DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4263-N-15]

Notice of Proposed Information **Collection for Public Comments**

AGENCY: Office of the Assistant Secretary for Public and Indian Housing, HUD. ACTION: Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: Comments due: November 3, 1997.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control Number and should be sent to: Mildred M. Hamman, Reports Liaison Officer, Public and Indian Housing, Department of Housing and Urban Development, 451 7th Street, SW, Room 4238, Washington, DC 20410-5000.

FOR FURTHER INFORMATION CONTACT: Mildred M. Hamman, (202) 708-3642. extension 4128, for copies of the proposed forms and other available documents. (This is not a toll-free number).

SUPPLEMENTARY INFORMATION: The Department will submit the proposed information collection to OMB for

review, as required by the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended).

This Notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) enhance the quality, utility, and clarity of the information to be collected; and (4) minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated collection techniques or other forms of information technology; e.g., permitting electronic submission of responses.

This Notice also lists the following information:

Title of Proposal: Operating Budget, Supporting Schedules and Board Resolution.

OMB Control Number: 2577-0026. Description of the need for the information and proposed use: The operating budget and supporting forms are submitted by the Public Housing Agency (PHA) for the low-income housing program. The operating budget provides a summary of proposed/budget receipts and expenditures by major category, as well as blocks for blocks for indicating approval of budget receipts and expenditures by PHA and HUD. The supporting forms provide the detail

of how the amounts shown on the operating budget were arrived at, as well as justification of certain specified amounts. The information is reviewed by HUD to determine if the plan of operation adopted by the PHA and amounts included therein are reasonable for the efficient and economical operation of the development(s), and the PHA is in compliance with HUD procedures to assure that sound management practices will be followed in the operation of the development. The legal authority for this information collection is section 6(c)(4) of the United States Housing Act of 1937, as amended.

Agency Form Numbers: Form HUD-52564, HUD-52566, HUD-52567, HUD-52571, HUD-52573, HUD-52574.

Members of the affected public: State, Local or Tribal Government.

Estimation of the total number of hours needed to prepare the information collection including number of respondents, frequency of response, and hours of response: 3,780 responses, one response per respondents, totaling 3,780 annual responses, 120 hours per response, 454,545 total reporting burden hours.

Status of the proposed information collection: Extension without change.

Authority: Sec. 3506 of the Paperwork Reduction Act of 1995, 44 U.S.C. Chapter 35, as amended.

Dated: August 28, 1997.

Kevin Emanuel Marchman,

Acting Assistant Secretary for Public and Indian Housing.

BILLING CODE 4210-33-M

Operating Budget

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

OMB Approval No. 2577-0026 (exp. 10/31/97)

| See page four for Instructions and the Public reporting burden | n statement. |
|--|--------------|
|--|--------------|

| a. Ty | pe of Su | ubmission | | b. Fiscal Year Ending | c. No. of months (che | eck one) | d. Type o | of HUD assisted proje | ect(s) | |
|------------|--------------|---------------------|------------------------------------|---|-----------------------|--------------------------|-----------|-----------------------|------------|-------------------|
| Ē | | nal | Revision No.: | | 12 mo. | Other (specify) | 01 🗌 F | PHA/IHA-Owned R | ental Ho | using |
| e. Na | | | gency / Indian Housing Au | thority (PHA/IHA) | | | | HA Owned Mutual | | - |
| | | | • | | | | 03 H F | PHA/IHA Leased R | ental Ho | using |
| f. Add | lress (c | city, State, zip co | de) | | | | 04 🗍 F | HA/IHA Owned T | urnkey III | Homeownership |
| | | | | | | | 05 F | PHA/IHA Leased H | omeown | ərship |
| | | | | | | | | | | |
| g. A0 | C Num | ber | | h. PAS / LOCCS Pr | oject No. | | i. HUD Fi | eld Office | | |
| | | | | | | ***** | | | | |
| j. No | . of Dwe | elling Units | k. No. of Unit Months Available | m. No. of Projec | ts | | | | | |
| | | | / Trailabio | | | | | | | |
| | | | | | Actuals | Estimates | | Requested Bu | udget Est | imates |
| | | | | | Last Fiscal | or Actual | PHA | IHA Estimates | ниг | Modifications |
| Line | Acct. | | | | Yr. 19 | Current Budget Yr. 19 | | Amount | | Amount |
| No. | No. | | Description | ו | PUM | PUM | PUM | (to nearest \$10) | PUM | (to nearest \$10) |
| Hom | obunio | rs Monthly Pa | (1) | | (2) | (3) | (4) | (5) | (6) | (7) |
| 010 | . • | Operating Ex | - | | | | | | | |
| 020 | 1 | Earned Home | | | | | | | | |
| 030 | | | laintenance Reserve | | | | | | | |
| 040 | | | Amount (sum of lines 01 | 0, 020, and 030) | | | | | | |
| 050 | T | r | eficit) in Break-Even | .,, | | | | | | |
| 060 | | | Monthly Payments - Co | ontra | | | | | | |
| | | Receipts | | | | | | | | |
| 070 | - | Dwelling Ren | tal | | | | | | | |
| 080 | 3120 | Excess Utiliti | es | | | | | | | |
| 090 | 3190 | Nondwelling | Rental | | | | | | | |
| 100 | Total | Rental Income | e (sum of lines 070, 080 | , and 090) | | | | | | |
| 110 | 3610 | Interest on G | eneral Fund Investment | ts | | | | | | |
| 120 | 3690 | Other Income | • | | | | | | | |
| 130 | | | ome (sum of lines 100, | 110, and 120) | | | | | | |
| - | - | | - Administration: | | | | | | | |
| 140 | | Administrativ | | | | | | | | <u>_</u> |
| 150 | 4130 | Legal Expens | | | | | | | | |
| 160 | 4140 | Staff Training | | | | | | | | |
| 170 | 4150 | Travel | | | | | | | | |
| 180 | 4170 | Accounting F | | -* | | | | | | |
| 190 200 | 4171 4190 | Auditing Fees | strative Expenses | | | | | | | |
| 200 210 | | | e Expense (sum of line | 140 thru line 200) | | | | | | |
| | nt Ser | | | 140 unu ime 200j | | | | | | |
| 220 | 1 | Salaries | | | | | | | | |
| 230 | 4220 | | ublications and Other S | Services | | | | | | |
| 240 | 4230 | | ts, Training and Other | | | | | | | |
| | | | es Expense (sum of lin | es 220, 230, and 240 |)) | | | | | |
| Utilit | | | • | | · | | | | | |
| 260 | 4310 | Water | | | | | | | | |
| 270 | 4320 | Electricity | | | | | | | | |
| 280 | 4330 | Gas | | | | | | | | |
| 290 | 4340 | Fuel | | | | | | | | |
| 300 | 4350 | Labor | | | | | | | | |
| 310 | 4390 | Other utilities | expense | • · · · · · · · · · · · · · · · · · · · | | | | | | |
| 320 | Total | Utilities Expe | nse (sum of line 260 th | ru line 310) | | | | | | |

| Namę | of PHA | / IHA | | . F | Fiscal Year Endi | ng | | | |
|-------------|--------------|---|--------------------|-------|----------------------------------|------------|-------------------------------------|------------|------------------------------------|
| . | | | Actuals | TĽ | Estimates | | Requested Bu | idget Esti | mates |
| | | | Last Fiscal Yr. | | or Actual | PHA/ | IHA Estimates | HUD | Modifications |
| Line No. | Acct. No. | Description (1) | 19 PUM (2) | | Irrent Budget 19 IM (3) | PUM (4) | Arnount (to nearest \$10) (5) | PUM (6) | Amount (to nearest \$10) (7) |
| Ordi | nary Ma | aintenance and Operation: | 1 | | | | | | |
| 330 | 4410 | Labor | | | | | | | |
| 340 | 4420 | Materials | | | | | | | |
| 350 | 4430 | Contract Costs | | | | | | | - |
| 360 | Total | Ordinary Maintenance & Operation Expense (lines 330 to 350) | | | | | | | |
| Prote | ective S | Services: | | | | | | | |
| 370 | 4460 | Labor | | | | | | | |
| 380 | 4470 | Materials | | | | | | | |
| 390 | 4480 | Contract costs | | ļ | | | | | |
| 400 | Total | Protective Services Expense (sum of lines 370 to 390) | | | | | | | |
| Gene | eral Exp | pense: | | | | | | | |
| 410 | 4510 | Insurance | | | | | | | |
| 420 | 4520 | Payments in Lieu of Taxes | | | | | | | |
| 430 | 4530 | Terminal Leave Payments | | | | | | | |
| 440 | 4540 | Employee Benefit Contributions | | | | | | | |
| 450 | 1 | Collection Losses | | | | | | | |
| 460 | | Other General Expense | | | | | | | |
| 470 | | General Expense (sum of lines 410 to 460) | | | | | | | |
| 480 | | Routine Expense (sum of lines 210, 250, 320, 360, 400, and 470) | | | | | | | |
| | | ased Dwellings: | | | | | | • | |
| 490 | | Rents to Owners of Leased Dwellings | | | | | | | |
| 500 | | Operating Expense (sum of lines 480 and 490) | | | | | | | |
| | 4 1 | Expenditures: | | | | | | | |
| 510 | | Extraordinary Maintenance | | | | | | | |
| 520 | | Replacement of Nonexpendable Equipment | | | | | | | |
| 530 | | Property Betterments and Additions | | | | | | | |
| 540 | | Nonroutine Expenditures (sum of lines 510, 520, and 530) | | | ···- | | | | |
| 550 | | Operating Expenditures (sum of lines 500 and 540) | | - | | | | | |
| | | Adjustments: | | | | | | | |
| | | Prior Year Adjustments Affecting Residual Receipts | | + | | | | | |
| | r Expe | nditures: | | | | | | | |
| 570 | | Deficiency in Residual Receipts at End of Preceding Fiscal Yr. | | + | | | | | |
| 580 | Iotai | Operating Expenditures, including prior year adjustments and other expenditures (line 550 plus or minus line 560 plus line 570) | | | | | | | |
| 590 | | Residual Receipts (or Deficit) before HUD Contributions and provision for operating reserve (line 130 minus line 580) | | | | | | | |
| HUD | Contri | butions: | | | | | | | |
| 600 | 8010 | Basic Annual Contribution Earned - Leased Projects:Current Year | | | | | | | |
| 610 | 8011 | Prior Year Adjustments - (Debit) Credit | | | | | | | |
| 620 | Total | Basic Annual Contribution (line 600 plus or minus line 610) | | | | | | | |
| 630 | 8020 | Contributions Earned - Op. Sub: - Cur. Yr.(before year-end adj) | | | | | | | |
| 640 | | Mandatory PFS Adjustments (net): | | _ | | | | | |
| 650 | | Other (specify): | | | | | | | |
| 660 | | Other (specify): | | | | | | | |
| 670 | | Total Year-end Adjustments/Other (plus or minus lines 640 thru 660 |) | | | | | | |
| 680 | 8020 | Total Operating Subsidy-current year (line 630 plus or minus line 670) | | _ | | | | | |
| 690 | Total | HUD Contributions (sum of lines 620 and 680) | | | | | | | |
| 700 | | Residual Receipts (or Deficit) (sum of line 590 plus line 690) Enter here and on line 810 | | | | | | | |

| Nama | of PH | A / IHA | Fiscal Year End | ing | |
|------|-------|---|-----------------|-------------------|-------------------|
| | | | | | |
| | | Operating Reserve | | PHA/IHA Estimates | HUD Modifications |
| | | Part I - Maximum Operating Reserve - End of Current Budget Year | | | |
| 740 | 2821 | PHA / IHA-Leased Housing - Section 23 or 10(c) 50% of Line 480, column 5, form HUD-52564 | | | |

| erating Reserve at End of Previous Fiscal Year - Actual for FYE (date): |
|---|
| |
| vision for Operating Reserve - Current Budget Year (check one) Estimated for FYE Actual for FYE |
| arating Reserve at End of Current Budget Year (check one) Estimated for FYE Actual for FYE |
| vision for Operating Reserve - Requested Budget Year Estimated for FYE er Amount from line 700 |
| arating Reserve at End of Requested Budget Year Estimated for FYE m of lines 800 and 810) |
| sh Reserve Requirement % of line 480 |
| |

Comments:

| PHA / IHA Approval | Name | | | |
|---------------------------|-----------|-------------|------|--|
| | Title | | | |
| | Signature | | Date | |
| Field Office Approval | Name | | | |
| | Title | | | |
| | Signature | | Date | |
| Previous editions are obs | olete | Page 3 of 4 | | form HUD-52564 (3/95) ref. Handbook 7475.1 |

Public reporting burden for this collection of information is estimated to average 116 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collecton displays a valid OMB control number.

This information is required by Section 6(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income housing program and provides a summary of proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the information to determine if the operating plan adopted by the PHA and the amounts are reasonable and that the PHA is in compliance with procedures prescribed by HUD. Responses are required to obtain benefits. This information does not lend itself to confidentiality.

Instructions for Preparing Form HUD-52564, Operating Budget

Separate Operating Budgets must be prepared for each separate Annual Contributions Contract (ACC). However, the supporting documentation can be combined for each Turnkey III project within an ACC, provided it clearly separates the cost by program and/or ACC number. Prepare all of the supporting documentation (Forms HUD-52573, HUD-52566 and HUD-52571) prior to finalizing the Operating Budget.

The headings for items a. through m. are self-explanatory.

Columns:

Column (2): Obtain actual P.U.M. amounts from the Statement(s) of Operating Receipts and Expenditures (Form HUD-52599) for the year preceding the current budget year.

Column (3): Include the actual (if available) or estimated PUM amounts for the current budget year.

Columns (4) and (5): Enter amounts on applicable lines from HUD Schedules and/or HA worksheets in column (5). After completing column (5) compute the P.U.M. amounts for Column (4) by dividing each figure in Column (5) by the No. of Unit Months of Availablity, item k.

Columns (6) and (7): Leave blank. If HUD modifies the HA estimates as a condition for approval, HUD will complete these columns and return a copy to the HA.

Line Items

Lines 010 through 060 are specific to the Turnkey III Owned Homeownership Program. These lines correspond to accounts 7710 through 7790, see Accounting Handbook 7510.1.

Line 460: Use this line, if applicable, for showing estimated interest on Administrative and Sundry Loans.

Line 490: This line is specific to the Section 23, Leased Rental Program.

Line 560: Use this line, if applicable, only in connection with budget revisions.

Line 570: Use this line, if applicable, for such items as carry-overs of unabsorbed deficiencies in residual receipts from prior years.

Line 630: Operating Subsidy Eligibility for the requested year before year end adjustments.

Lines 640 to 660: Year end adjustments to be funded in the requested budget year.

Line 700: An estimated decrease cannot be more than the amount available in the operating reserve at the beginning of the requested budget year (line 800).

Special Instructions, Budget Revisions

Budget revisions must be approved by the end of the PHA fiscal year.

When using this form for budget revisions, the following additional instructions are applicable:

No changes are to be made to Column (2) or Column (3).

No changes are to be made in the amount for Operating Subsidy Eligibility before year end adjustments (Line 630, or in Part I - Maximum Operating Reserve-End of Current Budget Year.

Operating Reserves

Operating reserves are calculated by individual Annual Contributions Contract except that the operating reserves for Section 23 Leased Housing Projects, Turnkey III Homeownership Projects (HA Owned or Leased) must be separately calculated and reported by project.

Line 780: Enter amount as of the last previous fiscal year (year preceding current budget year).

Line 790:

a. Enter estimated amount, if original budget, or actual amount, if revised budget.

b. Enter negative balance in parentheses. (The negative balance may not exceed the amount on line 780.)

Line 800: Enter sum of lines 780 and 790.

Line 810:

a. Enter estimated amount.

b. Enter negative balance in parentheses. (The negative balance may not exceed the amount on line 800.)

Line 820: Enter sum of lines 800 and 810.

Line 830: Enter percent of routine operating expenses (or minimum dollar amount) currently used by HUD as a performance measure to evaluate the cash requirements and/or operating reserve adequacy.

| Operating Budget Schedule of All Positions and Salaries ^{See back of page for Instructions and Public reporting burden statement} | | J.S. Departr and Urban D Office of Put | U.S. Department of Housing and Urban Development Office of Public and Indian Housing | sing I Housing | | | | | OMB Appre | UMB Approval No. 2577-0026 (Exp. 10/31/97) |
|---|-----------------------------------|--|--|-------------------|---|------------------|-----------------------|-----------------------------------|---|--|
| Name of Housing Authority | Locality | | | | | | | | Fiscal Year End | |
| | Present | Requeste | Requested Budget Year | | | | Allocation | Allocation of Salaries by Program | Program | |
| Position Title and Name | Salary Rate | | Estimated Payment | ent | | | | | | |
| notion | As of (date) | Salary Rate | No. Months Amount | | Management Modernization Development | Development | Section 8 Programs | Other Programs | Longevity | Method of Allocation |
| (1) (1a) | (2) | (3) | (4) (5) | (9) | 6 | (8) | (6) | (10) | (11) | (12) |
| | | | | | | | | | | |
| To the best of my knowledge, all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate, Warning: HUD will prosecute false claims and statements. Conviction may result in orininal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012, 31 U.S.C. 3729, 3802) | accompanimer alties. (18 U.S.(| nt herewith, is 0. 1001, 1010, | true and accura 1012;31 U.S.C | | Executive Director or Designated Official | or Designated Of | licial | | Date | |
| | | | | | | | | | The second | form HUD-52566 (3/95) |

| Occupancy Section. General Maintenance, etc. All seasonal temporary | No. Months: For each position listed enter the estimated equivalent | | |
|--|---|---|----|
| Occupancy Section, General Maintenance, etc. All seasonal temporary | No. Months: For each position listed, enter the estimated equivalent | | |
| labor may be combined on a single line designated "Casual Labor" or | number of full months of employment in the Requested Budget Year. | Note: This Column should also include the allocation of salary costs of | * |
| "Temporary Labor." | | shared resources, 1.e., where staff or other resources are shared between | ~ |
| : : : : : : : : : : : : : : : : : : : | Amount: For each position listed, enter the estimated amount of salary | a HA program and a program administered by an identity-of-interest non- | |
| Column (1a): For each position or group of positions as appropriate, enter an account designation as follows: | to be paid during the Requested Budget Year. | profit entity, the salary cost must be equitably allocated to each program. | |
| | Allocation of Salaries by Program: Columns (6) through (11) are to be | Column (11)-Other: For each position listed, enter the amount of salary | |
| AN-T Administrative-Nontechnical positions | completed by Housing Authorities who administer programs other than Man- | allocable as a result of longevity compensation. | |
| A-T Administrative-Technical positions | agement. | Column(12)–Mathod of Allocation : Eor each nosition or aroun of nositions | |
| | Column (6)-Management: For each position listed enter the amount of | listed. show the method used for allocation the salaries listed | • |
| - | salary allocable to management related activities. | | |
| U Utilities Labor positions | | On the basis of information shown on this schedule complete Form HUD- | |
| O Other nositions such as staff attorneys and architectural and | Column (7)-Modernization Programs: For each position listed enter the | 52573, Summary of Budget Data and Justifications, Summary of Staffing and | - |
| | amount of salary allocable to Modernization (CIAP/Comprehensive Grant | Salary Data section, and Form HUD-52564, Operating Budget. | |
| ing plans and specifications for extraordinary maintenance jobs | r rogram, related activities. The Housing Authonity must have an approved CIAP/Comprehensive Plan budget with funds approved under Develonment | | |
| or for betterments and additions. | Accounts 1410.1 and 1410.2. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | form HUD-52566 (3/95) | 1- |
| | Page 2 of 2 | ref Handbook 7475.1 | |
| | | | |

| ng Budget | e of Nonroutine Expenditures |
|--------------|------------------------------|
| Operating Bu | Schedule of N |

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

OMB Approval No. 2577-0026 (Exp. 10/31/97)

| Hous | Local Housing Authority | | Locality | | | | | Fiscal Year Ending | Ending | | |
|----------------------------------|---|-------------------------------------|---|--|--|--|---|--------------------|----------------------------|------------------|---|
| | Extraordinary Maintenance and Betterments and Add | dditions (Excludir | and Additions (Excluding Equipment Additions) | (suo | | | Equipment Requirements | irements | | | |
| | | | | Percent | Requested Budget Year | dget Year | | | Req | Requested Budget | dget |
| Work Project Number (1) | Description of Work Project (List Extraordinary Maintenance and Beiterments and Additions separately) (2) | Housing Project Number (3) | Total Estimated Cost (4) | Complete Current Budget Year End (5) | Estimated Expenditure In Year (6) | Percent Complete Year End (7) | Description of Equipment Items (List Replacements and Additions separately) (8) | | No. of Item (9) (10) | | Estimated Expenditure In Year (11) |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | · | | | |
| | | | | | | | | | | | |

| i; and completing and reviewing the | enditures, approval of budgeted rec prescribed by HUD. Responses are |
|--|---|
| hering and maintaining the data neede er. | f proposed/budgeted receipts and exp PHA is in compliance with procedures |
| ublic reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed; and completing and reviewing the viewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection unless that collection displays a valid OMB control number. | Act of 1937. The information is the operating budget for the low-income housing program and provides a summary of proposed/budgeted receipls and expenditures, approval of budgeted rec views the information to determine if the operating plan adopted by the PHA and the amounts are reasonable and that the PHA is in compliance with procedures prescribed by HUD. Responses an fiality. |
| luding the time for reviewing instruction ection of information unless that collection | ating budget for the low-income housi perating plan adopted by the PHA and |
| o average 45 minutes per response, inc on is not required to respond to, a coll | cct of 1937. The information is the oper lews the information to determine if the c ality. |
| ublic reporting burden for this collection of information is estimated to information. This agency may not conduct or sponsor, and a pers | This information is required by Section 6(c)(4) of the U.S. Housing Ac expenditures, and justification of certain specified amounts. HUD revie to obtain benefits. This information does not lend itself to confidential |
| Public reporting burden for this of information. This agency ma | This information is required by expenditures, and justification o to obtain benefits. This informa |

receipts and are required

ne collectior

Instructions for Preparation of Form HUD-5256

Prepare this form to describe each work project, or job, of extraordinary maintenance, property betterments and additions, and replacement or addition of nonexpendable equipment scheduled for accomplishment in whole or in part during the Requested Budget Year.

Identification: The identification boxes at the top of the form are self explanatory.

Extraordinary Maintenance and Betterments and Additions

Column (1) Work Project Numbers: For work projects to be started during the Requested Budget Year assign consecutive numbers to identify them with the classification of work and the LHA Fiscal Year, and enter the numbers in this column. For example: For Extraordinary Maintenance jobs to be started during the LHA Fiscal Year 1966, the number would be EM-66-1, EM-66-2, etc. and for Betterments and Additions jobs the numbers would be BA-66-1, BA-66-2, etc. Column (2) Description: Describe each work project concisely, but sufficiently to give a full understanding of fits nature and scope. For work projects started in previous years, point out any significant changes in nature and scope. Column (3) Housing Project Number: Opposite each work project number and description enter the number of the Housing Projects at which the work is located. Column (4) Total Estimated Cost: Enter a realistic estimate of the total cost of each work project based, to the extent practicable, on a thorough study of detailed specification of the work. If any part of the work is to be performed by Project staff the estimated cost should include the appropriate portion of their salaries. If there has been a change in the total estimated cost of work started in previous years, the revised total description column.

Column (5) Percent Complete Current Budget Year End: For work projects started in previous years, enter a realistic estimate of the percentage of work that will have been completed at the end of the Current Budget Year. This percentage may or may not correspond to the percentage of total estimated cost that will have been expended at that time.

Requested Budget Year:

Column (6) Estimated Expenditure In Year: For each work project enter a realistic estimate of the portion of Total Estimated Cost that will be expended during the Requested Budget Year. These estimates should include the appropriate portion of salaries of Project staff which is to perform any of the work. Column (7) Percent Complete Year End: For each work project enter a realistic estimate of the percentage of work that will have been completed at the end of the Requested Budget Year. This percentage may or may not correspond to the percentage of total estimated cost that will have been expended at that time.

Equipment Requirements

Column (8) Description: Under a heading "Replacement of Equipment" list each type of nonexpendable equipment to be replaced, and separately under a heading "Property Additions" list each new type of nonexpendable equipment to be acquired. Give a brief description of each type and identify the Housing Project to which it is to be assigned.

Column (9) Number of items: Enter the number of items of each type of equipment to be purchased for each Housing Project designated ir Column (8). Column (10) Item Cost: Enter estimated net cost of each item of equipment, e.g. purchase price, less discounts, trade-in allowances, and/or proceeds from disposition of equipment being replaced. Column (11) Estimated Expenditure In Year: For each type of equipment, enter the estimated cost obtained by multiplying the number of items in Column 9 by the item cost in Column 10. Also, enter total cost of equipment listed under each of the headings "Replacement of Equipment" and "Property Additions."

Totals

ы.

- The total in Column 6 for Extraordinary Maintenance should be entered on Line 510, Column 5, of form HUD-52564.
- b. The total in Column 11 for Replacement of Equipment should be entered on Line 520, Column 5, of form HUD-52564.
- The sum of the totals in Columns 6 and 11 for Property Betterments and Additions should be entered on Line 530, Column 5, of form HUD-52564.

form HUD-52567 (3/95) ref Handbook 7475.1

Page 2 of 2

Operating Budget

Schedule of Administration Expense Other Than Salary U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB Approval No. 2577-0026 (Exp. 10/31/97)

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collecton displays a valid OMB control number.

This information is required by Section 6(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income housing program and provides a summary of proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the information to determine if the operating plan adopted by the PHA and the amounts are reasonable and that the PHA is in compliance with procedures prescribed by HUD. Responses are required to obtain benefits. This information does not lend itself to confidentiality.

| Name | of Housing Authority: | Locality: | | Fiscal Ye | ar End: | |
|------|--|--------------|-------------------|--------------------|------------------|--------------|
| | | | | | | |
| | (1) Description | (2) Total | (3) Management | (4) Development | (5) Section 8 | (6) Other |
| 1 | Legal Expense (see Special Note in Instructions) | | | | | |
| 2 | Training (list and provide justification) | | | | | |
| 3 | Travel Trips To Conventions and Meetings (list and provide justification) | | | | | |
| 4 | Other Travel: Outside Area of Jurisdiction | | | | | |
| 5 | Within Area of Jurisdiction | | | | | |
| 6 | Total Travel | | | | | |
| 7 | Accounting | | | | | |
| 8 | Auditing | | | | | |
| 9 | Sundry Rental of Office Space | | | | | |
| 10 | Publications | | | | | |
| 11 | Membership Dues and Fees (list organization and amount) | | | | | |
| 12 | Telephone, Fax, Electronic Communications | | | | | |
| 13 | Collection Agent Fees and Court Costs | | | | | |
| 14 | Administrative Services Contracts (list and provide justification) | | | | | |
| 15 | Forms, Stationary and Office Supplies | | | | | |
| 16 | Other Sundry Expense (provide breakdown) | | | | | |
| 17 | Total Sundry | | | | | |
| 18 | Total Administration Expense Other Than Salaries | | | | | |
| | | | | | | |

To the best of my knowledge, all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of authorized representative & Date:

Х

Justification/Breakdown:

Instructions for Preparation of Form HUD-52571

Prepare this form to reflect detailed estimates of Administration Expense, other than salaries, and the distribution to all programs administered by the Housing Authority.

The identification boxes in the upper right hand corner are selfexplanatory.

1. Legal Expense: Enter in Column (2), Line 1 the estimated cost of legal service. Enter in Columns (3) through (6) the pro rata shares of amounts in Column (2) chargeable to programs administered by the Housing Authority.

Special Note: The amount entered on Form HUD-52564 should also include salaries of Staff Attorneys as shown on Form HUD-52566 and included on line for "Other" in the Summary of Staffing and Salary Data section of Form HUD-52573.

2. Training: List and provide justification for all training.

Travel Expense: Justification must be provided for travel.

3. Trips to Conventions and Meetings: Under Justification/Breakdown, List each convention and meeting to be attended by commissioners and staff, with the location. Enter the number of persons expected to attend and show the aggregate number of travel days and the estimated total cost of each trip including subsistence allowance, cost of transportation, and reimbursable miscellaneous expenses. Enter the sum of the total costs of all trips in Column (2). Enter in Columns (3) through (6) the pro rata shares of amounts in Column (2) chargeable to programs administered by the Housing Authority.

4. Other Travel: Outside Area of Jurisdiction: Enter in Column (2), Line 4 the estimated cost for travel by commissioners and staff, including subsistence, transportation, and reimbursable miscellaneous expenses. Follow instructions 3 above for columns (3) through (6).

5. **Other Travel: Within Area of Jurisdiction**: Enter in Column (2), Line 5 the estimated cost for travel, including fixed monthly allowances for reimbursement on a mileage basis for use of privately owned automobiles; and reimbursement for authorized use of local public transportation. Follow instructions 3 above for columns (3) through (6). 6. **Total Travel:** Sum Lines 3, 4, and 5 for Columns (2) through (7) and enter total for each on Line 6 "Total Travel."

7, thru 16. Accounting, Auditing and Sundry: Enter the estimated total for all programs in Column (2) for each item of expense in Lines 7 through 16. In Columns (3) through (6) enter the pro rata share of amounts shown in Column (2) chargeable to all programs administered by the Housing Authority.

14. Administrative Services Contracts: List and provide justification for all contracts (excluding accounting contracts).

16. All Other Sundry Expense: List all items identified under this expense.

18. Total Administration Expense Other Than Salaries:

Add the amounts on the following Lines:

| Line 1 | Legal Expense | | |
|--|---------------|--|--|
| Line 2 | Training | | |
| Line 6 | Total Travel | | |
| Line 7 | Accounting | | |
| Line 8 | Auditing | | |
| Line 17 | Total Sundry | | |
| On Line 18 enter the appropriate total | | | |

On Line 18 enter the appropriate totals in Columns (2) through (6). The amount shown in Column (3), lines 1, 2, 6, 7, 8, and 17, should be carried forward to Lines 150 through 200 of Form HUD-52564, Operating Budget.

Operating Budget

Summary of Budget Data and Justifications

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB Approval No. 2577-0026 (Exp. 10/31/97)

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collecton displays a valid OMB control number.

This information is required by Section 6(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income housing program and provides a summary of proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the information to determine if the operating plan adopted by the PHA and the amounts are reasonable and that the PHA is in compliance with procedures prescribed by HUD. Responses are required to obtain benefits. This information does not lend itself to confidentiality.

| Name of Local Housing Authonity: | Locality: | Fiscal Year Ending: |
|----------------------------------|-----------|---------------------|
| | | . 19 |
| | | , 10 |

Operating Receipts

Dwelling Rental: Explain basis for estimate. For HUD-aided low-rent housing, other than Section 23 Leased housing, state amount of latest available total HA monthly rentroll, the number of dwelling units available for occupancy and the number accepted for the same month end. Cite HA policy revisions and economic and other factors which may result in a greater or lesser average monthly rent roll during the Requested Budget Year. For Section 23 Leased housing, state the number of units under lease, the PUM lease price, and whether or not the cost of utilities is included. If not included, explain method for payment at utility costs by HA and/or tenant.

Excess Utilities: (Not for Section 23 Leased housing.) Check appropriate spaces in item 1, and explain "Other". Under item 2, explain basis for determining excess utility consumption. For example, Gas; individual check meters at OH-100-1, proration of excess over allowances at OH-100-2, etc. Cite effective date of present utility allowances. Explain anticipated changes in allowances or other factors which will cause a significant change in the total amount of excess utility charges during the Requested Budget Year.

| 1. Utility Services Surcharged: | Gas 🗌 | Electricity | Other | (Specify) |
|---------------------------------|-------|-------------|-------|-----------|
| 2. Comments | | | | |
| | | | | |

Nondwelling Rent: (Not for Section 23 Leased housing.) Complete Item 1, specifying each space rented, to whom, and the rental terms. For example: Community Building Space - Nursery School - \$50 per month, etc. Cite changes anticipated during the Requested Budget Year affecting estimated Non-dwelling Rental Income.

| 1. Space Rented | | To Whom | Rental Terms | |
|-----------------|--|---------|---------------------------------------|--|
| | ······································ | | · · · · · · · · · · · · · · · · · · · | |
| | | | | |
| | | | | |
| 2. (| Comments | | | |

Previous editions are obsolete

Interest on General Fund Investments: State the amount of present General Fund investment and the percentage of the General Fund it represents. Explain circumstances such as increased or decreased operating reserves, dwelling rent, operating expenditures, etc., which will affect estimated average monthly total investments in the Requested Budget Year. Explain basis for distribution of interest income between housing programs.

Other Comments On Estimates of Operating Receipts: Give comments on all other significant sources of income which will present a clear understanding of the HA's prospective Operating Receipts situation during the Requested Budget Year. For Section 23 Leased housing explain basis for estimate of utility charges to tenants.

Operating Expenditures

Summary of Staffing and Salary Data

- Complete the summary below on the basis of information shown on form HUD-52566, Schedule of All Positions and Salaries, as follows:
- Column (1) Enter the total number of positions designated with the corresponding account line symbol as shown in Column (1), form HUD-52566.

Column (2) Enter the number of equivalent full-time positions allocable to HUD-aided housing in management. For example: A HA has three "A-NT" positions allocable to such housing at the rate of 80%, 70%, and 50% respectively. Thus, the equivalent full-time positions is two. (8/10 + 7/10 + 5/10).

Enter the portion of total salary expense shown in Column (5) or Column (6), form HUD-52566, allocable to HUD-aided housing in management, other than Column (3) Section 23 Leased housing.

Column (4) Enter the portion of total salary expense shown in Column (5) or Column (10), form HUD-52566, allocable to Section 23 Leased housing in management.

Enter the portion of total salary expense shown in Column (5) or Column (7), form HUD-52566, allocable to Modernization programs (Comprehensive Column (5) Improvement Assistance Program or Comprehensive Grant Program).

Cloumn (6) Enter the portion of total salary expense shown in Column (5) or Column (9), form HUD-52566, allocable to Section 8 Programs.

Note: The number of equivalent full-time positions and the amount of salary expense for all positions designated "M" on form HUD-52566 must be equitably distributed o account lines Ordinary Maintenance and Operation-Labor, Extraordinary Maintenance Work Projects, and Betterments and Additions Work Projects.

| | | HUD-Aided Management Program | | | | |
|--|-------------------------------------|-------------------------------|-------------------|--|----------------------------------|-----------------------------|
| | Total Number of Positions (1) | Equivalent | Salary Expense | | | |
| Account Line | | Full-Time Positions (2) | Management (3) | Section 23 Leased Housing Only (4) | Modernization Programs (5) | Section 8 Program (6) |
| Administration—Nontechnical Salaries ¹ | | | | | | |
| Administration—Technical Salaries ¹ | | | | | | |
| Ordinary Maintenance and OperationLabor ¹ | | | | | | |
| Utilities-Labor ¹ | | | | | | |
| Other (Specify) (Legal, etc.) ¹ | | | | | | |
| Extraordinary Maintenance Work Projects ² | | | | | | |
| Betterments and Additions Work Projects ² | | | | | | |

1 Carry forward to the appropriate line on HUD-52564, the amount of salary expense shown in Column (3) on the corresponding line above. Carry forward to the

appropriate line on HUD-52564 (Section 23 Leased Housing Budget), the amount of salary expense shown in Column (4) on the corresponding line above. 2 The amount of salary expense distributed to Extraordinary Maintenance Work Projects and to Betterments and Additions Work Projects is to be included in the cost of each individual project to be performed by the HA Staff, as shown on form HUD-52567.

Previous editions are obsolete

Specify all proposed new positions and all present positions to be abolished in the Requested Budget Year. Cite prior HUD concurrence in proposed staffing changes or present justification for such changes. Cite prior HUD concurrence in proposed salary increases for Administration Staff or give justification and pertinent comparability information. Cite effective date for current approved wage rates (form HUD-52158) and justify all deviations from these rates.

Travel, Publications, Membership Dues and Fees, Telephone and Telegraph, and Sundry: In addition to "Justification for Travel to Conventions and Meetings" shown on form HUD-52571, give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for these accounts in the Current Budget Year. Explain basis for allocation of each element of these expenses.

Utilities: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for each utility service in the Current Budget Year. Describe and state estimated cost of each element of "Other Utilities Expense."

Ordinary Maintenance & Operation—Materials: Give an explanation of substantial Requested Budget Year estimated increases over the PUM rate of expenditures for materials in the Current Budget Year.

Ordinary Maintenance & Operation—Contract Costs: List each ordinary maintenance and operation service contracted for and give the estimated cost for each. Cite and justify new contract services proposed for the Requested Budget Year. Explain substantial Requested Budget Year increases over the PUM rate of expenditure for Contract Services in the Current Budget Year. If LHA has contract for maintenance of elevator cabs, give contract cost per cab. Insurance: Give an explanation of substantial Requested Budget Year estimated increases in the PUM rate of expenditures for insurance over the Current Budget Year. Cite changes in coverage, premium rates, etc.

Employee Benefit Contributions: List all Employee Benefit plans participated in. Give justification for all plans to be instituted in the Requested Budget Year for which prior HUD concurrence has not been given.

Collection Losses: State the number of tenants accounts receivable to be written off and the number and total amount of all accounts receivable for both present and vacated tenants as of the month in which the estimate was computed.

Extraordinary Maintenance, Replacement of Equipment, and Betterments and Additions: Cite prior HUD approval or give justification for each nonroutine work project included in the Requested Budget and for those for future years which make up the estimate on form HUD-52570. Justifying information incorporated on or attached to form HUD-52567 need not be repeated here.

Contracts: List all contracts, other than those listed on page 3 of this form under Ordinary Maintenance & Operation (OMO). Cite the name of the contractor, type of contract, cost of contract, and contract period. Justification must be provided for all contract services proposed for the Requested Budget Year (RBY). Explain substantial RBY increases over the PUM rate of expenditure for these contracts in the Current Budget Year.

PHA/IHA Board Resolution

Approving Operating Budget or Calculation of Performance Funding System Operating Subsidy U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB Approval No. 2577-0026 (Exp. 10/31/97)

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collecton displays a valid OMB control number.

This information is required by Section 6(c)(4) of the U.S. Housing Act of 1937. The information is the operating budget for the low-income housing program and provides a summary of proposed/budgeted receipts and expenditures, approval of budgeted receipts and expenditures, and justification of certain specified amounts. HUD reviews the information to determine if the operating plan adopted by the PHA and the amounts are reasonable and that the PHA is in compliance with procedures prescribed by HUD. Responses are required to obtain benefits. This information does not lend itself to confidentiality.

Acting on behalf of the Board of Commissioners of the below-named Public Housing Agency (PHA)/Indian Housing Authority (IHA), as its Chairman, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the Board's approval of (check one or more as applicable):

| | | (date) | |
|---------|---|----------|-------|
| | Operating Budget Submitted on: | | |
| | Operating Budget Revision Submitted on: | | |
| | Calculation of Performance Funding System Submitted on: | | |
| | Revised Calculation of Performance Funding System Submitted on: | <u> </u> | |
| I certi | fy on behalf of the: (PHA/IHA Name) | | that: |

- 1. All regulatory and statutory requirements have been met;
- 2. The PHA has sufficient operating reserves to meet the working capital needs of its developments;
- 3. Proposed budget expenditures are necessary in the efficient and economical operation of the housing for the purpose of serving lowincome residents;
- 4. The budget indicates a source of funds adequate to cover all proposed expenditures;
- 5. The calculation of eligibility for Federal funding is in accordance with the provisions of the regulations;
- 6. All proposed rental charges and expenditures will be consistent with provisions of law;
- 7. The PHA/IHA will comply with the wage rate requirements under 24 CFR 968.110(e) and (f) or 24 CFR 905.120(c) and (d);
- 8. The PHA/IHA will comply with the requirements for access to records and audits under 24 CFR 968.110(i) or 24 CFR 905.120(g); and
- 9. The PHA/IHA will comply with the requirements for the reexamination of family income and composition under 24 CFR 960.209, 990.115 and 905.315.

I hereby certify that all the information stated within, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

| Board Chairman's Name (type) | Signature: | Date: |
|------------------------------|------------|---|
| · | | |
| Previous edition is obsolete | | form HUD-52574 (10/95) ref. Handbook 7575.1 |