the SAYREVILLE Housing Authority for the fiscal year beginning, 1/1/2016 and ending, 12/31/2016 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 SAYREVILLE Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on 1/12/2016.

(Secretary's Signature)

(Date)

Governing Body Member:	Recorded Vote			
	Aye	Nay	Abstain	Absent
JORGE GONZALEZ-GOMEZ	x			
KENNETH OLCHASKEY	x			
BEVERLY RAPPLEYEA	x			
ROBERT REDFORD	x			
SHANE ROBINSON				x
PAULA DUFFY				x
RON GREEN	x			

2016 ADOPTION CERTIFICATION

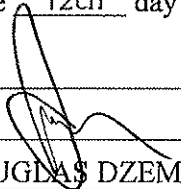
SAYREVILLE

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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 SAYREVILLE Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 12th day of, January, 2016.

Officer's Signature:			
Name:	DOUGLAS DZEMA		
Title:	EXECUTIVE DIRECTOR		
Address:	650 WASHINGTON ROAD SAYREVILLE, NJ 08872		
Phone Number:	732-721-8400	Fax Number:	732-721-0062
E-mail address	hapadoug@aol.com		

2016 ADOPTED BUDGET RESOLUTION

SAYREVILLE

(Name)

HOUSING AUTHORITY

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

WHEREAS, the Annual Budget and Capital Budget/Program for the SAYREVILLE Housing Authority for the fiscal year beginning 1/1/2016 ending, 12/31/2016 has been presented for adoption before the governing body of the SAYREVILLE Housing Authority at its open public meeting of 1/12/2016; and

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

WHEREAS, the Annual Budget as presented for adoption reflects Total Revenues of \$ 2,004,200, Total Appropriations, including any Accumulated Deficit, if any, of \$ 2,000,500 and Total Unrestricted Net Position utilized of \$ 0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$ 0 and Total Unrestricted Net Position planned to be utilized of \$ 0; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of SAYREVILLE Housing Authority, at an open public meeting held on 1/12/2016 that the Annual Budget and Capital Budget/Program of the SAYREVILLE Housing Authority for the fiscal year beginning, 1/1/2016 and, ending, 12/31/2016 is hereby adopted and shall constitute appropriations for the purposes stated; and

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

(Secretary's Signature)

1-12-16 (Date)

Table with columns: Governing Body Member, Recorded Vote (Aye, Nay, Abstain, Absent). Rows list members: JORGE GONZALEZ-GOMEZ, KENNETH OLCHASKEY, BEVERLY RAPPLEYEA, ROBERT REDFORD, SHANE ROBINSON, PAULA DUFFY, RON GREEN. Checkmarks indicate 'Aye' votes for all members.

2016 HOUSING AUTHORITY BUDGET

Narrative and Information Section

**2016 HOUSING AUTHORITY BUDGET MESSAGE &
ANALYSIS
SAYREVILLE
(Name)**

AUTHORITY BUDGET

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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

1. Complete a brief statement on the 2016 proposed Annual Budget and make comparison to the 2015 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. See Attached
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. None
3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. None
4. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. N/A
5. 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? No
6. The proposed budget must not reflect an anticipated deficit from 2016 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. N/A
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.
PHA does not have any rate structure.
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. N/A

**SAYREVILLE HOUSING AUTHORITY
VARIANCES IN EXCESS OF 10%
DECEMBER 31ST, 2016**

Operating Revenues:

Portable Revenue-(+25%) PHA added an additional 10 vouchers

Operating Appropriations:

Fringe Benefits-(-36.8%)-One of the retirees entitled to benefits had a status change to single due to the death of his spouse

Insurance-(-11.8%) Reduction in premiums due to elimination of all staff causing a reduction in workers compensation

Other General expense -(-60%)- Port out expense reduced as number of vouchers leaving jurisdiction was reduced from 2 to 1.

Equipment-(+100%) Budget increased for computer hardware.

HOUSING AUTHORITY CONTACT INFORMATION 2016

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

Name of Authority:	SAYREVILLE HOUSING AUTHORITY		
Federal ID Number:			
Address:	650 WASHINGTON ROAD		
City, State, Zip:	SAYREVILLE	NJ	08872
Phone: (ext.)	732-721-8400	Fax:	732-721-0062

Preparer's Name:	THOMAS FURLONG		
Preparer's Address:	881 AMBOY AVE., PO BOX 390		
City, State, Zip:	PERTH AMBOY	NJ	08872
Phone: (ext.)	732-826-3118	Fax:	732-826-3111
E-mail:	tom@perthamboyha.org		

Chief Executive Officer:	DOUGLAS DZEMA		
Phone: (ext.)	732-721-8400	Fax:	732-721-0062
E-mail:	hapadoug@aol.com		

Chief Financial Officer:	NONE		
Phone: (ext.)		Fax:	
E-mail:			

Name of Auditor:			
Name of Firm:	FRENIA, HOLMAN & ALLISON PC		
Address:	680 HOOPER AVENUE, BLDG. B, SUITE 201		
City, State, Zip:	TOMS RIVER	NJ	08753
Phone: (ext.)	732-797-1333	Fax:	
E-mail:			

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

SAYREVILLE

(Name)

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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

- 1) Provide the number of individuals employed in calendar year 2014 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 1
- 2) Provide the amount of total salaries and wages for calendar year 2014 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 87,270
- 3) Provide the number of regular voting members of the governing body: 7
- 4) Provide the number of alternate voting members of the governing body: 0
- 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? no If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.
- 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year 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:
 - 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? yes - see attached
 - 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? noIf 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.* No Staff
- 11) Did the Authority pay for meals or catering during the current fiscal year? no If "yes," attach a detailed list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed.
- 12) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? yes If "yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed. See Attached

**SAYREVILLE HOUSING AUTHORITY
LIST OF TRAVEL EXPENSES
JANUARY 1ST, 2015 THROUGH SEPTEMBER 30TH, 2015**

April 2015-Robert Redford attended the NJNAHRO Conference at Resorts International in Atlantic City. Expenses totaled \$1,030.80. Breakdown of expenses were as follows:

Registration-\$670.00

Hotel-\$221.80

Parking-\$5.00

Cabs-\$20.

Mileage-\$114.00

Total-\$1,030.80

September 2015-Jorge Gonzalez-Gomez and Robert Redford attended the NJAHRA Conference at resorts International in Atlantic City. To date PHA paid the registration for each totaling \$1,150. No other costs have reimbursed to date.

Casper P. Boehm, Jr.

Counsellor at Law

Phone: 609-971-7233; Fax: 609-242-1160

Courier Address: 139 Spring Lake Blvd.; Waretown, NJ 08758

Mailing Address: PO Box 669; Waretown, NJ 08758 0669

September 8, 2009

Attn: Ms. Sandy Niemiec
Commissions - Sayreville Housing Authority
650 Washington Road
Sayreville, NJ 08872

Re: Kenneth Olchaskey - Conflict of Interest

Dear Commissioners:

This letter is written in response to the request of Vice-Chairman Kenneth Olchaskey as to whether or not he has any conflict of interest in voting on payments of rentals to Section 8 landlords and in particular, those payments being made to Richard Olchaskey, his brother. I gave a verbal opinion that there was no conflict and I hereby confirm said opinion in writing.

My opinion is based upon the following facts:

1. The amount of rent for all apartment is controlled and set by the Federal Government through the Section 8 program.
2. A person eligible to receive a Section 8 subsidy must qualify based upon Federal guidelines, not guidelines set by the Sayreville Housing Authority.
3. A tenant who qualifies for said subsidy must locate their own rental unit and request that it be approved. Approval is based upon the condition of the unit and the landlord's agreement to keep the unit in good repair.
4. The tenant's share of the rental amount is 30% of the tenants gross income and the balance of the rent (fixed by the Federal Government) is the subsidy.
5. The check for the subsidy portion is sent by the Housing Authority directly to the landlord.
6. In essence, the Housing Authority acts as a pass through from the Federal Government to the tenant and earns a fee based upon its work.
7. The Housing Authority has no control over and gives no direction to the tenant as to who the landlord may be.

Please feel free to call me if you have any questions.

Very truly yours,



CASPER P. BOEHM, JR.

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE (CONTINUED)

SAYREVILLE

(Name)

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

13) Did the Authority provide any of the following to or for a person listed on Page N-4 or any other employee of the Authority:

- a. First class or charter travel no
- b. Travel for companions no
- c. Tax indemnification and gross-up payments no
- d. Discretionary spending account no
- e. Housing allowance or residence for personal use no
- f. Payments for business use of personal residence no
- g. Vehicle/auto allowance or vehicle for personal use no
- h. Health or social club dues or initiation fees no
- i. Personal services (i.e.: maid, chauffeur, chef) no

If the answer to any of the above is "yes," attach a description of the transaction including the name and position of the individual and the amount expended.

14) Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred by employees and/or commissioners during the course of Authority business and does that policy require substantiation of expenses through receipts or invoices prior to reimbursement? yes *If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses.*

15) Did the Authority make any payments to current or former commissioners or employees for severance or termination? no *If "yes," attach explanation including amount paid.*

16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses? no *If "yes," attach explanation including amount paid.*

17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by submitting its audited annual financial statements, annual operating data, and notice of material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required? N/A *If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future.*

18) Did the Authority receive any notices from the Department of Housing and Urban Development or any other entity regarding maintenance or repairs required to the Authority's facilities to bring them into compliance with current regulations and standards that it has not yet taken action to remediate? no *If "yes," attach explanation as to why the Authority has not yet undertaken the required maintenance or repairs and describe the Authority's plan to address the conditions identified.*

19) Did the Authority receive any notices of fines or assessments from the Department of Housing and Urban Development or any other entity due to noncompliance with current regulations? no *If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment.*

20) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? no *If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.*

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

SAYREVILLE

(Name)

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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

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

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

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

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

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

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

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

Reportable compensation: The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2016, the calendar year 2014 W-2 and 1099 should be used (60 days prior to start of budget year is November 1, 2015, with 2014 being the most recent calendar year ended), and for fiscal years ending June 30, 2017, the calendar year 2015 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2016, with 2015 being the most recent calendar year ended).

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

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

For the Period January 1, 2016 to December 31, 2016
Sayreville Housing Authority

Name	Title	Average Hours per Week Dedicated to Position	Position		Reportable Compensation from Authority (W-2/1099)			Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)	Total Compensation All Public Entities
			Highest Compensated Employee	Former Employee	Base Salary/ Stipend	Bonus	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)		
1 Jorge Gonzalez-Gomez	Chairperson	5	X		N/A				
2 Kenneth Olchasky	Vice Chairperson	5	X	X	N/A				
3 Beverly Rapleyea	Commissioner	5	X		N/A				
4 Robert Redford	Commissioner	5	X		N/A				
5 Shane Robinson	Commissioner	5	X		N/A				
6 Paula Duffy	Commissioner	5	X		N/A				
7 Ron Green	Commissioner	5	X		N/A				
8									
9 Douglas Dzema	Executive Director	8		X					
10									
11									
12									
13									
14									
15									
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:

40

Schedule of Health Benefits - Detailed Cost Analysis

Sayreville Housing Authority
 For the Period January 1, 2016 to December 31, 2016

	# of Covered Members (Medical & Rx) Proposed Budget	Annual Cost Estimate per Employee Proposed Budget	Total Cost Estimate Proposed Budget	# of Covered Members Current Year	Annual Cost per Employee Current Year	Total Current Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
Active Employees - Health Benefits - Annual Cost								
Single Coverage	0	\$ -	\$ -	0	\$ -	\$ -	\$ -	#DIV/0!
Parent & Child								#DIV/0!
Employee & Spouse (or Partner)								#DIV/0!
Family								#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)								#DIV/0!
Subtotal	0			0				#DIV/0!
Commissioners - Health Benefits - Annual Cost								
Single Coverage								#DIV/0!
Parent & Child								#DIV/0!
Employee & Spouse (or Partner)								#DIV/0!
Family								#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)								#DIV/0!
Subtotal	0			0				#DIV/0!
Retirees - Health Benefits - Annual Cost								
Single Coverage	2	6,800	13,600	2	6,240	12,480	1,120	9.0%
Parent & Child								#DIV/0!
Employee & Spouse (or Partner)	1	13,400	13,400	1	12,300	12,300	1,100	8.9%
Family								#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)								#DIV/0!
Subtotal	3		27,000	3		24,780	2,220	9.0%
GRAND TOTAL	3		\$ 27,000	3		\$ 24,780	\$ 2,220	9.0%

Is medical coverage provided by the SHBP (Yes or No)?
 Is prescription drug coverage provided by the SHBP (Yes or No)?

Yes
 Yes

2016 HOUSING AUTHORITY BUDGET

Financial Schedules Section

2016 Budget Summary

Sayreville Housing Authority
 For the Period January 1, 2016 to December 31, 2016

	Proposed Budget				Adopted Budget		All Operations		All Operations	
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted	#DIV/0!	#DIV/0!
REVENUES										
Total Operating Revenues	\$ -	\$ -	\$ 2,003,700	\$ -	\$ 2,003,700	\$ 1,957,000	\$ 46,700	2.4%		
Total Non-Operating Revenues	-	-	500	-	500	500	-	0.0%		
Total Anticipated Revenues	-	-	2,004,200	-	2,004,200	1,957,500	46,700	2.4%		
APPROPRIATIONS										
Total Administration	-	-	241,000	-	241,000	245,500	(4,500)	-1.8%		
Total Cost of Providing Services	-	-	1,759,500	-	1,759,500	1,712,000	47,500	2.8%		
Net: Principal Payments on Debt Service in Lieu of Depreciation	-	-	-	-	-	-	-		#DIV/0!	
Total Operating Appropriations	-	-	2,000,500	-	2,000,500	1,957,500	43,000	2.2%		
Net Interest Payments on Debt	-	-	-	-	-	-	-		#DIV/0!	
Total Other Non-Operating Appropriations	-	-	-	-	-	-	-		#DIV/0!	
Total Non-Operating Appropriations	-	-	-	-	-	-	-		#DIV/0!	
Accumulated Deficit	-	-	-	-	-	-	-		#DIV/0!	
Total Appropriations and Accumulated Deficit	-	-	2,000,500	-	2,000,500	1,957,500	43,000	2.2%		
Less: Total Unrestricted Net Position Utilized	-	-	-	-	-	-	-		#DIV/0!	
Net Total Appropriations	-	-	2,000,500	-	2,000,500	1,957,500	43,000	2.2%		
ANTICIPATED SURPLUS (DEFICIT)	\$ -	\$ -	\$ 3,700	\$ -	\$ 3,700	\$ -	\$ 3,700		#DIV/0!	

2016 Revenue Schedule

Sayreville Housing Authority

For the Period January 1, 2016 to December 31, 2016

	<i>Proposed Budget</i>				<i>Adopted Budget</i>		<i>\$ Increase (Decrease) Proposed vs. Adopted</i>	<i>% Increase (Decrease) Proposed vs. Adopted</i>
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING REVENUES								
<i>Rental Fees</i>								
Homebuyers' Monthly Payments					\$ -	\$ -	\$ -	#DIV/0!
Dwelling Rental					-	-	-	#DIV/0!
Excess Utilities					-	-	-	#DIV/0!
Non-Dwelling Rental					-	-	-	#DIV/0!
HUD Operating Subsidy					-	-	-	#DIV/0!
New Construction - Acc Section 8 Voucher - Acc Housing Voucher					-	-	-	#DIV/0!
Total Rental Fees			1,913,000		1,913,000	1,869,000	44,000	2.4%
<i>Other Operating Revenues (List)</i>								
Ports			15,000		15,000	12,000	3,000	25.0%
Mgt Fees			38,700		38,700	39,000	(300)	-0.8%
Fee for Service			36,000		36,000	36,000	-	0.0%
Frauds			1,000		1,000	1,000	-	0.0%
Total Other Revenue			90,700		90,700	88,000	2,700	3.1%
Total Operating Revenues			2,003,700		2,003,700	1,957,000	46,700	2.4%
NON-OPERATING REVENUES								
<i>Grants & Entitlements (List)</i>								
Grant #1					-	-	-	#DIV/0!
Grant #2					-	-	-	#DIV/0!
Grant #3					-	-	-	#DIV/0!
Grant #4					-	-	-	#DIV/0!
Total Grants & Entitlements					-	-	-	#DIV/0!
<i>Local Subsidies & Donations (List)</i>								
Local Subsidy #1					-	-	-	#DIV/0!
Local Subsidy #2					-	-	-	#DIV/0!
Local Subsidy #3					-	-	-	#DIV/0!
Local Subsidy #4					-	-	-	#DIV/0!
Total Local Subsidies & Donations					-	-	-	#DIV/0!
<i>Interest on Investments & Deposits</i>								
Investments			500		500	500	-	0.0%
Security Deposits					-	-	-	#DIV/0!
Penalties					-	-	-	#DIV/0!
Other Investments					-	-	-	#DIV/0!
Total Interest			500		500	500	-	0.0%
<i>Other Non-Operating Revenues (List)</i>								
Other Non-Operating #1					-	-	-	#DIV/0!
Other Non-Operating #2					-	-	-	#DIV/0!
Other Non-Operating #3					-	-	-	#DIV/0!
Other Non-Operating #4					-	-	-	#DIV/0!
Other Non-Operating Revenues					-	-	-	#DIV/0!
Total Non-Operating Revenues			500		500	500	-	0.0%
TOTAL ANTICIPATED REVENUES	\$ -	\$ -	\$ 2,004,200	\$ -	\$ 2,004,200	\$ 1,957,500	\$ 46,700	2.4%

2015 Adopted Revenue Schedule

Sayreville Housing Authority

	Adopted Budget				Total All Operations
	Public Housing Management	Section 8	Housing Voucher	Other Programs	
OPERATING REVENUES					
<i>Rental Fees</i>					
Homebuyers' Monthly Payments					\$ -
Dwelling Rental					-
Excess Utilities					-
Non-Dwelling Rental					-
HUD Operating Subsidy					-
New Construction - Acc Section 8					-
Voucher - Acc Housing Voucher			1,869,000		1,869,000
Total Rental Fees	-	-	1,869,000	-	1,869,000
<i>Other Operating Revenues (List)</i>					
Ports			12,000		12,000
Mgt Fees			39,000		39,000
Fee for Service			36,000		36,000
Frauds			1,000		1,000
Total Other Revenue	-	-	88,000	-	88,000
Total Operating Revenues	-	-	1,957,000	-	1,957,000
NON-OPERATING REVENUES					
<i>Grants & Entitlements (List)</i>					
Grant #1					-
Grant #2					-
Grant #3					-
Grant #4					-
Total Grants & Entitlements	-	-	-	-	-
<i>Local Subsidies & Donations (List)</i>					
Local Subsidy #1					-
Local Subsidy #2					-
Local Subsidy #3					-
Local Subsidy #4					-
Total Local Subsidies & Donations	-	-	-	-	-
<i>Interest on Investments & Deposits</i>					
Investments			500		500
Security Deposits					-
Penalties					-
Other Investments					-
Total Interest	-	-	500	-	500
<i>Other Non-Operating Revenues (List)</i>					
Other Non-Operating #1					-
Other Non-Operating #2					-
Other Non-Operating #3					-
Other Non-Operating #4					-
Total Non-Operating Revenues	-	-	-	-	-
Total Non-Operating Revenues	-	-	500	-	500
TOTAL ANTICIPATED REVENUES	\$ -	\$ -	\$ 1,957,500	\$ -	\$ 1,957,500

2016 Appropriations Schedule

Sayreville Housing Authority
 For the Period January 1, 2016 to December 31, 2016

	Proposed Budget				Adopted Budget			\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations		
OPERATING APPROPRIATIONS									
<i>Administration</i>									
Salary & Wages					\$ -	\$ -	\$ -		#DIV/0!
Fringe Benefits			36,000		36,000	57,000	(21,000)		-36.8%
Legal			7,000		7,000	7,000			0.0%
Staff Training			5,000		5,000	5,000			0.0%
Travel			9,000		9,000	9,000			0.0%
Accounting Fees					-	-			#DIV/0!
Auditing Fees			7,000		7,000	6,500	500		
Miscellaneous Administration*			177,000		177,000	161,000	16,000		9.9%
Total Administration			241,000		241,000	245,500	(4,500)		-1.8%
<i>Cost of Providing Services</i>									
Salary & Wages - Tenant Services					-	-	-		#DIV/0!
Salary & Wages - Maintenance & Operation					-	-	-		#DIV/0!
Salary & Wages - Protective Services					-	-	-		#DIV/0!
Salary & Wages - Utility Labor					-	-	-		#DIV/0!
Fringe Benefits					-	-	-		#DIV/0!
Tenant Services					-	-	-		#DIV/0!
Utilities					-	-	-		#DIV/0!
Maintenance & Operation					-	-	-		#DIV/0!
Protective Services					-	-	-		#DIV/0!
Insurance			7,500		7,500	8,500	(1,000)		-11.8%
Payment in Lieu of Taxes (PILOT)					-	-	-		#DIV/0!
Terminal Leave Payments					-	-	-		#DIV/0!
Collection Losses					-	-	-		#DIV/0!
Other General Expense			1,000		1,000	2,500	(1,500)		-60.0%
Rents			1,749,000		1,749,000	1,700,000	49,000		2.9%
Extraordinary Maintenance					-	-	-		#DIV/0!
Replacement of Non-Expendible Equipment			2,000		2,000	1,000	1,000		100.0%
Property Betterment/Additions					-	-	-		#DIV/0!
Miscellaneous COPS*					-	-	-		#DIV/0!
Total Cost of Providing Services			1,759,500		1,759,500	1,712,000	47,500		2.8%
Net Principal Payments on Debt Service in Lieu of Depreciation					-	-	-		#DIV/0!
Total Operating Appropriations			2,000,500		2,000,500	1,957,500	43,000		2.2%
NON-OPERATING APPROPRIATIONS									
Net Interest Payments on Debt					-	-	-		#DIV/0!
Operations & Maintenance Reserve					-	-	-		#DIV/0!
Renewal & Replacement Reserve					-	-	-		#DIV/0!
Municipality/County Appropriation					-	-	-		#DIV/0!
Other Reserves					-	-	-		#DIV/0!
Total Non-Operating Appropriations					-	-	-		#DIV/0!
TOTAL APPROPRIATIONS			2,000,500		2,000,500	1,957,500	43,000		2.2%
ACCUMULATED DEFICIT									
TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT					-	-	-		#DIV/0!
UNRESTRICTED NET POSITION UTILIZED			2,000,500		2,000,500	1,957,500	43,000		2.2%
Municipality/County Appropriation					-	-	-		#DIV/0!
Other					-	-	-		#DIV/0!
Total Unrestricted Net Position Utilized					-	-	-		#DIV/0!
TOTAL NET APPROPRIATIONS			\$ 2,000,500		\$ 2,000,500	\$ 1,957,500	\$ 43,000		2.2%

* 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 \$ - \$ - \$ 100,025.00 \$ - \$ 100,025.00

<p>SAYREVILLE HOUSING AUTHORITY STATE BUDGET PAGE F-4 MISCELLANEOUS ADMINISTRATION</p>
--

Item	Amount
Interlocal with Perth Amboy	153,750
Membership Fees/Dues	500
Telephone	2,250
Software Maintenance	4,000
HCV Inspections	10,000
Office Supplies	2,000
Postage	2,000
Advertising	500
Petty Cash	1,000
Utilities	1,000
Total	177,000

2015 Adopted Appropriations Schedule

Sayreville Housing Authority

	<i>Adopted Budget</i>				Total All Operations
	Public Housing Management	Section 8	Housing Voucher	Other Programs	
OPERATING APPROPRIATIONS					
<i>Administration</i>					
Salary & Wages					\$ -
Fringe Benefits			57,000		57,000
Legal			7,000		7,000
Staff Training			5,000		5,000
Travel			9,000		9,000
Accounting Fees					-
Auditing Fees			6,500		6,500
Miscellaneous Administration*			161,000		161,000
Total Administration	-	-	245,500	-	245,500
<i>Cost of Providing Services</i>					
Salary & Wages - Tenant Services					-
Salary & Wages - Maintenance & Operation					-
Salary & Wages - Protective Services					-
Salary & Wages - Utility Labor					-
Fringe Benefits					-
Tenant Services					-
Utilities					-
Maintenance & Operation					-
Protective Services					-
Insurance			8,500		8,500
Payment in Lieu of Taxes (PILOT)					-
Terminal Leave Payments					-
Collection Losses					-
Other General Expense			2,500		2,500
Rents			1,700,000		1,700,000
Extraordinary Maintenance					-
Replacement of Non-Expendible Equipment			1,000		1,000
Property Betterment/Additions					-
Miscellaneous COPS*					-
Total Cost of Providing Services	-	-	1,712,000	-	1,712,000
Net Principal Payments on Debt Service in Lieu of Depreciation					-
Total Operating Appropriations	-	-	1,957,500	-	1,957,500
NON-OPERATING APPROPRIATIONS					
Net Interest Payments on Debt					-
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve					-
Municipality/County Appropriation					-
Other Reserves					-
Total Non-Operating Appropriations	-	-	-	-	-
TOTAL APPROPRIATIONS	-	-	1,957,500	-	1,957,500
ACCUMULATED DEFICIT					
TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT	-	-	1,957,500	-	1,957,500
UNRESTRICTED NET POSITION UTILIZED					
Municipality/County Appropriation	-	-	-	-	-
Other	-	-	-	-	-
Total Unrestricted Net Position Utilized	-	-	-	-	-
TOTAL NET APPROPRIATIONS	\$ -	\$ -	\$ 1,957,500	\$ -	\$ 1,957,500

* 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 \$ - \$ - \$ 97,875.00 \$ - \$ 97,875.00

5 Year Debt Service Schedule - Principal

Sayreville Housing Authority

Fiscal Year Beginning in

Current Year (2015)	2016	2017	2018	2019	2020	2021	Thereafter	Total Principal Outstanding
\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
None								
Debt Issuance #2								
Debt Issuance #3								
Debt Issuance #4								
TOTAL PRINCIPAL								
LESS: HUD SUBSIDY								
NET PRINCIPAL								

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

Moody's		Standard & Poors	
Fitch			
Bond Rating			
Year of Last Rating			

5 Year Debt Service Schedule - Interest

Sayreville Housing Authority

Fiscal Year Beginning in

	Current Year (2015)	2016	2017	2018	2019	2020	2021	Thereafter	Total Interest Payments Outstanding
None	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Debt Issuance #2	-	-	-	-	-	-	-	-	-
Debt Issuance #3	-	-	-	-	-	-	-	-	-
Debt Issuance #4	-	-	-	-	-	-	-	-	-
TOTAL INTEREST	-	-	-	-	-	-	-	-	-
LESS: HUD SUBSIDY	-	-	-	-	-	-	-	-	-
NET INTEREST	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

2016
SAYREVILLE
(Name)

HOUSING
AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2016 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

SAYREVILLE


(Name)

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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

OR

It is hereby certified that the governing body of the Sayreville Housing Authority have elected **NOT** to adopt a Capital Budget /Program for the aforesaid fiscal year, pursuant to N.J.A.C. 5:31-2.2 for the following reason(s): PHA has no public housing

Officer's Signature:			
Name:	DOUGLAS DZEMA		
Title:	EXECUTIVE DIRECTOR		
Address:	650 WASHINGTON ROAD SAYREVILLE, NJ 08872		
Phone Number:	732-721-8400	Fax Number:	732-721-0062
E-mail address	hapadoug@aol.com		

2016 CAPITAL BUDGET/PROGRAM MESSAGE

SAYREVILLE Housing Authority

(Name)

FISCAL YEAR: FROM: 1/1/2016 TO: 12/31/2016

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?
2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?
3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?
4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives.
5. Describe the impact on the schedule of rents and/or user charges if the proposed capital projects are undertaken. Indicate the impact on current and future year's schedules.
6. Have the projects been reviewed and approved by HUD?

Add additional sheets if necessary.

2016 Proposed Capital Budget

Sayreville Housing Authority
 For the Period January 1, 2016 to December 31, 2016

	Estimated Total Cost	Funding Sources				
		Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants	Other Sources
None	\$ -					
Project B Description	-					
Project C Description	-					
Project D Description	-					
Project E Description	-					
Project F Description	-					
Project G Description	-					
TOTAL PROPOSED CAPITAL BUDGET	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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

Sayreville Housing Authority
 For the Period January 1, 2016 to December 31, 2016

Fiscal Year Beginning in

	Estimated Total		Current Year					
	Cost		Proposed Budget	2017	2018	2019	2020	2021
None	\$	-	\$	-	-	-	-	-
Project B Description		-		-	-	-	-	-
Project C Description		-		-	-	-	-	-
Project D Description		-		-	-	-	-	-
Project E Description		-		-	-	-	-	-
Project F Description		-		-	-	-	-	-
Project G Description		-		-	-	-	-	-
TOTAL	\$	-	\$	-	\$	-	\$	-

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

5 Year Capital Improvement Plan Funding Sources

Sayreville Housing Authority
 For the Period January 1, 2016 to December 31, 2016

	Estimated Total Cost	Funding Sources			
		Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants Other Sources
None	\$ -				
Project B Description	-				
Project C Description	-				
Project D Description	-				
Project E Description	-				
Project F Description	-				
Project G Description	-				
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -
Total 5 Year Plan per CB-4	-				
Balance check	-				

If amount is other than zero, verify that projects listed above match projects listed on CB-4.

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