ADOPTED COPY

Authority Budget of:

MAR 1 1 2019

Cliffside Park Housing Authority

State Filing Year

2019

APPROVED COPY

For the Period:

April 1, 2019

to

March 31, 2020

www.cphousingauthority.com

Authority Web Address



Division of Local Government Services

2019 HOUSING AUTHORITY BUDGET

Certification Section

2019

CLIFFSIDE PARK HOUSING AUTHORITY

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM April 1, 2019 TO March 31, 2020

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

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

By: Paul D. Wet CPA RMA Date: 1/31/2019

CERTIFICATION OF ADOPTED BUDGET

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

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

By: Paul D. Cort CPA RMA Date: 3/12/2019

2019 PREPARER'S CERTIFICATION

CLIFFSIDE PARK HOUSING AUTHORITY (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

	[/ 1 1 1 1		
Preparer's Signature:	WWI	MEAN	
Name:	William Katchen, CPA		
Title:	Fee Accountant	J	
Address:	596 Anderson Avenue, Jersey 07010	Suite 303, Clif	fside Park, New
Phone Number:	201-943-4449	Fax Number:	201-943-5099
E-mail address	bill@katchencpa.com		

2019 APPROVAL CERTIFICATION

CLIFFSIDE PARK HOUSING AUTHORITY

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

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 Cliffside Park Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 8 day of January, 2019.

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:	Joseph Capano		
Title:	Executive Director		
Address:	500 Gorge Road, Cl	iffside Park, NJ 070	10
Phone Number:	201-941-0655	Fax Number:	201-941-4038
E-mail address	jcapano@cp-ha.org		

INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.cphousingauthority	com	
All authorities	es shall maintain eith		r a webpage on the municipality	's or county's Internet
website. The	e purpose of the web	site or webpage shall be	e to provide increased public ac the following items to be include	cess to the authority's
			oxes below to certify the Author	
N.J.S.A. 40A			·	,
ďγ	A description of the	Authority's mission and	responsibilities	
	The budgets for the	current fiscal year and in	nmediately preceding two prior y	ears
口		-	ancial Report (Unaudited) or sim	
			such as Revenue and Expendi	
1		rts, along with other ini finances/budget of the	formation that would be useful Authority)	to the public in
	The complete (All Firmmediately two pri		the Audit Synopsis) of the most	recent fiscal year and
₫			al policy statements deemed releves idents within the authority's ser	
		ant to the "Open Public I e, date, location and ager	Meetings Act" for each meeting order of each meeting	of the Authority,
		ites of each meeting of the	e Authority including all resolutive fiscal years	ons of the board and
\Box	The name, mailing a	address, electronic mail a	ddress and phone number of eve	ry person who
	exercises day-to-day Authority	supervision or managen	nent over some or all of the oper	ations of the
, Ø	corporation or other	organization which rece	any other person, firm, business, ived any remuneration of \$17,50 ever rendered to the Authority.	
webpage as i	dentified above com	plies with the minimun	tive of the Authority that the An statutory requirements of N.J.	
listed above.	A check in each of th	e above boxes signifies	compliance.	
Name of Office	cer Certifying compli	ance	Joseph Capano	
Title of Office	er Certifying complia	nce	Executive Director	
Signature				

HOUSING AUTHORITY OF THE BOROUGH OF CLIFFSIDE PARK BERGEN COUNTY, NEW JERSEY

RESOLUTION NO.1 – 2019

INTRODUCED BY:

COMMISSIONER HARRY GUTTILLA

SECONDED BY:

COMMISSIONER PETER COLAO

DATE:

JANUARY 8, 2019

FISCAL YEAR: FROM APRIL 1, 2019 TO MARCH 31, 2020

WHEREAS, the Annual Budget and Capital Budget for the Housing Authority of the Borough of Cliffside Park for the fiscal year beginning April 1, 2019 and ending March 31, 2020 has been presented before the Members of the Housing Authority of the Borough of Cliffside Park at its open public meeting of January 9, 2019; and

WHEREAS, The Annual Budget as introduced reflects Total Revenues of \$8,943,018 Total Appropriations, including any Accumulated Deficit, if any, of \$8,534,550 and Total Fund Balance utilized of \$0; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$62,233 and Total Fund Balance planned to be utilized as funding thereof, of \$0; and

WHEREAS, the schedule of rents, fees and other user 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

2019 ADOPTION CERTIFICATION

CLIFFSIDE PARK JHOUSING AUTHORITY

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the Cliffside Park Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the _5_ day of, March, 2019.

Officer's Signature:			
Name:	Joseph Capano		
Title:	Executive Director		
Address:	500 Gorge Road, Cli	ffside Park, NJ 070	10
Phone Number:	201-941-0655	Fax Number:	201-941-4038
E-mail address	jcapano@cp-ha.org		

HOUSING AUTHORITY OF THE BOROUGH OF CLIFFSIDE PARK BERGEN COUNTY, NEW JERSEY

RESOLUTION NO.13 – 2019

INTRODUCED BY:

COMMISSIONER HARRY GUTTILLA

SECONDED BY:

COMMISSIONER RALPH CALABRESE

DATE:

MARCH 5, 2019

FISCAL YEAR: FROM APRIL 1, 2019 TO MARCH 31, 2020

WHEREAS, the Annual Budget and Capital Budget for the Housing Authority of the Borough of Cliffside Park for the fiscal year beginning April 1, 2019 and ending March 31, 2020 has been presented for adoption before the Members of the Housing Authority of the Borough of Cliffside Park at its open public meeting of March 5, 2019; and

WHEREAS, 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; and

WHEREAS, The Annual Budget as presented for adoption reflects Total Revenues of \$8,943.018 Total Appropriations, including any Accumulated Deficit, if any, of \$8,534,550 and Total Unrestricted Net Position utilized of \$0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$62,233 and Total Unrestricted Net Position planned to be utilized, of \$0; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Housing Authority of the Borough of Cliffside Park, at an open public meeting held on March 5, 2019 that the Annual Budget and Capitol Budget/Program of the Housing Authority of the Borough of Cliffside Park for the fiscal year beginning April 1, 2019 and ending March 31, 2020 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

2019 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2019 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS

CLIFFSIDE PARK HOUSING AUTHORITY (Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

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

- 1. Complete a brief statement on the 2019/2019-2020 proposed Annual Budget and make comparison to the 2018/2018-2019 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. 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 anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). 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% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. Service charges are principally based on formula

Established by HUD. Payments from tenants are not expected to be affected by the proposed budget.

- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. to impact The local economy is stable and not expected the proposed budget.
- 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. Unrestricted net position is not anticipated to be utilized.
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). None.
- 6. The proposed budget must not reflect an anticipated deficit from 2019/2019-2020 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. (Prepare a response to deficits caused by the implementation of GASB 68, 45). The Authority through the expected budget surplus will reduce the opening accumulated deficit.

CLIFFSIDE PARK HOUSING AUTHORITY

2019 NEW JERSEY BUDGET

PAGE N-1, QUESTION 1

Revenue:

- 1.) HUD operating subsidy is anticipated HAP payments from the HCV Program. This amount is based on the most recent (12/2018 register of payments made).
- 2.) Other revenue is projected to be lower based on less anticipated capital funds due to the conversion to RAD.
- 3.) Community center revenue is expected to be lower based on funding source projections.

Appropriations:

- 1.) Misc. administration is budgeted higher to provide for agreed upon management fees.
- 2.) Tenant services costs are budgeted higher to provide for increased costs due to the increased use and popularity of the Authority's community area.

HOUSING AUTHORITY CONTACT INFORMATION 2019

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

Name of Authority:	Cliffside Park Housing Au	ıthority					
Federal ID Number:	22-1846464						
Address:	500 Gorge Road						
City, State, Zip:	Cliffside Park		NJ	07010			
Phone: (ext.)	201-943-4449	Fax:	201-9	43-5099			
Preparer's Name:	William Katchen, CPA						
Preparer's Address:	596 Anderson Avenue, Su	ite 303					
City, State, Zip:	Cliffside Park		NJ	07010			
Phone: (ext.)	201-943-4449	Fax:	201-9	43-5099			
E-mail:	bill@katchencpa.com						
Chief Executive Officer:	Joseph Capano						
Phone: (ext.)	201-941-0655	Fax:	201-9	41-4038			
E-mail:	jcapano@cp-ha.org						
Chief Financial Officer:	William Katchen, CPA						
Phone: (ext.)		ax: 2	01-943-50	99			
E-mail:	bill@katchencpa.c	om					
Name of Auditor:	Michael Maurice, CPA						
Name of Firm:	Polcari and Company		·* · · · · ·				
Address:	2035 Hamburg Turnpike, Unit H						
City, State, Zip:	Wayne	-	NJ	07470			
Phone: (ext.)	973-831-6969	Fax:	973-8	31-6972			
E-mail:	polcarico@optonline.net		•				

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

CLIFFSIDE PARK HOUSING AUTHORITY

(Name)

TO:3/31/2020

FROM:4/1/2019

FISCAL

YEAR:

An	swer all questions below completely and attach additional information as required.
1)	Provide the number of individuals employed in (Use Most Recent W-3 Available 2017 or 2018) as
	reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 33
2)	Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most
	Recent W-3 Available 2017 or 2018)Transmittal of Wage and Tax
2)	Statements: 1,028,082
3)	or the governing out.
4) 5)	Provide the number of alternate voting members of the governing body: 0
2)	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?Yes 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 (Most Recent Filing that March 31. 2018 or 2019 deadline has passed 2018 or 2019) because
	of their relationship with the Authority file the form as required? (Checked to see if individuals
	actually filed at http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html before answering)
	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? Yes If "yes," attach a list of those
	individuals, their position, the amount receivable, and a description of the amount due to the
8)	Authority.
0)	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? No
	c. An entity of which a current or former commissioner, officer, key employee, or highest
	compensated employee (or family member thereof) was an officer or direct or indirect owner?
	No
	If the answer to any of the above is "yes," attach a description of the transaction including the name
	of the commissioner, officer, key employee, or highest compensated employee (or family member
	thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process.
9)	Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a
-,	personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or
	endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's
	family, or any other person designated by the transferorNo 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 a narrative of your
	Authorities procedures for all employees. Salary increases are based on Board review.
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.
13)	Did the Authority provide any of the following to or for a person listed on Page N-4 or any other
	employee of the Authority:
	a. First class or charter travelNo
	b. Travel for companionsNo
	c. Tax indemnification and gross-up paymentsNo
	d. Discretionary spending accountNo
	e. Housing allowance or residence for personal useNo
	f. Payments for business use of personal residence No
	g. Vehicle/auto allowance or vehicle for personal useNo
	h. Health or social club dues or initiation feesNo
	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
1 1)	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. (If your authority does not allow for reimbursements indicate that in
	answer)
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
ĺ	contingent upon the performance of the Authority or that were considered discretionary bonuses?
	NoIf "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
201	assessment and indicate the amount of the fine or assessment.
ZU)	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.

Cliffside Park Housing Authority

Family Relationship

Question 5, page N-3

Employee\
Commissioner

Relationship

Commissioner Ralph Calabrese

Uncle of Janet Merrill

Commissioner Janet Merrill

Niece of Ralph Calabrese

Cliffside Park Housing Authority

Page N-3, Question 12

Person travelled dates organization cost

Executive Director 5/21-5/22/2018 NJNAHRO Conference \$418.87

AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS CLIFFSIDE PARK HOUSING AUTHORITY

(Name)

FISCAL YEAR: FROM:1/1/2019 TO:12/31/2019

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

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- **Commissioner:** A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- **Key employee:** An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
 - a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
 - b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: 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, 2019 Most recent available W-2 and 1099 should be used (2017 or 2018 Forms)(60 days prior to start of budget year is November 1, 2018, with 2017 being the most recent calendar year ended), and for fiscal years ending June 30, 2019, the calendar year 2018 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2018 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)

F	Total Compensation All Public Entitles	146,203	121,289	0	127,928	0	0	57,636	0	0	0	0	0	0	0	0	453,056
s	Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)	S															\$ - \$
· oc	Reportable Compensation from Other Public Entitles (W-2/ 1099)				127,928			57,636						,			\$ 185,564
ø١	Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column O																"
a.	Average Names of Other Public Entities where Individual is an Employee or Positions held at Positions at Member of the Other Public Other Public Governing Body (1) Entities Listed in Entities Listed See note below Column O in Column			Council	retiree			retiree									
Oi	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (1) See note below	None	None	0 Cliffside Park	0 NJPERS	0 None	0 None	O NJPERS	0 None	0 None	0 Gracie1958\$\$						
z	Total Compensation from Authority	\$ 146,203 None		0	0	0	0	0	0	0	0	0	0	0	0	0	\$ 267,492
∑ }	Estimated amount of other compensation from the Authority (health benefits, pension, etc.)	\$ 19,070	15,820														\$ 34,890
L npensation from W-2/ 1099)	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)																\$
Cliffside Park Housing Authority March 31, 2020 H 1 J Reportable Compensation from Authority (W-2/1099)	Base Salary/ Stipend Bonus	\$ 127,133	105,469														\$ 232,602 \$
Cliffside Park Ho to F G H I Position	Former Highest Compensated Employee Key Employee	×	×														\$\$
April 1, 2019 D	Average Hours per Week Dedicated to Position		tor	×	×	×	×	×	×	×							
For the Period C	Title	Executive Director	Ass't. Executive Director	Chairperson	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner							
- 10 0 ·	Лаже	1 Joseph Capano	2 James Santasario	3 Peter Caleo	4 Janet Merrill	5 Ralph Calabrese	6 Sam Carafa	7 Sal Spoto	8 Harry Gutilla	9 Lynn DeLucia	10	11	12	13	14	15	Total:

[1] Insert "None" In this column for each individual that does not hold a position with another Public Entity

Schedule of Health Benefits - Detailed Cost Analysis

March 31, 2020

ಧ

Cliffside Park Housing Authority od April 1, 2019

For the Period

	# of Covered Members	Annual Cost Estimate per Employee	Total Cost Estimate	# of Covered Members	Annual Cost			
	(Medical & Rx) Proposed Budget	Proposed Budget	Proposed Budget	(Medical & Rx) Current Year	per Employee Current Year	Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
Active Employees - Health Benefits - Annual Cost								
Single Coverage	3	\$ 11,791	\$ 35,373	2	\$ 11,223	\$ 22,446	\$ 12.927	27.6%
Parent & Child	2	21,105	42,210	2				5.1%
Employee & Spouse (or Partner)	8	23,581	70,743	Ж	22,446	67,338	3,405	5.1%
Family	4	32,896	131,584	S	31,312	156,560	(24,976)	-16.0%
Employee Cost Sharing Contribution (enter as negative -)			(32,734)			(33,934)	1,200	-3.5%
Subtotal	12		247,176	12		252,588	(5,412)	-2.1%
Commissioners - Health Benefits - Annual Cost								
								10/10/#
Single Coverage			•			1	•	#DIV/0!
Parent & Child			•			1	1	#DIV/0]
Employee & Spouse (or Partner)			•			•	•	#DI/\0i
Family			•			-	,	#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							,	#DIV/0i
Subtotal	0		•	0			1	#DIV/0!
Retirees - Health Benefits - Annual Cost								
Single Coverage	8	4,076	12,228	4	6,304	25,216	(12,988)	-51.5%
Parent & Child			1			1	•	#DIV/0i
Employee & Spouse (or Partner)	4	11,554	46,216	4	23,530	94,120	(47,904)	-50.9%
Family			•			•	•	#DIV/0i
Employee Cost Sharing Contribution (enter as negative -)							1	#DIV/0i
Subtotal	7		58,444	8		119,336	(60,892)	-51.0%
								i
GRAND TOTAL	19	ı	\$ 305,620	20		\$ 371,924	\$ (66,304)	-17.8%
Is medical coverage provided by the SHBP (Yes or No)? (Place Answer Is prescription drug coverage provided by the SHBP (Yes or No)? (Place	e Answer in Box) .)? (Place Answer in Box)		Yes Yes	Yes or No Yes or No				

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

Schedule of Accumulated Liability for Compensated Absences

Cliffside Park Housing Authority

For the Period

April 1, 2019

\$

March 31, 2020

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

Legal Basis for Benefit

			(check applicable items)	olicat	le items)
Individuals Eligible for Benefit	Gross Days of Accumulated Compensated Absences at beginning of Current Year	Dollar Value of Accrued Compensated Absence Liability	Approved Labor Agreement	Resolution	Individual Employment Agreement
ious- See Attached		\$ 209,202		×	
				-	

209,202 Total liability for accumulated compensated absences at beginning of current year \$ The total Amount Should agree to most recently issued audit report for the Authority

COMPENSATED ABSENCES 3/31/18

EMPLOYEE	ACCRUED VACATION ACCRUED SI TIME (SICK DA	ACCRUED SICK TIME (SICK DAYS /2)	TOTAL TIME	RATE OF PAY	TOTAL ACCRUED VACATION	TOTAL ACCRUED	TOTAL
SANTASIERO, JAMES	40	132.5	172.5	\$418.62	\$16,744.80	\$15,000.00	\$31,744.80
DONATO, MARIE	18	55.25	73.25	\$150.00	\$2,700.00	\$8,287.50	\$10,987.50
TUREK, MICHAEL	28	11.75	39.75	\$234.62	\$6,569.36	\$2,756.79	\$9,326.15
COSTANTINO, LOUIS	39	83.25	122.25	\$249.96	\$9,748.44	\$15,000.00	\$24,748.44
FATOVIC, ALBINO	21	35.75	56.75	\$158.15	\$3,321.15	\$5,653.86	\$8,975.01
ROME, ANTHONY	23	1.5	24.5	\$178.32	\$4,101.36	\$267.48	\$4,368.84
YU, BILL	21	9.75	30.75	\$147.96	\$3,107.16	\$1,442.61	\$4,549.77
Capano, Joseph	30	57.5	87.5	\$491.06	\$14,731.80	\$15,000.00	\$29,731.80
Merchand, Frank	24.5	42.5	67	\$304.42	\$7,458.29	\$12,937.85	\$20,396.14
Rahvar, Rita	29	25.25	54.25	\$153.08	\$4,439.32	\$3,865.27	\$8,304.59
Barobosa, John	16.5	10	26.5	\$145.73	\$2,404.55	\$1,457.30	\$3,861.85
Philips-Perez, Linda	20.5	44.75	65.25	\$218.08	\$4,470.64	\$9,759.08	\$14,229.72
Dubon, Phyllis	14	17.5	31.5	\$108.12	\$1,513.68	\$1,892.10	\$3,405.78
Romano, Justine	21	4	25	\$81.54	\$1,712.34	\$326.16	\$2,038.50
Brown, Raymond	19.5	1.75	21.25	\$48.40	\$943.80	\$84.70	\$1,028.50
Frato, Lisa	23	25	48	\$158.35	\$3,642.05	\$3,958.75	\$7,600.80
Paradiso, Vanessa	11	13.25	24.25	\$123.08	\$1,353.88	\$1,630.81	\$2,984.69
Danny Matesic	14	2.5	16.5	\$115.38	\$1,615.32	\$288,45	\$1,903.77
					\$90,577.94	\$99,608.71	\$190,186.64

Pholl tex

208,205

Schedule of Shared Service Agreements

Cliffside Park Housing Authority April 1, 2019 to

For the Period

March 31, 2020

Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services.

				Agreement		Amount to be Received by/
			Comments (Enter more specifics if	Effective	Agreement	Paid from
Name of Entity Providing Service	Name of Entity Receiving Service	Type of Shared Service Provided	needed)	Date	End Date	Authority
		Executive Director, admin.				
Cliffside Park Housing Authority	Edgewater Housing Authority	Support				000'06 \$
Cliffside Park Housing Authority	Edgewater Housing Authority	maintenance and cleaning				\$ 13,200
Cliffside Park Housing Authority	Bergen County Housing Authority	Administrative Support	;			Hourly
						:

If No Shared Services X this Box

Cliffside Park Housing Authority April 1, 2019 to

For the Period

March 31, 2020

	;	FY 2	FY 2019 Proposed Budget	l Budget			FY 2018 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	' 	Operations	All Operations All Operations
REVENUES								 		
Total Operating Revenues	\$ 3,105,608	\$	\$ 5,825,000	₩	٠,	8,930,608	\$ 8,349,790	\$ 062	580,818	7.0%
Total Non-Operating Revenues	7,410	1	5,000			12,410	12,	12,410	,	0.0%
Total Anticipated Revenues	3,113,018	1	5,830,000			8,943,018	8,362,200	200	580,818	%6.9
APPROPRIATIONS										
Total Administration	644,200	,	448,960		•	1,093,160	1,033,760	09/	59,400	2.7%
Total Cost of Providing Services	2,071,590	1	5,214,000		•	7,285,590	7,008,115	115	277,475	4.0%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXX				 	,	#DIV/0!
Total Operating Appropriations	2,715,790	•	5,662,960			8,378,750	8,041,875	875	336,875	4.2%
Total Interest Payments on Debt Total Other Non-Operating Appropriations Total Non-Operating Appropriations	XXXXXXXXXX 155,800 155,800	XXXXXXXXX	XXXXXXXXX	XXXXXXXXX		- 155,800 155,800	152,000	900	3,800	#DIV/0! 2.5% 2.5%
Accumulated Deficit	1	1	'		,	1		•	1	#DIV/0!
Total Appropriations and Accumulated Deficit	2,871,590	,	5,662,960		1	8,534,550	8,193,875	875	340,675	4.2%
Less: Total Unrestricted Net Position Utilized	٠	1	1					-	1	#DIV/0!
Net Total Appropriations	2,871,590		5,662,960			8,534,550	8,193,875	375	340,675	4.2%
ANTICIPATED SURPLUS (DEFICIT)	\$ 241,428	\$	\$ 167,040	\$	٠,	408,468	\$ 168,325	325 \$	240,143	142.7%

Revenue Schedule

Cliffside Park Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

		FY 2019	Proposed L	Budget		FY 2018 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing		Housing		Total All	Total All		
OPERATING REVENUES	Management	Section 8	Voucher	Other Programs	Operations	Operations	All Operations	All Operations
Rental Fees								
Homebuyers' Monthly Payments				·	רָּ\$ -	\$ -	\$ -	#DIV/0!
Dwelling Rental	1478240				1,478,240	1,449,810	28,430	#DIV/U! 2.0%
Excess Utilities	21,0210				1,470,240	1,445,010	28,430	#DIV/0!
Non-Dwelling Rental						_	_	#DIV/0!
HUD Operating Subsidy	1486368				1,486,368	1,330,765	155,603	11.7%
New Construction - Acc Section 8					1,100,500	1,330,703	133,003	#DIV/0!
Voucher - Acc Housing Voucher			5800000		5,800,000	5,350,765	449,235	#DIV/0: 8.4%
Total Rental Fees	2,964,608		5,800,000	-	8,764,608	8,131,340	633,268	- 0.4% 7.8%
Other Operating Revenues (List)			3,200,000		0,704,000	0,131,340	033,208	- 7.0%
Late fees, laundry Comm., Shared Svcs.	91000				91,000	118,450	(27,450)	-23.2%
Port In fees and Fraud recovery	3200		25000		25,000	25,000	(27,430)	0.0%
Community Center	50000		23000		50,000	75,000	(25,000)	-33.3%
Type in (Grant, Other Rev)					50,000	73,000	(23,000)	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					1 -	<u>-</u>	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	-	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					i -	-	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	_	#DIV/0!
Type in (Grant, Other Rev)					_	_	-	#DIV/0!
Total Other Revenue	141,000	-	25,000	-	166,000	218,450	(52,450)	-
Total Operating Revenues	3,105,608	_	5,825,000	-		8,349,790	580,818	7.0%
NON-OPERATING REVENUES								- 7.070
Other Non-Operating Revenues (List)								
Type in] .	_	-	#DIV/0!
Type in					_	-	-	#DIV/0!
Type in					_	-	-	#DIV/0!
Type in					-	_	-	#DIV/0!
Type in					-	-	-	#DIV/0!
Type in					_	-	-	#DIV/0!
Total Other Non-Operating Revenue	-	-	_	-				#DIV/0!
Interest on Investments & Deposits (List)								
Interest Earned	7,410		5,000		12,410	12,410	_	0.0%
Penalties						-	-	#DIV/0!
Other					-	-	-	#DIV/0!
Total Interest	7,410	-	5,000	-	12,410	12,410		0.0%
Total Non-Operating Revenues	7,410		5,000	-		12,410		0.0%
TOTAL ANTICIPATED REVENUES	\$ 3,113,018	<u> </u>	\$ 5,830,000		\$ 8,943,018	\$ 8,362,200	\$ 580,818	6.9%

Prior Year Adopted Revenue Schedule

FY 2018 Adopted Budget

Cliffside Park Housing Authority

				3	
	Public Housing		Housing		Total All
OPERATING DEVELOPE	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES Rental Fees					
					١
Homebuyers' Monthly Payments					\$ -
Dwelling Rental	1,449,810				1,449,810
Excess Utilities					-
Non-Dwelling Rental					-
HUD Operating Subsidy	1,330,765				1,330,765
New Construction - Acc Section 8					-
Voucher - Acc Housing Voucher			5,350,765		5,350,765
Total Rental Fees	2,780,575		5,350,765		8,131,340
Other Revenue (List)					•
Late fees, laundry Comm., Shared Svcs.	75000			43,450	118,450
Port In fees and Fraud recovery			25,000		25,000
Community Center				75,000	75,000
					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)	j				
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					2
Total Other Revenue	75,000		25,000	110 450	218.450
Total Operating Revenues				118,450	218,450
NON-OPERATING REVENUES	2,855,575	-	5,375,765	118,450	8,349,790
Other Non-Operating Revenues (List)					
					1
Type in					-
Type in					-
Type in 					-
Type in					-
Type in					-
Type in					-
Other Non-Operating Revenues	-		-		
Interest on Investments & Deposits					-
Interest Earned	7,410		5,000		12,410
Penalties	1				-
Other					
Total Interest	7,410	-	5,000		12,410
Total Non-Operating Revenues	7,410		5,000	-	12,410
TOTAL ANTICIPATED REVENUES	\$ 2,862,985	\$ -	\$ 5,380,765	\$ 118,450	\$ 8,362,200

Appropriations Schedule

Cliffside Park Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

\$ Increase

% Increase

		FY 20:	19 Propose	ed Budget			Adopted dget	(Dec	crease) osed vs. opted	(Decrease) Proposed vs. Adopted
	Public Housing Management		Housing Voucher	Other Brezze	Total All		al Ali	411.0		
OPERATING APPROPRIATIONS	Widilagement	Section 8	voucher	Other Programs	Operations	Oper	ations	All Op	erations	All Operations
Administration										
Salary & Wages	298,220		223,040] 6 574.76		404 550			
Fringe Benefits	200,000		•		\$ 521,260		494,560	\$	26,700	5.4%
Legal	21,600		140,000		340,000		326,000		14,000	4.3%
Staff Training	· ·		13,400		35,000		35,000		-	0.0%
Travel	6,000		4,000		10,000		10,000		-	0.0%
Accounting Fees	16,680		11,120		27,800		27,800		-	0.0%
-	25,800		17,400		43,200		42,000		1,200	2.9%
Auditing Fees	6,000		6,000		12,000		12,000		-	0.0%
Miscellaneous Administration*	69,900		34,000		103,900		86,400		17,500	20.3%
Total Administration	644,200		448,960	<u>-</u>	1,093,160)1	L,033,760		59,400	5.7%
Cost of Providing Services					_					
Salary & Wages - Tenant Services	153,070				153,070)	160,390		(7,320)	-4.6%
Salary & Wages - Maintenance & Operation	259,500				259,500)	287,400		(27,900)	-9.7%
Salary & Wages - Protective Services							-			#DIV/0!
Salary & Wages - Utility Labor	91,030				91,030)	89,240		1,790	2.0%
Fringe Benefits	364,340				364,340)	363,720		620	0.2%
Tenant Services	60,000				60,000		40,000		20,000	50.0%
Utilities	567,250				567,250		584,600		(17,350)	-3.0%
Maintenance & Operation	369,400				369,400		341,400		28,000	8.2%
Protective Services	1]		3-11,-100		20,000	#DIV/0!
Insurance	122,000		14,000		136,000	1	130,000		6 000	•
Payment in Lieu of Taxes (PILOT)	82,000		21,000		82,000		77,600		6,000	4.6%
Terminal Leave Payments	02,000				02,000	,	77,000		4,400	5.7%
Collection Losses	3,000				3,000		3.000		-	#DIV/0!
Other General Expense	3,000				3,000	,	3,000		-	0.0%
Rents			F 300 000				-		- · · · · ·	#DIV/01
Extraordinary Maintenance	1		5,200,000		5,200,000	1 4	,930,765		269,235	5.5%
Replacement of Non-Expendible Equipment					·	•	-		-	#DIV/0!
Property Betterment/Additions					i '	•	-		-	#DIV/0!
	1				ļ ,	•	-		-	#DIV/0!
Miscellaneous COPS*						<u> </u>				#DIV/0!
Total Cost of Providing Services	2,071,590		5,214,000	-	7,285,590	7	,008,115		277,475	4.0%
Total Principal Payments on Debt Service in Lieu of										
Depreciation		XXXXXXXXXXX XXX		XXXXXXXXX		<u> </u>	_			#DIV/0!
Total Operating Appropriations	2,715,790	-	5,662,960	-	8,378,750	8	,041,875		336,875	4.2%
NON-OPERATING APPROPRIATIONS							_			
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXXX XXX	XXXXXXX	XXXXXXXXXX			-		-	#DIV/0!
Operations & Maintenance Reserve					-	•	-		-	#DIV/0!
Renewal & Replacement Reserve	155,800				155,800	١	152,000		3,800	2.5%
Municipality/County Appropriation							-		-	#DIV/0!
Other Reserves						•	-		_	#DIV/0!
Total Non-Operating Appropriations	155,800	-	-	-	155,800		152,000		3,800	2.5%
TOTAL APPROPRIATIONS	2,871,590	-	5,662,960	-	8,534,550		3,193,875		340,675	4.2%
ACCUMULATED DEFICIT									0,0,0	#DIV/0!
TOTAL APPROPRIATIONS & ACCUMULATED								_		#DIV/0:
DEFICIT	2,871,590	-	5,662,960		8,534,550		3,193,875		340 675	4 301
UNRESTRICTED NET POSITION UTILIZED			3,002,300		0,334,330		,,133,013		340,675	4.2%
Municipality/County Appropriation	_	_								#Bu - /= -
Other					- 1	•	-		-	#DIV/01
Total Unrestricted Net Position Utilized					<i>-</i>	·				#DIV/0!
TOTAL NET APPROPRIATIONS	\$ 2.871.590		F 662 060		A	<u> </u>				#DIV/0!
TOTAL REL APPROPRIATIONS	\$ 2,871,590	<u> </u>	5,662,960	\$ <u>-</u>	\$ 8,534,550	\$ 8	,193,875	\$	340,675	4.2%
* Miscellaneous line items may not exceed 5% of to	tal operating appro	nriations shown held	w Ifamounti	in miscellaneous is as	eater than the amou	int chown hal	our than			

^{*} 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

\$ 135,789.50 \$

- \$ 283,148.00 \$

\$ 418,937.50

Prior Year Adopted Appropriations Schedule

FY 2018 Adopted Budget

Cliffside Park Housing Authority

			1 2018 Adopted Bud	<u>gct</u>	·
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING APPROPRIATIONS					орстанона
Administration					
Salary & Wages	\$ 270,080		\$ 183,530	\$ 40,950	\$ 494.560
Fringe Benefits	215,000		108,500	2,500	\$ 494,560 326,000
Legal	21,600		13,400	2,300	•
Staff Training	6,000		4,000		35,000
Travel	16,680		11,120		10,000
Accounting Fees	25,200		16,800		27,800
Auditing Fees	6,000		6,000		42,000
Miscellaneous Administration*	52,400		•		12,000
Total Administration	612,960		34,000	42.450	86,400
Cost of Providing Services	012,300		377,350	43,450	1,033,760
Salary & Wages - Tenant Services	110 200				
Salary & Wages - Maintenance & Operation	110,390			50,000	160,390
Salary & Wages - Protective Services	287,400				287,400
Salary & Wages - Utility Labor	00.240				-
Fringe Benefits	89,240				89,240
Tenant Services	338,720			25,000	363,720
Utilities	40,000				40,000
Maintenance & Operation	584,600				584,600
Protective Services	341,400				341,400
Insurance					-
	115,000		15,000		130,000
Payment in Lieu of Taxes (PILOT)	77,600				77,600
Terminal Leave Payments Collection Losses					-
	3,000				3,000
Other General Expense					-
Rents	ŀ		4,930,765		4,930,765
Extraordinary Maintenance					-
Replacement of Non-Expendible Equipment					-
Property Betterment/Additions					-
Miscellaneous COPS*					
Total Cost of Providing Services	1,987,350		4,945,765	75,000	7,008,115
Total Principal Payments on Debt Service in Lieu o	of				<u></u>
Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	
Total Operating Appropriations	2,600,310	-	5,323,115	118,450	8,041,875
NON-OPERATING APPROPRIATIONS				·	·
Total Interest Payments on Debt	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXXX	-
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve	152,000				152,000
Municipality/County Appropriation					· <u>-</u>
Other Reserves					-
Total Non-Operating Appropriations	152,000	<u> </u>	-	-	152,000
TOTAL APPROPRIATIONS	2,752,310		5,323,115	118,450	8,193,875
ACCUMULATED DEFICIT					-,,
TOTAL APPROPRIATIONS & ACCUMULATED					···
DEFICIT	2,752,310	_	5,323,115	118,450	8,193,875
UNRESTRICTED NET POSITION UTILIZED				110, 130	0,133,673
Municipality/County Appropriation	-	_	_	_	
Other					-
Total Unrestricted Net Position Utilized	-	-	-		
TOTAL NET APPROPRIATIONS	\$ 2,752,310	\$ -	\$ 5,323,115	\$ 118,450	\$ 8,193,875
		·	. 3,323,213	7 110,750	7 0,133,673

\$

266,155.75 \$

5,922.50 \$

402,093.75

* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount

130,015.50 \$

shown below, then the line item must be itemized above.

5% of Total Operating Appropriations \$

Debt Service Schedule - Principal

		•	\$	1 1	\$		
		ļ	יופופוופו		\$		
		7000			\$		
		2033		1	\$\frac{1}{2}	,	
	ding in	2022			s,		
ing Authority	Fiscal Year Ending in	2021			\$	<u></u>	
Cliffside Park Housing Authority	į	2020			\$	is service. Standard & Poors	licable
		Proposed Budget Year 2019		1	· ·	of the rating by rating Fitch	If no Rating type in Not Applicable
×		Adopted Budget Year 2018			⋄	nd rating and the year c Moody's	If no Ra
If Authority has no debt X this box			Type in Issue Name Type in Issue Name Type in Issue Name	Type in Issue Name TOTAL PRINCIPAL LESS: HUD SURSIDY	NET PRINCIPAL	Indicate the Authority's most recent bond rating and the year of the rating by ratings service. Moody's Fitch Standar Year of Last Rating	5

Debt Service Schedule - Interest Cliffside Park Housing Authority

		Total Interest Payments Outstanding	9	, ,	1 1	· ·	·
		Thereafter			'	S	-
		2024				\$	
		2023				\$	
	ing in	2022			1	· •	
g Autilolity	Fiscal Year Ending in	2021				\$	
		2020				\$	
		Proposed Budget Year 2019				\$	
×		Adopted Budget Year 2018			1	\$	
If Authority has no debt X this box			Type in Issue Name Type in Issue Name	Type in Issue Name Type in Issue Name	TOTAL INTEREST	LESS: HUD SUBSIDY NET INTEREST	

Net Position Reconciliation

Cliffside Park Housing Authority

For the Period

April 1, 2019

March 31, 2020

2

FY 2019 Proposed Budget

Public Housing	Management Section 8	\$ 10,139,317 \$	10,692,229	***************************************	1,161,447	(1,714,359)				2,234,138	732,224	110,675		1 362 678		ţ	1	
		TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	Less: Invested in Capital Assets, Net of Related Debt (1)	Less: Restricted for Debt Service Reserve (1)	Less: Other Restricted Net Position (1)	Total Unrestricted Net Position (1)	Less: Designated for Non-Operating Improvements & Repairs	Less: Designated for Rate Stabilization	Less: Other Designated by Resolution	Plus: Accrued Unfunded Pension Liability (1)	Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)	Plus: Estimated Income (Loss) on Current Year Operations (2)	Plus: Other Adjustments (attach schedule)	UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	Unrestricted Net Position Utilized to Balance Proposed Budget	Unrestricted Net Position Utilized in Proposed Capital Budget	Appropriation to Municipality/County (3)	Total Unrestricted Net Position Utilized in Proposed Budget

(1,465,266)

(12,576)

2,766,262 961,328 168,325

> 229,104 57,650

532,124

1,181,118

\$ 10,458,081 10,742,229

(12,576)

50,000 331,340

19,671 261,669

Operations **Total All**

Other Programs

Housing Voucher

UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	1,362,678	•	1,080,547	(12,576)	(12,576) 2,430,649
Unrestricted Net Position Utilized to Balance Proposed Budget		,			•
Unrestricted Net Position Utilized in Proposed Capital Budget	ι	ŧ	1	r	•
Appropriation to Municipality/County (3)	1	ı	•	ŀ	1
Total Unrestricted Net Position Utilized in Proposed Budget				_	
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR					
(4)	\$ 1,362,678 \$	\$	- \$ 1,080,547 \$	(12,576) \$	(12,576) \$ 2,430,649

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

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

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

135,790 \$ Maximum Allowable Appropriation to Municipality/County

\$ 418,938 (4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the \$ 283,148 \$ deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section.

2019 CLIFFSIDE PARK HOUSING AUTHORITY

(Name)

HOUSING
AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

CLIFFSIDE PARK HOUSING AUTHORITY (Name)

TO:3/31/2020

FROM:4/1/2019

FISCAL

YEAR:

[X] It is hereby of is a true copy of the Capita Annual Budget, by the gov day of January, 2019.	d Budget/Program appr	oved, pursuant to N.	Budget/Program annexed J.A.C. 5:31-2.2, along wathority, on the8	rith the
		OR		
elected NOT to adopt a C	ertified that the governi apital Budget /Program lowing reason(s):	for the aforesaid fis	Housing Authorits and year, pursuant to N	y have
Officer's Signature:	A		12/2019	
Name:	Joseph Capano	·	01 201)	_
Title:	Executive Director	, , ,	,	1
Address:	500 Gorge Road, Cl	liffside Park, NJ 070	10	
Phone Number:	201-941-0655	Fax Number:	201-941-4038	1
E-mail address	jcapano@cp-ha.org			7

2019 CAPITAL BUDGET/PROGRAM MESSAGE

Cliffside Park Housing Authority

(Name)

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

1. Has the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority?

Yes

100

- 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?
 Yes
- 3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment? **Yes**
- 4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives.

No

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

 No impact on current charges set by HUD formula.
- 6. Have the projects been reviewed and approved by HUD? **Yes**

Add additional sheets if necessary.

Proposed Capital Budget

Cliffside Park Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

			Fu	nding Sources		
	Estimated Total Cost	Unrestricted Net	Renewal & Replacement	Debt		Other
Public Housing Management	COST	Position Utilized	Reserve	Authorization	Capital Grants	Sources
Riverview Towers- Various Terrace view Towers- Various Type in Description Type in Description	\$ 38,178 24,055		\$ 38,178 24,055			
Total	62,233		62,233			
Section 8			02,233			
Type in Description Type in Description Type in Description Type in Description Total Housing Voucher Type in Description	- - - - - - -			-		
Total						
Other Programs				-		
Type in Description Type in Description Type in Description Type in Description	- - - -					
Total			-	-	-	
TOTAL PROPOSED CAPITAL BUDGET	\$ 62,233	\$	\$ 62,233	\$ -	\$ - 9	-

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

5 Year Capital Improvement Plan

Cliffside Park Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

Fiscal Year Beginning in

	Esti	mated Total	Curre	ent Budget						
	_	Cost	Ye	ar 2019	2020	2021	2022	2023		2024
Public Housing Management	-						 			
Riverview Towers- Various	\$	434,723	\$	38,178	\$123,183	\$ 40,111	\$ 132,454	\$ 50,797	\$	50,000
Terrace view Towers- Various		264,210		24,055	24,656	25,272	83,636	56,591	·	50,000
Type in Description		-		-			•	,		,
Type in Description		-		_						
Total		698,933		62,233	147,839	65,383	 216,090	107,388	-	100,000
Section 8					,	 		107,500		100,000
Type in Description		-		-		 	 			
Type in Description		_		-						
Type in Description		_		_						
Type in Description		_		-						
Total		-			<u> </u>	 <u> </u>				
Housing Voucher						 	 	 		
Type in Description		-		_ !		 	 	 		
Type in Description		_		_						
Type in Description		_		_						
Type in Description		_		_						
Total			·		<u> </u>		 	 		
Other Programs						 		 		
Type in Description		_		_ {		 	 	 		
Type in Description		_		_						
Type in Description		-		_						
Type in Description		_		_						
Total					<u> </u>	 	 -	 		
TOTAL	\$	698,933	\$	62,233	\$ 147,839	\$ 65,383	\$ 216,090	\$ 107,388	\$	100,000

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

Cliffside Park Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

			Funding Sources				
	Estimated Total		Renewal &				
			Unrestricted Net	Replacement	Debt		
		Cost	Position Utilized	Reserve	Authorization	Capital Grants	Other Sources
Public Housing Management				· · · · · · · · · · · · · · · · · · ·			
Riverview Towers- Various	\$	434,723		\$ 434,723			
Terrace view Towers- Various		264,210		264,210			
Type in Description		-					
Type in Description	_	-					
Total		698,933	-	698,933	-		
Section 8							
Type in Description		-					
Type in Description		-					
Type in Description		_					
Type in Description		-					
Total			-	_			
Housing Voucher							_
Type in Description		-					
Type in Description		_					
Type in Description		_					
Type in Description		_					
Total							
Other Programs							
Type in Description		_					
Type in Description		_					
Type in Description		_					
Type in Description		_					
Total							
TOTAL	\$	698,933	\$ -	\$ 698,933	\$ -	\$ -	\$ -
Total 5 Year Plan per CB-4	\$	698,933	T	+ 050,555	<u> </u>		- -
Balance check			amount is other than zei				

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.