

*Board of Commissioners*  
Robert Barr, Chairperson  
Scott Halliday, Vice-Chairperson  
Michael Dattilo, Commissioner  
Beverly McCall, Commissioner  
Robert Henry, Commissioner  
Patricia Miles-Jackson, Commissioner  
Sean Scarborough, Commissioner



204 4<sup>th</sup> Street  
Ocean City, New Jersey 08226

Phone: 609-399-1062  
Fax: 609-399-7590

*Jacqueline S. Jones, Executive Director*

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March 14, 2019

The Board of Commissioners  
Ocean City Housing Authority  
Ocean City, New Jersey 08226

Dear Commissioner:

The regular meeting of the Ocean City Housing Authority will be held on **Tuesday, March 19, 2019, at 5:00 pm at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, NJ 08226.**

The Board may enter into executive session to discuss personnel matters and any other housing business that meets the criteria for an executive session. Formal action may be taken.

Very truly yours,



Jacqueline S. Jones  
Executive Director

**REVISED**  
**Ocean City Housing Authority**  
**AGENDA**

Tuesday, March 19, 2019  
Administrative Offices – 204 4<sup>th</sup> Street  
5:00 p.m.

1. Call to Order
2. Pledge of Allegiance
3. Reading of the “Sunshine Law Statement”
4. Roll Call
5. Approval of Minutes:
  - a. Regular Meeting on February 19, 2019
6. Fee Accountant’s Report
7. Executive Director’s Report
8. Committee Reports
  - a. Rick Ginnetti, The Brooke Group
9. Old Business
10. New Business
11. Resolutions:
  - # 2019-08 Approval of Monthly Expenses
  - # 2019-09 Appoint Risk Management Consultant
  - # 2019-10 Resolution to Dispose of Furniture and Equipment Utilizing the Disposition Policy
  - # 2019-11 Amending Personnel Policy
  - # 2019-12 Award Janitorial Cleaning Services Contract
  - # 2019-13 Award Landscaping Services Contract
  - # 2019-14 Approval of 2019 Operating Subsidy
- Executive Session if required*
12. Comments from the press and/or public
13. Comments from Board Members
14. Adjournment

## **Housing Authority of the City of Ocean City**

### **Regular Board of Commissioner Meeting Minutes February 19, 2019 – 5 p.m.**

The regular meeting of the Housing Authority of the City of Ocean City was held on February 19, 2019, at 5:00 p.m. at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey 08226.

The meeting was called to order by Chairman Barr and began with the Pledge of Allegiance. Chairman Barr read the Sunshine Law.

Upon roll call those present were:

Commissioner Robert Halliday	
Commissioner Sean Scarborough	
Commissioner Michael Dattilo	(absent)
Commissioner Beverly McCall	
Commissioner Robert Henry	
Commissioner Patricia Jackson	(absent)
Chairman Robert Barr	

Also present were Jacqueline Jones, Executive Director, Charles W. Gabage, Esquire – Solicitor, Linda Cavallo – Accountant, Ron Miller, VHA Assistant Asset Manager – Operations and Patrick Mumman, Alternate Commissioner

#### **Minutes**

Chairman Barr requested a motion to approve the Regular Meeting minutes from January 15, 2018. A motion was made by Commissioner Halliday and seconded by Commissioner McCall. The following vote was taken:

Commissioner Robert Halliday	(Yes)
Commissioner Sean Scarborough	(Yes)
Commissioner Michael Dattilo	(Absent)
Commissioner Beverly McCall	(Yes)
Commissioner Robert Henry	(Yes)
Commissioner Patricia Jackson	(Absent)
Chairman Robert Barr	(Yes)

#### **Treasurer's Report**

Ms. Cavallo reviewed the Financial Report for the four months ended January 31, 2019. Motion to approve the Treasurer's Report made by Commissioner McCall and seconded by Commissioner Halliday. Brief discussion regarding the management fee line item on the financial statement as well as legal fee categories for redevelopment and RAD. The following vote was taken:

Commissioner Robert Halliday	(Yes)
Commissioner Sean Scarborough	(Yes)
Commissioner Michael Dattilo	(Absent)
Commissioner Beverly McCall	(Yes)
Commissioner Robert Henry	(Yes)
Commissioner Patricia Jackson	(Absent)
Chairman Robert Barr	(Yes)

## **Executive Director's Report**

Mrs. Jones reported the government shut down did not happen. The Authority should be finding out in the next couple of months the amount of the Operating Subsidy and Capital Fund amounts. The receipt of the Capital Funding will be delayed this year due to the shutdown.

The update in regards to the Personnel Policy in Mrs. Jones report will be brought to the Board for approval next month. The revision is about the sick leave granted to part-time employees. The OCHA currently does not have any part-time employees.

In regards to RAD, the OCHA recently received the CHAP which is the Commitment to Enter into a Housing Assistance Payment contract. This is the first step from HUD stating they received the Authority's application and can proceed with a financial plan. The CHAP was updated based on 2018 figures which gave the Authority an additional \$150,000 a year. If everything goes as expected, 2019 numbers will be higher based on the information we've seen so far. The OCHA may be able to apply for an updated CHAP and get additional funds, which could be helpful to make payments to the City or if the Authority needed another loan to close the gap in the development venture.

The architect is completing the specifications for the Speitel building. The specs being issued will be dependent upon the funding for the project.

With no further discussion, motion to accept the Executive Director's Report made by Commissioner McCall and seconded by Commissioner Scarborough. The following vote was taken:

Commissioner Robert Halliday	(Yes)
Commissioner Sean Scarborough	(Yes)
Commissioner Michael Dattilo	(Absent)
Commissioner Beverly McCall	(Yes)
Commissioner Robert Henry	(Yes)
Commissioner Patricia Jackson	(Absent)
Chairman Robert Barr	(Yes)

**Committee Reports** – None.

**Old Business** – None.

**New Business** – Chairman Barr reported that Commissioner McCall has successfully completed her classes.

With no other discussion in related matters the Chairman moved to the Resolutions.

### **Resolution #2019-05** **Resolution to Approve Monthly Expenses**

Chairman Barr called for a motion to approve the monthly expenses in the amount of \$73,901.02. A motion was made by Commissioner McCall; seconded by Commissioner Halliday. The following vote was taken:

Commissioner Robert Halliday	(Yes)
Commissioner Sean Scarborough	(Yes)
Commissioner Michael Dattilo	(Absent)
Commissioner Beverly McCall	(Yes)
Commissioner Robert Henry	(Yes)
Commissioner Patricia Jackson	(Absent)
Chairman Robert Barr	(Yes)

**Resolution #2019-06**  
**Resolution Approving Revised Disposition Policy**

Chairman Barr called for a motion to approve Resolution #2019-06. A motion was made by Commissioner Halliday; seconded by Commissioner McCall. Mrs. Jones stated the major change in this policy is the addition that the sale of personal property will be disposed of using GovDeals.com. The following vote was taken:

Commissioner Robert Halliday	(Yes)
Commissioner Sean Scarborough	(Yes)
Commissioner Michael Dattilo	(Absent)
Commissioner Beverly McCall	(Yes)
Commissioner Robert Henry	(Yes)
Commissioner Patricia Jackson	(Absent)
Chairman Robert Barr	(Yes)

**Resolution #2019-07**  
**Resolution Awarding Architectural & Engineering Services Contract**

Mrs. Jones stated there were two RFP's received which were evaluated by Ron and her independently and Haley and Donovan came out above the other vendor by a couple of points. Chairman Barr called for a motion to approve Resolution #2019-07. A motion was made by Commissioner Halliday; seconded by Commissioner McCall. The following vote was taken:

Commissioner Robert Halliday	(Yes)
Commissioner Sean Scarborough	(Yes)
Commissioner Michael Dattilo	(Absent)
Commissioner Beverly McCall	(Yes)
Commissioner Robert Henry	(Yes)
Commissioner Patricia Jackson	(Absent)
Chairman Robert Barr	(Yes)

There is no need for Executive Session tonight.

Chairman Barr requested comments from the public. Marion Scott of Bayview Manor Apt. 406 addressed the Board. She asked if any meetings will be held at Bayview Manor. Mrs. Jones stated this year the meetings were advertised to have all the meetings at the Administrative Office. Ms. Scott stated there is a hole in between the benches on the porch. She understands it's hard to fix this issue now during the winter, but is requesting to be fixed in the spring time. Ron Miller stated this hole will be patched. Chairman closed the public comments portion of the meeting. Chairman Barr asked if there were any further comments from any Commissioner at this time. Commissioner McCall asked if cones can be placed at the site for the repair of the hole. Ron Miller stated the hole would be patched tomorrow. No further comments from the Commissioners.

With no further business to discuss, Chairman Barr entertained a motion for adjournment of the Regular Meeting. A motion was made by Commissioner McCall; seconded by Commissioner Halliday. The vote was carried unanimously by the Board Members present. The Regular Meeting of the Board of Commissioners was adjourned at 5:30 p.m.

Respectfully submitted,



Jacqueline S. Jones  
Secretary/Treasurer

**THE OCEAN CITY HOUSING AUTHORITY**  
**FYE SEPTEMBER 30, 2019**

**INCOME & EXPENSE STATEMENT**  
**FOR THE FIVE MONTHS ENDED FEBRUARY 28, 2019**

	<b>ANNUAL BUDGET</b>	<b>BUDGET THRU FEBRUARY</b>	<b>ACTUAL THRU FEBRUARY</b>	<b>VARIANCE FROM BUDGET (+OVER/ &amp; -UNDER)</b>	<b>NOTES:</b>
<b>INCOME</b>					
DWELLING RENTAL	\$ 573,780	\$ 239,075	\$ 243,627	\$ 4,552	This represents actual rent received from Tenants to
OTHER TENANT-EXCESS UTILITIES	4,200	1,750	2,379	629	This represents actual excess utilities income to date.
TOTAL TENANT REVENUE	577,980	240,825	246,006	5,181	
HUD OPERATING SUBSIDY	306,330	127,638	134,589	6,951	This represents HUD funding to date.
HUD CAPITAL FUNDS-OPERATIONS	172,800	72,000	72,000	0	Accrued this income year-to-date.
TOTAL HUD FUNDING	479,130	199,638	206,589	6,951	
INVESTMENT INCOME-UNRESTRICTED	150	63	46	(17)	Actual income is less than expected
NONDWELLING RENTAL INCOME	13,200	5,500	5,500	0	This represents nondwelling income to date.
OTHER INCOME-LAUNDRY	7,400	3,083	4,432	1,349	Income is paid qtrly-Feb, May, Aug and Nov.
OTHER INCOME-FRAUD RECOVERY	5,000	2,083	0	(2,083)	This represents actual amount received in fiscal year.
OTHER INCOME-MISCELLANEOUS	5,580	2,325	6,559	4,234	Late charges, legal fees-tenant, extra keys, change locks, cleaning reimbursements, etc.
TOTAL INCOME	1,088,440 #	453,517	469,132	15,615	Overbudget due to late charges & legal fees paid.
<b>EXPENSES</b>					
ADMINISTRATIVE SALARIES	32,500	13,542	13,124	(418)	This represents actual salaries to date
AUDIT FEES	9,000	3,750	3,750	0	Accrued expense year-to-date.
ADVERTISING	3,200	1,333	404	(929)	Actual expenses are less than budgeted.
EMPLOYEE BENEFITS-ADMIN	29,040	12,100	11,111	(989)	Actual expenses are less than budgeted.
OFFICE EXPENSES					Accrued Yardi (\$675 a mo) & Prorated Convexserv (\$95 a mo) 5 mos.
COMPUTER SERVICES	9,000	3,750	3,850	100	
COPIER	3,500	1,458	1,014	(444)	Actual expenses are less than budgeted.
DUES & PUBLICATIONS	1,500	625	514	(111)	Actual expenses are less than budgeted.
OFFICE SUPPLIES	2,500	1,042	432	(610)	Actual expenses are less than budgeted.
PHONE & INTERNET	11,000	4,583	3,912	(671)	Actual expenses are less than budgeted.
POSTAGE	2,000	833	443	(390)	Actual expenses are less than budgeted.
LEGAL	15,000	6,250	4,830	(1,420)	Represents actual bills from Mr. Gabage's office.
TRAVEL	450	188	0	(188)	Actual expenses are less than budgeted.
TRAINING	4,200	1,750	1,201	(549)	Actual expenses are less than budgeted.
ACCOUNTING	15,000	6,250	6,250	0	
MANAGEMENT FEES	130,000	54,167	39,583	(14,584)	Actual expenses are less than budgeted.
MISCELLANEOUS-SUNDRY	12,000	5,000	2,936	(2,064)	Actual expenses are less than budgeted.
	279,890	116,621	93,354	(23,267)	
OTHER TENANT SERVICES	3,030	1,263	1,940	677	Includes \$200 a month (totaling \$1,000.00) and Christmas party (\$940).
WATER/SEWER	105,000	43,750	41,334	(2,416)	Represents actual Oct-Jan bill and estimated Feb bill.
ELECTRIC	110,000	45,833	47,390	1,557	Represents actual Oct-Jan bill and estimated Feb bill.
GAS	56,000	23,333	35,447	12,114	Represents actual Oct-Jan bill and estimated Feb bill.
	271,000	112,916	124,171	11,255	
MAINTENANCE LABOR	59,860	24,942	15,959	(8,983)	Actual expenses are less than budgeted.
MAINT. MATERIALS	50,000	20,833	13,277	(7,556)	Actual expenses are less than budgeted.
MAINT. CONTRACT COSTS	130,000	54,167	54,688	521	Actual expenses are higher than budgeted.
EMPLOYEE BENEFITS	35,440	14,767	12,727	(2,040)	Actual expenses are less than budgeted.
	275,300	114,709	96,651	(18,058)	
INSURANCE	110,000	45,833	39,822	(6,011)	Actual expenses are less than budgeted.
BAD DEBTS	5,000	2,083	2,083	(0)	Accrued expense year-to-date
COMPENSATED ABSENCES	5,500	2,292	2,292	0	Accrued expense year-to-date
PAYMENT IN LIEU OF TAXES	30,280	12,617	12,617	0	Accrued expense year-to-date
PENSION	21,000	8,750	7,819	(931)	Accrued 5 months expense at last year's rate.
RETIREE BENEFITS	25,000	10,417	9,272	(1,145)	Actual expenses are less than budgeted.
DUE TO CITY OF OCEAN CITY	60,000	25,000	75,000	50,000	This represents all payments made in fiscal year. \$5,000 per month & \$50,000 add'l payment in January.
	256,780	106,992	148,905	41,913	
TOTAL EXPENDITURES	1,086,000	452,501	465,021	12,520	
PROFIT (LOSS)	\$ 2,440	\$ 1,016	\$ 4,111	\$ 3,095	

# Ocean City Housing Authority

## Administrative Report

**DATE:** March 13, 2019

**TO:** Board of Commissioners, Ocean City Housing Authority

**FROM:** Jacqueline S. Jones, Executive Director

**SUBJECT:** Monthly Report (Stats for February 2019)

**PERIOD:** February 13, 2019 to March 12, 2019

### Peck's Beach – New Jersey Housing and Mortgage Finance Agency (NJHMFA) Pre-Development Funds – [No change from February 2019](#)

Below is a summary of the expenses that have been submitted and paid by NJHMFA for the pre-development cost for Peck's Beach Village – Speitel Manor. These expenses are paid directly from NJHMFA to the vendor. This update will be included in this report through the end of the pre-development phase.

<b>Pre-Development Funds - NJHMFA for Peck's Beach - #2986</b>				
<b>Pre-Development Uses</b>	<b>Approved Budget</b>	<b>Previously Disbursed</b>	<b>This Transaction - 10/18/18</b>	<b>Balance of Funds</b>
<b>HUD Approvals-Inventory</b>				
Removal/Title Search	\$ 27,500.00	\$ 743.00	\$ 100.00	\$ 26,657.00
Architect	\$ 90,000.00	\$ -	\$ 90,000.00	\$ -
Site Engineer	\$ 66,000.00	\$ 28,772.64	\$ 16,101.66	\$ 21,125.70
Energy Star Review	\$ 1,000.00	\$ -	\$ -	\$ 1,000.00
Environmental Consultant	\$ 18,500.00	\$ 2,472.50	\$ -	\$ 16,027.50
Geo Tech Consultant	\$ 12,500.00	\$ -	\$ -	\$ 12,500.00
Survey	\$ 7,000.00	\$ 4,620.00	\$ -	\$ 2,380.00
Attorney	\$ 36,000.00	\$ 5,895.00	\$ 990.00	\$ 29,115.00
Consulting Fees	\$ 125,000.00	\$ 37,273.00	\$ 19,542.45	\$ 68,184.55
<b>VHA - \$6,977 TO DATE</b>				\$ -
5% Contingency	\$ 19,175.00	\$ -	\$ -	\$ 19,175.00
<b>Totals</b>	<b>\$ 402,675.00</b>	<b>\$ 79,776.14</b>	<b>\$ 126,734.11</b>	<b>\$ 196,164.75</b>

## **HUD Budget for FY 2019**

Congress passed the budget for FY 2019 on February 15, 2019. There are indications that FY 2019 will be funded at a similar level as FY 2018. To date, we have not received any official notification from HUD as to what the amount of the Operating Subsidy and Capital Fund amounts will be.

## **Real Estate Assessment Center (REAC)**

HUD's division of REAC is responsible for the physical inspection of the Authority's property. The property is due for an inspection, but we have not been notified of a date of the inspection as of this writing.

## **Audit – Year Ending 9/30/2018**

The firm of Ford-Scott Associates will perform the audit, which must be filed with HUD by the end of June 2019. The auditor has been contacted to schedule a start date for the audit. A start date for the audit has not been determined.

## **Personnel Policy**

Updates to the Personnel Policy are included in this packet for Board consideration. The main purpose for the policy revision is to incorporate the new requirements of the New Jersey Paid Sick Leave Act. The Act requires employers to provide employees up to forty (40) hours of paid sick leave. The Act would provide Authority part-time employees with paid sick leave. Currently, the Authority does not employ any part-time employees.

**Additions to the Personnel Policy have been highlighted for ease of review and changes have been red-lined.**



## **Rental Assistance Demonstration Program (RAD)**

The RAD application has been submitted to HUD. The Authority staff and consultant are in communication with the HUD RAD team to review the options for the OCHA RAD conversion.

There are monthly update calls with the Authority's RAD Transaction Manager for HUD and the Authority's consultant. There are many moving parts regarding the RAD conversion along with the redevelopment of Peck's Beach. A variety of factors including timing, regulations and funding are involved making this a complicated transaction.

The update calls with the HUD Transaction Manager continue. A request was made to HUD to remove the existing CHAP (Commitment to enter into a Housing Assistance Payment) contract, which was based on YE 2016 funding and replace it with a CHAP based on YE 2018 funding. The request was granted and the new CHAP dated February 7, 2019, was received with the new funding figures.

**Update: The update calls with the HUD Transaction Manager are continuing as scheduled.**

## **Peck's Beach – NJHMFA Pre-Development**

An update on the progress of the Peck's Beach Re-development will be given at the board meeting. The Authority's consultant Rick Ginnetti, The Brooke Group will be attending.

### **Board of Commissioners –Rutgers Training Program Status**

<b>Commissioner</b>	<b>Training Program Status</b>
<b>Robert Barr, Chairman</b>	Completed
<b>Robert Scott Halliday, Vice Chairman</b>	Completed
<b>Mike Dattilo</b>	In Process
<b>Robert Henry</b>	In Process
<b>Beverly McCall</b>	Completed
<b>Patricia Miles-Jackson</b>	Completed
<b>Sean Scarborough</b>	In Process

Program Statistics Report      10/2018 - 01/2019		2019 FEB	2019 JAN	2018 DEC
<b><u>Tenant Accounts Receivable</u></b>				
Number of "non-payment of rent" cases referred to the solicitor		4	4	3
<b><u>Tenant Relations</u></b>				
Total number of units to be inspected in fiscal year		121	121	121
Total number of units to be inspected this month			61	61
Number of inspections actually completed this month - all sites			61	61
Total number of units inspected year-to-date - all sites		183	183	122
<b><u>Occupancy</u></b>				
Monthly Unit Turnaround Time (Avg) (Down, Prep & Lease-up Time)		54	54	90
Annual Unit Turnaround Time (For Fiscal Year)		72	72	77
Monthly - Number of Vacancies Filled (this month)		0	1	3
Monthly - Average unit turnaround time in days for Lease up		4	4	33
Monthly - Average unit turnaround time in days to Prep Unit (Maint)		50	50	40
PIC Score		100%	100%	100%
<b><u>Vacancies - At end of Month</u></b>				
Bay View Manor		0	1	0
Peck's Beach Senior		0	0	1
Peck's Beach Family		1	1	2
Total		1	2	3
Occupancy Rate		99.17%	98.35%	97.52%
<b><u>Vacancy Turnovers by VHA Maintenance Staff</u></b>				
Total Hours		1	1	5
Average Hours per Vacancy (Br. Sizes 0 thru 4)		29.96	41.48	152
		31.10	32.25	30.40
<b><u>Rent Roll</u></b>				
Bay View Manor - Elderly/Disabled		\$20,620	\$20,927	\$20,825
Peck's Beach - Elderly/Disabled		\$6,637	\$6,484	\$6,875
Peck's Beach - Family		\$19,397	\$20,037	\$20,019
Total Rent Roll		\$46,654	\$47,448	\$47,719
<b><u>Public Housing Waiting List Applicants</u></b>				
Families - <b>Ocean City Preference</b>		5	8	11
Families - No Ocean City Preference		123	119	117
Elderly (Seniors - 62+)/Disabled - <b>Ocean City Preference</b>		83	81	81
Elderly (Seniors - 62+)/Disabled - No Ocean City Preference		294	285	273
<b><u>Maintenance Department</u></b>				
Average work order turnaround time in days - Tenant Generated		3.5	1.31	2
Total Tenant Generated Work Orders		63	51	27
Number of routine work orders written this month		44	81	56
Number of outstanding work orders from previous month		10	12	25
Total number of work orders to be addressed this month		117	144	108
Total number of work orders completed this month		118	134	96
Total number of work orders left outstanding		36	10	12
Number of emergency work orders written this month		0	0	0
Total number of work orders written year-to-date		447	340	208
AFTER HOUR CALLS: (plumbing, lockouts, toilets stopped-up, etc.)		0	0	0

Program Statistics Report      10/2018 - 01/2019		2019 FEB	2019 JAN	2018 DEC
<b><u>Real Estate Assessment Center (REAC) Scores</u></b>				
Year-End 2018 - TBD				
Year-End 2017 - Audited		68	68	68
Year-End 2016 - Audited		85	85	85
Year-End 2015 - Audited		88	88	88
Year-End 2014 - Audited		86	86	86
Year-End 2013 - Audited		97	97	97
Year-End 2012 - Audited		100	100	100
Year-End 2011 - Audited		100	100	100

# Ocean City Housing Authority

## Cash Report

As of February 28, 2019

### Net Cash Position:

Cash Balance per Reconciled Bank Statements at 02/28/2019				\$209,952.87
Capital 2018 Cash-Pending for draw down from HUD eLOCCS				\$182,217.00
Add: A/R-Tenants	Current	3,214.20		\$9,291.19
	Past	6,076.99		
Less: Bill List payments				(\$66,315.75)
Annual PERS Employer Appropriation due 4/1/2019				(\$19,151.00)
Accrued Expenses - Total from detail below				(\$23,003.00)

<u>Accrued Expenses</u>	<u>Annual Budget</u>	<u>No of Months</u>	<u>Amount Accrued Less Paid</u>
Insurance-Prop/Flood	110,000.00	5	6,011.33
Bad Debt	5,000.00	5	2,083.33
Comp Absences	5,500.00	5	2,291.67
P.I.L.O.T.	30,280.00	5	12,616.67
Net Accrual	150,780.00		23,003.00

Net Cash Position Before Amounts Due City of Ocean City	\$292,991.31
Due to Other Governments per 9/30/2016 Audit - City of Ocean City	(\$265,735.00)
Accrued P.I.L.O.T - Year-End 9/30/2015	(\$24,008.00)
Accrued P.I.L.O.T - Year-End 9/30/2016	(\$25,848.00)
Accrued P.I.L.O.T - Year-End 9/30/2017	(\$22,605.00)
Accrued P.I.L.O.T - Year-End 9/30/2018-Unaudited	(\$20,840.00)
Due to City of Ocean City for Storm Sandy FEMA per 9/30/2016 Audit	(\$172,434.00)
Net Cash Balance	\$27,256.31

### Summary of Payments to the City of Ocean City

Due to City of Ocean City for Storm Sandy FEMA	Balance	\$ (252,434)
<b>PAYMENTS:</b>	<b>Total Paid</b>	
OCTOBER 2018, CHK \$ 5,000	\$ 5,000	\$ (247,434)
NOVEMBER 2018, CH \$ 5,000	\$ 10,000	\$ (242,434)
DECEMBER 2018, CH \$ 5,000	\$ 15,000	\$ (237,434)
JAN 2019, CHK 1556 1/ \$ 5,000	\$ 20,000	\$ (232,434)
PYMT \$ 50,000	\$ 70,000	\$ (182,434)
FEB 2019, CHK 1594 2/ \$ 5,000	\$ 75,000	\$ (177,434)
MAR 2019, CHK 1683 3 \$ 5,000	\$ 80,000	\$ (172,434)

	<u>Average Expenses*</u>	<u>Cash Available**</u>	
Per Month	\$ 83,085	3.53	Months
Per Day	\$ 2,770	106	Days

\*Average Expenses Net of Add'l Payment to City of OC.

\*\*Cash Available Before Amounts due to City of OC.

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-08  
A Resolution Approving Regular Monthly Expenses**

**WHEREAS**, the Housing Authority of the City of Ocean City incurred various financial obligations since the last meeting; and it is the desire of the Commissioners of said Authority to have their obligations kept current; and,

**WHEREAS**, prior to the Board meeting, a member of the Board of Commissioners read and reviewed the itemized list of incurred expenses attached hereto and does recommend payment of the expenses on the Bill List in the amount of \$66,315.75.


**NOW, THEREFORE, BE IT RESOLVED** that the Secretary-Treasurer be and is hereby authorized to pay the monthly bills that are presented to the Board of Commissioners for consideration on this date.

**ADOPTED:** March 19, 2019

**VOTE:**

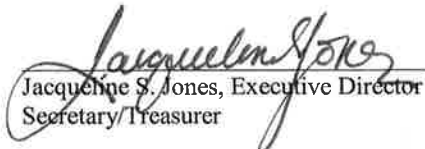
Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓					✓
Commissioner McCall	✓				✓	
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY

BY:   
Robert Barr, Chairperson

**ATTESTATION:**

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

By:   
Jacquelinne S. Jones, Executive Director  
Secretary/Treasurer

**OCEAN CITY HOUSING AUTHORITY  
BILL LIST - MARCH 2019**

Check#	Vendor	Invoice Notes	Total Amount
1631	AETNA HEALTH & LIFE INSURANCE CO.	RETIREE HEALTH COVERAGE 2/1/2019-5/1/2019	1,303.54
1632	AMBIENT COMFORT, LLC.	HVAC SERVICE	175.00
1633	ATLANTIC CITY ELECTRIC	FEB 2019 Electric	10,270.12
1634	AT & T	2/2019 & 3/19 BVM ELEVATOR PHONE	215.66
1635	LINDA AVENA	MAR 2019 - Accounting Services	1,250.00
1636	BROOKE GROUP, LLC.	JAN 2019- RAD/COAH & General Development	2,730.00
1637	CALL EXPERTS	MAR 2019 Call Center Service	143.35
1638	CITY OF OCEAN CITY	3/2019 -DUE TO CITY OCEAN CITY	5,000.00
1639	CLEAN SWEEP SERVICES	FEB 2019 -GENERAL CLEANING OF BVM	1,700.00
1640	COMCAST	FEB & MAR 2019 INTERNET SVC	475.94
1641	COPIER PLUS	2/5-3/4/2019 CONTRACT OVERAGE	13.08
1642	DELTA DENTAL OF NEW JERSEY INC.	APR 2019 DENTAL BENEFITS	345.68
1643	DRAIN DOCTOR	CLEANED MAIN SEWER LINE	285.00
1644	FLORENCE DRISCOLL	MAR 2019- TENANT SERVICES	200.00
1645	EISENSTAT, GABAGE & FURMAN	LEGAL SERVICES	1,732.00
1646	GLEN O. STULL	RETIREE MEDICARE/PRESCRIPTION REIMB	662.27
1647	HD SUPPLY FACILITIES MAINTENANCE, LTD.	MAINT SUPPLIES	16.68
1648	HUMANA INSURANCE COMPANY OF NY	APR 2019 - RETIREE PRESCRIPTION	24.40
1649	JOHN J. SPITZ	RETIREE MEDICARE/PRESCRIPTION REIMB	771.00
1650	NJ AMERICAN WATER	FEB 2019 WATER	7,968.76
1651	OMEGA PEST MANAGEMENT	PEST CONTROL	2,530.50
1652	PDQ SUPPLY	MAINT SUPPLIES	182.25
1653	RAYMOND WELCH	LOCK OUT	89.00
1654	ROBERT L. ROWELL	MAR 2019 - Maint Labor-Grounds	200.00
1655	SHERWIN WILLIAMS	PAINT SUPPLIES	59.06
1656	SHORE GUYS HEATING & AIR CONDITIONING, LLC.	P-TAC BACKUP UNIT BVM	1,125.00
1657	SOUTH JERSEY GAS	FEB 2019- GAS USAGE	6,226.10
1658	SUPERIOR VISION OF NJ, INC.	APR 2019 VISION BENEFITS	39.42
1659	THYSSENKRUP ELEVATOR	ELEVATOR MONITORING/SVC	3,315.21
1660	US BANK EQUIPMENT	MAR 2019 COPIER LEASE	185.01
1661	VECTOR SECURITY	INPECTION/MONITORING	324.00
1662	VERIZON DSL	FEB 2019- Fax and Phone Lines	135.84
1663	VERIZON WIRELESS	MAR 2019 MAINT CELL	54.75
1664	VINELAND HOUSING AUTHORITY	FEB 2019 MGMT FEES/REIMBURSEMENTS	6,269.60
1665	WALLACE HARDWARE	MAINT SUPPLIES	40.05
176499482910	HORIZON BCBS OF NJ	MAR 2019 HEALTH BENEFITS	4,347.13
<b>TOTAL FEB DISBURSEMENTS</b>			<b>\$ 60,405.40</b>
<b>PAYROLL -FEB 2019</b>			<b>\$ 3,873.70</b>
<b>PAYROLL TAXES -FEB 2019</b>			<b>\$ 1,214.34</b>
<b>ADP PAYROLL PROCESSING FEES -FEB 2019</b>			<b>\$ 108.62</b>
<b>PENSION - FEB 2019</b>			<b>\$ 649.44</b>
<b>PNC BANK FEE - FEB 2019</b>			<b>\$ 64.25</b>
<b>TOTAL BILL LIST -MAR 2019</b>			<b>\$ 66,315.75</b>

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-09  
Appointing Risk Management Consultant**

**WHEREAS**, the Ocean City Housing Authority is a member of the New Jersey Public Housing Authority Joint Insurance Fund, and;

**WHEREAS**, the bylaws of the New Jersey Public Housing Authority Joint Insurance Fund and the Municipal Excess Liability Joint Insurance Funds require that each municipality appoint a Risk Management Consultant to perform various professional services as detailed in the By-laws; and;

**WHEREAS**, the bylaws indicate a fee not to exceed six percent (6%) of the municipal assessment which expenditures represents reasonable compensation for the services required and was included the cost considered by the governing body, and;

**WHEREAS**, NJSA 40A:11-5(1)(m), specifically exempts the hiring of insurance consultants from competitive bidding as an extraordinary unspecifiable services and;

**WHEREAS**, the experience, knowledge of public insurance and risk management issues and judgmental nature required of a Risk Management Consultant are clearly an extraordinary unspecifiable service which therefore render competitive bidding impractical;

**NOW, THEREFORE, BE IT RESOLVED**, by the Board of Commissioners of the Housing Authority of the City of Ocean City does hereby appoint Thomas H. Heist Insurance Agency as its Risk Management Consultant for the calendar year 2019 in accordance with 40A:11-5; and

**BE IT FURTHER RESOLVED** that the governing body is hereby authorized and directed to execute the Consultant's Agreement annexed hereto and to cause a notice of this decision to be published according to NJSA:11-5(1), (a), (i).


**ADOPTED:** March 19, 2019

**VOTE:**

Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓				✓	
Commissioner McCall	✓					✓
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY

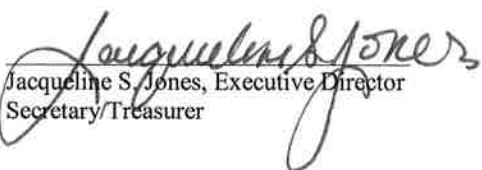
BY: \_\_\_\_\_

  
Robert Barr, Chairperson

**ATTESTATION:**

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

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

  
Jacqueline S. Jones, Executive Director  
Secretary/Treasurer

## **RISK MANAGEMENT CONSULTANT'S AGREEMENT**

**THIS AGREEMENT** entered into this 1st day of January, 2019, between the Housing Authority of the City of Ocean City (hereinafter referred to as the AUTHORITY) and Thomas H. Heist Insurance Agency (hereinafter referred to as the CONSULTANT).

**WHEREAS**, the CONSULTANT has offered to the AUTHORITY professional risk management consulting services as required in the bylaws of the New Jersey Public Housing Authority Joint Insurance Fund and the Municipal Excess Liability Joint Insurance Funds, and;

**WHEREAS**, the AUTHORITY desires these professional services pursuant to the resolution adopted by the governing body of the AUTHORITY at a meeting held March 19, 2019 and;

**NOW, THEREFORE**, the parties in consideration of the mutual promises and covenants set forth herein, agree as follows:

1. For and in consideration of the amount stated hereinafter, the CONSULTANT shall:
  - a) Assist the AUTHORITY in identifying its insurable Property & Casualty exposures and to recommend professional methods to reduce, assume or transfer the risk or loss.
  - b) Assist the AUTHORITY in understanding the various coverages available from the New Jersey Public Housing Authority Joint Insurance Fund and the Municipal Excess Liability Joint Insurance Funds.
  - c) Review with the AUTHORITY any additional coverages that the CONSULTANT feels should be carried but are not available from the FUND and subject to the AUTHORITY's authorization, place such coverages outside the FUND.
  - d) Assist the AUTHORITY in the preparation of applications, statements of values, and similar documents requested by the FUND, it being understood that this Agreement does not include any appraisal work by the CONSULTANT.
  - e) Review Certificates of Insurance from contractors, vendors and professionals when requested by the AUTHORITY.
  - f) Review the AUTHORITY's assessment as prepared by the FUND and assist the AUTHORITY in the preparation of its annual insurance budget.
  - g) Review the loss and engineering reports and generally assist the safety committee in its loss containment objectives. Also, attend no less than one (1) Authority safety committee meeting per annum to promote the safety objectives and goals of the AUTHORITY and the FUND.
  - h) Assist where needed in the settlement of claims, with the understanding that the scope of the CONSULTANT's involvement does not include the work normally done by a public adjuster.
  - i) Perform any other risk management related services required by the FUND's bylaws.



2. In exchange for the above services, the CONSULTANT shall be compensated in the following manner:
- a) The AUTHORITY authorizes the FUND to pay its CONSULTANT compensation for services rendered, an amount equal to six percent (6%) of the AUTHORITY's annual assessment as promulgated by the FUNDS. Said fee shall be paid to the CONSULTANT within thirty (30) days of payment of the AUTHORITY's assessment.
  - b) For any insurance coverages authorized by the AUTHORITY to be placed outside the FUND, the CONSULTANT shall receive as compensation the normal brokerage commissions paid by the insurance company. The premiums for said policies shall not be added to the FUND's assessment in computing the fee outlined in 2 (a).
  - c) If the AUTHORITY shall require of the CONSULTANT extra services other than those outlined above, the CONSULTANT shall be paid by the AUTHORITY a fee at the rate of \$100 per hour, in addition to actual expenses incurred.
3. The term of this Agreement shall be one (1) year beginning on 1<sup>st</sup> day of January, 2019 and ending on 31<sup>st</sup> day of December, 2019. However, this Agreement may be terminated by either party at any time by mailing to the other written notice, certified mail return receipt, calling for termination at not less than thirty (30) days thereafter. In the event of termination of this Agreement, the CONSULTANT's fees outlined in 2 (a) above shall be prorated to date of termination.

**ATTEST:**

**AUTHORITY:**

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**ATTEST:**

**CONSULTANT:**

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Note: This sample has been promulgated by the MEL to assist municipalities or authorities in preparing or negotiating agreements with their risk managers. It does not represent an official statement of MEL policy, nor is it an endorsement of any form or amount of compensation. Careful consideration at the local level should be given to determine how the document may be amended to meet a community's or authority's unique needs or desires. Prior to use, the sample should also be reviewed by the local attorney for form, consistency with local JIF bylaws, inclusion of affirmative action language, etc.

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-10**

**Resolution to Dispose of Furniture and Equipment  
Utilizing the Disposition Policy**

**WHEREAS**, it is necessary from time to time for the Ocean City Housing Authority of the Ocean City to dispose of surplus property; and

**WHEREAS**, the Authority owns furniture and equipment (a complete list of same is attached as Exhibit "A"), which is obsolete; and

**WHEREAS**, the Authority no longer has use for the aforesaid furniture and equipment; and

**WHEREAS**, the Authority wishes to dispose of the aforesaid furniture and equipment by public sale utilizing the Authority's Disposition Policy; and

**NOW, THEREFORE, BE IT RESOLVED**, by the Board of Commissioners of the Housing Authority of the City of Ocean City that the Executive Director is directed to dispose of the aforesaid furniture and equipment by public sale utilizing the Authority's Disposition Policy.

**ADOPTED:** March 19, 2019

**VOTE:**

Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓					✓
Commissioner McCall	✓				✓	
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY

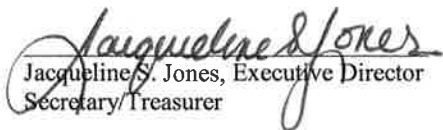
BY: \_\_\_\_\_

  
Robert Barr, Chairperson

**ATTESTATION:**

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

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

  
Jacqueline S. Jones, Executive Director  
Secretary/Treasurer

### March 2019 GovDeals.com Inventory Disposition Listing

[illegible]

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-11**

**Amending the Ocean City Housing Authority's Personnel Policy & Employee Manual**

**WHEREAS**, periodically it becomes necessary for the Housing Authority to update its internal policies in order to remain in compliance with federal, state, and local laws; and,

**WHEREAS**, the Board of Commissioners has determined that there is a need to amend its personnel policies and procedures to ensure that employees and prospective employees are treated in a manner consistent with these laws and regulations; and,

**WHEREAS**, the act requires employers to provide employees up to forty (40) hours of paid sick leave; and,

**WHEREAS**, the amendment clarifies accrued vacation, personal and sick leave during Family and Medical Leave Act (FMLA) and at separation and retirement; and,

**WHEREAS**, the amendment clarifies notification of illness call out procedure; and,

**BE IT FURTHER RESOLVED** that the Housing Authority hereby adopts this amended Personnel Policy and Employee Manual dated March 19, 2019 covering its employees in keeping with local public practices and rescinds any previously approved Personnel Policy.

**BE IT FURTHER RESOLVED** that the final version of the Personnel Policies & Employee Manual shall be distributed to the Authority's employees and appointed officials on or by March 31, 2019.

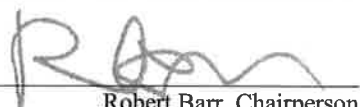
**ADOPTED:** March 19, 2019

***VOTE:***

Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓					✓
Commissioner McCall	✓				✓	
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY

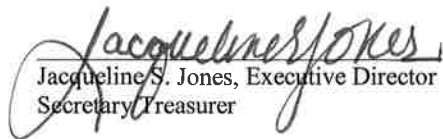
BY: \_\_\_\_\_

  
Robert Barr, Chairperson

***ATTESTATION:***

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

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

  
Jacqueline S. Jones, Executive Director  
Secretary/Treasurer

Ocean City Housing Authority  
204 4<sup>th</sup> Street  
Ocean City, New Jersey 08226

## PERSONNEL POLICY & EMPLOYEE MANUAL

**Effective Date: 8/15/2017**  
**Resolution: 2017-56**

**Effective Date: 9/18/2018**  
**Resolution: 2018-39**

**Effective Date: 3/19/2019**  
**Resolution: 2019-11**

There is no promise, agreement, or contract of any kind contained in this Manual. Regardless of what the Manual says or provides, the Authority promises nothing and remains free to change wages and all other working conditions without having to consult anyone or with anyone's agreement. The Authority continues to have the power to terminate anyone with or without good cause subject to this Manual. Any omissions or errors in this Manual do not change the intent of the Manual.

# PAID & UNPAID LEAVE

The Authority recognizes that from time to time employees must be absent from work. The Authority has a policy that provides specific hours allocated for vacation time, personal time, and sick leave, according to the number of years employed by the Authority. Employees will not accrue paid vacation, sick, and/or personal days during any leave of absence without pay or suspension from employment.

However, there are certain requirements regarding the utilization of time given. The following requirements pertain to all employees:

## SECTION 1: VACATION TIME AND REQUESTS FOR VACATION TIME.

### A. Requests for Vacation Time.

All employees shall make their request for leave via the OCHA time off request form. The immediate supervisor shall either grant or deny the employee's request for leave on the form. Denial of such requests can depend upon circumstances within a department.

All requests for leave must be submitted to the Supervisor at least three (3) days before the time requested. The leave must be approved prior to the employee taking the time off. Request for leave, which cannot be anticipated by the employee at least (3) days in advance, may be granted, by the Executive Director. Vacation preferences shall be granted in order of seniority.

Approval of vacation leave will be granted at the discretion of the immediate supervisor or the Executive Director, depending on department needs.

Employees shall not be eligible for vacation leave during the first ninety (90) days of employment. Any requests for leave during the first ninety (90) days of employment shall be granted or denied at the sole discretion of the Executive Director.

### B. Accumulation of Vacation Time.

All full time employees shall accrue the following vacation leave. Vacation leave time is earned each pay period based on the length of employment. Increases occur based on the employee's full time anniversary date. Only earned vacation time can be used for paid time off.

<u>HIRED PRIOR TO 8/15/2017</u> <u>Length of Employment</u>	<u>Vacation Leave</u>	<u>HIRED AFTER 8/15/2017</u> <u>Length of Employment</u>	<u>Vacation Leave</u>
First Year – 5 years	1 Working day per month	First Year	.417 per month (5 days per year)
6-12 Years	1.25 days per month	2+ Years	.833 per month (10 days per year)
13-20 Years	1.66 days per month		
21+ Years	2 days per month		

Vacation time shall not be accumulated in excess of (2) year's earned time. Upon a full-time employee's separation of employment accrued vacation balance will be paid to the employee, subject to the 2-year limitation

on vacation time accumulation. All accumulated vacation and personal time shall be paid out at the employee's salary rate at retirement, subject to the 2-year limitation on vacation time accumulation. Paid vacation days shall not accrue during a leave of absence without pay or suspension.

## SECTION 2: HOLIDAYS.

The following days are recognized as paid holidays for full time employees:

New Year's Day	Labor Day
Martin Luther King Day (observed)	Columbus Day (observed)
Lincoln's Birthday (observed the Friday preceding Washington's Birthday)	Veteran's Day (observed)
Washington's Birthday (observed)	Thanksgiving Day
Good Friday	Thanksgiving Holiday (observed the day after Thanksgiving Day)
Memorial Day	Christmas Eve Day
Independence Day	Christmas Day

If any of the above holidays fall on a Saturday, the preceding Friday will be observed. If any of the above holidays fall on a Sunday, the following Monday will be observed.

Employees must work the day before and the day after each observed holiday in order to receive holiday pay unless a prior written request to be off has been made and approved by the Executive Director.

Any days that federal government offices are closed via Executive Order by the President of the United States shall be considered a paid day off for all full time employees.

## SECTION 3: PERSONAL DAYS.

1. Full Time Employees shall receive two (2) personal days at the beginning of fiscal year (October 1<sup>st</sup>). Personal days must be used by September 30<sup>th</sup> of each year.
2. No employee shall be authorized a personal day during the first ninety (90) days of employment.
3. Approval of this request may be denied by management should adequate staff be unavailable to cover the shift/work, but shall not be reasonably withheld.
4. Upon separation of employment accrued personal balance will be paid to the employee.

## SECTION 4: SICK LEAVE-ANNUALLY PROVIDED & EMPLOYEE EARNED.

### A. USE

~~Sick leave may be used for a full time employee's absence from duty because of personal illness, which prevents him/her from performing the usual duties of his/her position; exposure to contagious disease; or to seek medical treatment. Sick leave may also be used when necessary to attend to a member of the employee's immediate family who resides in the employee's household.~~

Sick leave may be used for a full time/part time employee's absence for the following reasons:



- Diagnosis, care treatment, or recovery for a mental or physical illness, injury, or health condition;
- Preventive medical care for the employee;
- To care for a family member during diagnosis, care, treatment or recovery for a mental health condition or physical illness, injury or health condition; or when an employee's family member needs preventive medical care;
- Absences due to your or your family member being the victim of domestic violence or sexual violence;
- To attend school-related conferences, meetings or events regarding your child's education; or to attend a school-related meeting regarding your child's health;
- Closure of the Authority or the school or place of care of the employee's child because of an epidemic or public health emergency;

At the Authority's sole discretion, Sick Leave hours may be used for other reasons not included in this paragraph.

## B. ENTITLEMENT

### **FULL TIME EMPLOYEES**

No employee shall be entitled to any paid sick leave unless the Ocean City Housing Authority has employed him/her for ninety (90) consecutive days.

At the end of the ninetieth (90th) consecutive day of employment, said employee shall be entitled to sick leave retroactive to the date of commencement of his employment, as described below.

Sick leave time is earned each pay period based on the length of employment. Increases occur based on the employee's full time anniversary date. Only earned sick time can be used for paid sick time off.

Paid sick days shall not accrue during a leave of absence without pay or suspension.

### **PART TIME EMPLOYEES**

No Part Time Employee shall be entitled to any paid sick leave unless the Housing Authority of the City of Vineland has employed him/her for one hundred twenty (120) consecutive days. Existing employees as of October 29, 2018 can use their accrued sick leave beginning on the 120<sup>th</sup> calendar day after October 29, 2018 which is February 26, 2019. An employee hired after October 29, 2018 may use accrued sick leave on the 120<sup>th</sup> calendar after the employee begins working.

At the end of the one hundred twenty (120) consecutive day of employment, said employee shall be entitled to sick leave retroactive to the date of commencement of his employment, as described below.

Sick leave time is earned each pay period based on the calculation listed below. Only earned sick time can be used for paid sick time off.

Part Time Employees may only use up to 40 hours of sick leave per benefit year.

Paid sick days shall not accrue during a leave of absence without pay or suspension.

## C. CALCULATIONS OF SICK LEAVE: FULL TIME

All **full time employees** shall be entitled to the following sick leave:



1. Employees hired prior to 8/15/2017 are entitled to 1.25 working days of sick per calendar month (15 days per year).
2. Employees hired after 8/15/2017 are entitled to .83 working days of sick per calendar month (10 days per year).
3. Employees will be paid for one-half of their total accumulated unused sick time, or six months salary, whichever is less, upon termination. In no even shall the maximum cash-out of time exceed \$12,000. Employees hired after 8/15/2017 are not entitled to accrued sick time paid out at termination (see Section 8: Unused Sick Allowance – At Termination).

All **part time employees** shall be entitled to the following sick leave:

1. Accrual begins October 29, 2018 or the first day of employment, whichever is later.
2. Rate of accrual is 1 hour for every 30 hours worked, up to a maximum of 40 hours of leave per benefit year (October 1-September 30)
3. Part time employees with 40 sick leave hours will not accrue any additional sick leave until and unless the employee's accrued sick leave balance falls below 40 hours.
4. Upon a part time employee's voluntary or involuntary termination, resignation, or retirement from employment, any unused sick leave, regardless of how it is accrued, shall be forfeited and the Authority will not pay you for any unused sick leave.

Employees who are provided with more sick leave than they would otherwise be entitled to under the New Jersey Paid Sick Leave Act – whether pursuant to this Section or a separate Agreement – shall not accrue any additional sick leave under the Act.

#### D. NOTIFICATION OF ILLNESS

An employee who does not expect to report to work on any working day must notify or cause to be notified, the appropriate designated supervisor or his alternate,

**or**

Cause a message to be delivered in his/her behalf not less than one (1) hour prior to the beginning of his/her shift. **Failure to call** or have a personal message delivered **shall be considered an unauthorized absence**, without leave.

**And**

Must call answering service not less than one (1) hour prior to the beginning of his/her shift and state reason for absence. **Failure to call** answering service **shall be considered an unauthorized absence**, without leave.

An employee who is unable to work because of the need for sick leave will notify the appropriate supervisor or designee at least one (1) hour before the normal starting time, in so far as possible AND must call the answering service not less than one (1) hour prior to the beginning of his/her shift and state reason for absence. Failure to notify supervisor or designee and call the answering service shall be considered an unauthorized absence, without leave. If the employee indicated that he or she will be unable to work for more than one (1) day, such notice will be deemed sufficient for the additional days as well.

#### E. ABSENTEEISMS: (3 CONSECUTIVE DAYS)

If an employee is absent for three (3) consecutive working days for any reason as set forth in this Section, said employee shall present proof of illness from employee's doctor stating that he is able to resume normal duties, without

restriction. A doctor's note may also be required whenever reasonable to verify illness. Failure to produce a doctor's note may be grounds for denial of sick leave provided the request for verification is reasonable.

**F. EXHAUSTION OF SICK LEAVE**

If an employee has exhausted all sick leave, said employee shall use vacation and/or personal time. Sick leave shall not be construed as vacation time and the use of sick time as vacation time will subject the employee to disciplinary action.

**G. CHRONIC ILLNESS**

When an illness is of a chronic or recurring nature causing occasional absences, one proof of illness shall be required per thirty-(30) day period.

**H. ADVANCES IN SICK LEAVE**

Advances of unearned sick leave will not be granted. If an employee exhausts vacation, sick leave, and personal days and experiences an authorized absence, employee will not be paid and may be subject to disciplinary action.

**I. FAILURE TO PROVIDE MEDICAL EVIDENCE OF ILLNESS**

Failure to provide medical evidence of illness will result in denial of sick leave benefits, and the time involved during which the employee was absent shall be charged against vacation and/or personal time.

The Authority reserves the right to have the employee examined by a physician of the Authority's choice when there exists an apparent pattern of leave abuse to ascertain whether or not such employee is in fact ill and unable to perform his/her duties.

Should the employee refuse to submit to an examination, or after the examination is determined that such employee could have performed his/her regular duties, then the Authority shall charge the absence against the employee's accrued vacation leave.

**J. ABUSE OF SICK LEAVE**

Employees absent on sick leave for an aggregate of more than 15 days in a 12-month period and exhibiting an apparent pattern of leave abuse may be required to provide a doctor's note for any sick time used to ensure employee is receiving proper medical attention.

**K. UNUSED SICK LEAVE**

**FULL TIME EMPLOYEES**

ANY amount of sick allowance not used in any calendar year shall accumulate to the employee's credit from year to year to be used if and when needed for such purpose.

**PART TIME EMPLOYEES**

Up to 40 hours of unused earned sick leave can be carried over into the next benefit year. However, part time employees may only use up to 40 hours of leave per benefit year.

## **SECTION 5: LEAVE OF ABSENCE WITHOUT PAY.**

### **A. Leaves of Absence without Pay.**

Employees may be granted a personal leave of absence for up to six months at the sole discretion of the Executive Director if the leave does not cause undue operational disruption. The leave must include the use of any accrued vacation, personal and sick leave time, regardless of the length of leave requested. The portion of the leave that runs beyond the exhaustion of vacation, personal and sick leave will be without pay or longevity credit. In exceptional circumstances, the Executive Director may extend a leave of absence for an additional six months, if such extension is considered in the best interests of the Authority.

Personal leaves are not granted for the purpose of seeking or accepting employment with another employer, or for extended vacation time. Employees on personal leave of absence for more than two weeks in any month will not receive holiday pay, and will not accrue personal leave, sick leave or vacation time for that month. Health benefits may also be impacted. Refer to the Authority's Health Benefits Policy. A personal leave is granted with the understanding that the employee intends to return to work for the Authority. If the employee fails to return within five business days after the expiration of the leave, the employee shall be considered to have resigned.

### **B. Impact of Leave of Absence without Pay upon Health Benefits and Pension Credit.**

Employees on a leave of absence without pay may continue coverage for themselves or their dependents under the Housing Authority group plan by taking advantage of the COBRA provision. Employees will no longer receive service and salary credit in the PERS system while on leave of absence without pay. Refer to Public Employees Retirement System Rules and Regulations for further guidance.

## **SECTION 6: FAMILY AND MEDICAL LEAVE ACT (FMLA) and NEW JERSEY LEAVE ACT (FLA) POLICY.**

### **FAMILY AND MEDICAL LEAVE ACT (FMLA)**

Employees may be eligible for an unpaid family and medical leave under the federal Family and Medical Leave Act ("FMLA"). In order to be eligible for such leave, employees must have one (1) year of service with the Authority; and, at least 1,250 hours of work (for Federal leave) during the previous twelve (12) months and is employed by a company with at least 50 or more employees are employed by the employer within 75 miles of the worksite, governmental agency or a school. Eligible employees may receive up to twelve (12) weeks of leave per year for FMLA.

Upon written notice, eligible employees are entitled to a family or medical leave for up to twelve weeks to care for a newly born or adopted child or a seriously ill immediate family member, including civil union partner, or for the employee's own serious health condition that makes the employee unable to perform the functions of the employee's position. Eligible employees who take leave under this policy must use all accrued available sick, vacation, and personal days during the leave. The employee will not continue to accrue vacation, sick or personal days for the period of the leave.

### **NEW JERSEY LEAVE ACT (FLA)**

Employees may also may be eligible for family and/or medical leave pursuant to the New Jersey Family Leave Act ("FLA"). In order to be eligible for such leave, employees must have one (1) year of service with the Authority; and, at least 1,000 hours of work during the previous twelve (12) months. Eligible employees may receive up to twelve (12) weeks every twenty-four (24) months (FLA).

Upon written notice, eligible employees are entitled to a family or medical leave for up to twelve weeks to care for a newly born or adopted child or a seriously ill immediate family member, including civil union partner. Eligible employees who take leave under this policy must use all accrued available sick, vacation, and personal days during the

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-12  
A Resolution Awarding Janitorial Cleaning Services Contract**

**WHEREAS**, the Ocean City Housing Authority recognizes the need to have janitorial cleaning services; and

**WHEREAS**, the Authority received quotes for janitorial cleaning services; and,

**WHEREAS**, **Clean Sweep Services of NJ Inc. – 625 Bay Avenue, Ocean City, NJ** provided the lowest most responsible rates; and,

**WHEREAS**, funds are available for the purpose of entering into a contract not to exceed \$40,000 (see attached certification); and,

**WHEREAS**, the Authority recommends the award of contract be made to **Clean Sweep Services of NJ Inc.**; and,

**NOW, THEREFORE, BE IT RESOLVED** that the Board of Commissioners hereby awards the contract for janitorial cleaning services and approves the expenditure of funds in the amount not to exceed \$40,000 to **Clean Sweep Services of NJ Inc. – 625 Bay Avenue, Ocean City, NJ**.

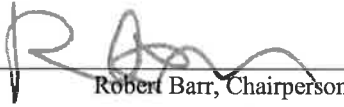
**ADOPTED:** March 19, 2019

**VOTE:**

Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓					✓
Commissioner McCall	✓				✓	
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY

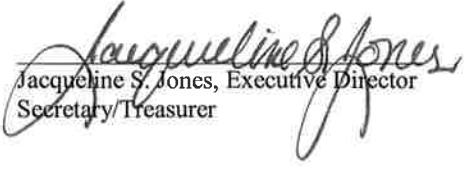
BY: \_\_\_\_\_

  
Robert Barr, Chairperson

**ATTESTATION:**

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

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

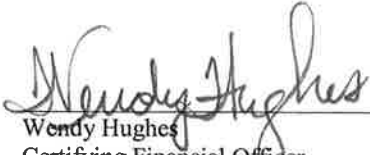
  
Jacqueline S. Jones, Executive Director  
Secretary/Treasurer

## CERTIFICATION

Funding is available for:

### JANITORIAL CLEANING SERVICES CONTRACT

from the Operating Budget. The line item to be charged for the above expenditure is Account # 4430-10-000.

  
Wendy Hughes  
Certifying Financial Officer  
3/19/19  
Date

## **Service Proposal**

### **Cleanings**

<b>Description</b>	<b>Cost</b>	<b>Occurrence</b>
<b>Monday Service</b>	<b>\$275.00</b>	<b>Weekly</b>
<b>Thursday Service</b>	<b>\$150.00</b>	<b>Weekly</b>

Please make checks payable to: **Clean Sweep Services of NJ, Inc.**

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-13  
A Resolution Awarding Landscaping Services Contract**

**WHEREAS**, the Ocean City Housing Authority recognizes the need to have landscaping services; and

**WHEREAS**, the Authority received quotes for landscaping services; and,

**WHEREAS**, **RPM Landscape Contractor LLC – 125 Pomona Road, Galloway, NJ** provided the lowest most responsible rates; and,

**WHEREAS**, funds are available for the purpose of entering into a contract not to exceed \$40,000 (see attached certification); and,

**WHEREAS**, the Authority recommends the award of contract be made to **RPM Landscape Contractor LLC**; and,

**NOW, THEREFORE, BE IT RESOLVED** that the Board of Commissioners hereby awards the contract for landscaping services and approves the expenditure of funds in the amount not to exceed \$40,000 to **RPM Landscape Contractor LLC – 125 Pomona Road, Galloway, NJ**.

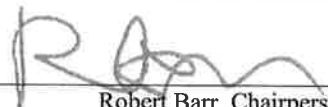
**ADOPTED:** March 19, 2019

**VOTE:**

Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓				✓	
Commissioner McCall	✓					✓
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY

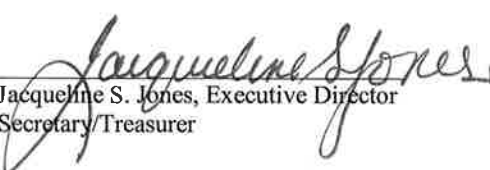
BY: \_\_\_\_\_

  
Robert Barr, Chairperson

**ATTESTATION:**

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

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

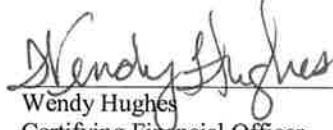
  
Jacqueline S. Jones, Executive Director  
Secretary/Treasurer

## CERTIFICATION

Funding is available for:

### LANDSCAPING SERVICES CONTRACT

from the Operating Budget. The line item to be charged for the above expenditure is Account # 4430-09-000.

  
Wendy Hughes  
Certifying Financial Officer  
3/19/19  
Date



# THE HOUSING AUTHORITY OF THE CITY OF OCEAN CITY

UNIT PRICING - CONTRACTOR MUST FILL IN ALL FIELDS - DO NOT ALTER FORM  
LANDSCAPING SERVICES

UNIT PRICING TABLE PAGE 1 OF 1

CODE	DESCRIPTION	UNIT PRICE	# OF TIMES SERVICES ARE RENDERED	TOTAL PRICE
CUT-BAYVIEW	Provide price to cut grass at Bayview Manor (Defined as "Cutting" in specification above)	\$165.00	28	\$4,620.00
CUT-PECKS_SENIOR	Provide price to cut grass at Pecks Beach Senior (Defined as "Cutting" in specification above)	\$100.00	28	\$2,800.00
CUT-PECKS_FAMILY	Provide price to cut grass at Pecks Beach Family (Defined as "Cutting" in specification above)	\$135.00	28	\$3,780.00
EDG-BAYVIEW	Provide price to edge at Bayview Manor (Defined as "Edging" in specification above)	\$20.00	9	\$180.00
EDG-PECKS_SENIOR	Provide price to edge at Pecks Beach Senior (Defined as "Edging" in specification above)	\$40.00	9	\$360.00
EDG-PECKS_FAMILY	Provide price to edge at Pecks Beach Family (Defined as "Edging" in specification above)	\$40.00	9	\$360.00
SHRB-BAYVIEW	Provide price to trim shrubs at Bayview Manor (Defined as "Trimming of Shrubs" in specification above)	\$375.00	3	\$1,125.00
SHRB-PECKS_SENIOR	Provide price to trim shrubs at Pecks Beach Senior (Defined as "Trimming of Shrubs" in specification above)	\$405.00	3	\$1,215.00
SHRB-PECKS_FAMILY	Provide price to trim shrubs at Pecks Beach Family (Defined as "Trimming of Shrubs" in specification above)	\$200.00	3	\$600.00
WD-BAYVIEW	Provide price to provide weed control at Bayview Manor. (Defined as "Weed Control" in specification above)	\$40.00	6	\$240.00
WD-PECKS_SENIOR	Provide price to provide weed control at Pecks Beach Senior. (Defined as "Weed Control" in specification above)	\$65.00	6	\$390.00
WD-PECKS_FAMILY	Provide price to provide weed control at Pecks Beach Family. (Defined as "Weed Control" in specification above)	\$70.00	6	\$420.00
LABORER	Provide an hourly price for a Foreman for any services not defined above	\$40 /HR		
FOREMAN	Provide an hourly price for a Laborer for any services not defined above	\$55 /HR		
MATERIAL MARKUP	Provide a percentage of mark-up for any materials not requested above, percentage over actual vendor cost	10 %		

ESTIMATED QUANTITIES LISTED ARE FOR CALCULATION PURPOSES ONLY.

THE HOUSING AUTHORITY RESERVES THE RIGHT TO ADJUST THESE QUANTITIES AS NEEDED.

Total Price of all rows \$13,290.00

thirteen thousand two hundred ninety dollars  
TOTAL PRICE IN WRITTEN WORD FORM

RPM Landscape Contractor LLC  
Name of Firm Submitting Proposal

Signature of Proposer

03-14-19  
Date

The undersigned hereby proposes and agrees to furnish all the necessary labor, materials, equipment, tools and services necessary for the work specified.

The undersigned has examined the location of the proposed work, the plans specifications, and other contract documents and is familiar with the local conditions at the place where the work is to be performed.

The undersigned declares that this proposal is made without connection with any other person or persons making proposals for the same work and is, in all respects, fair and without collusion or fraud.

ITEM	DESCRIPTION	UNIT PRICE
MLCH-BAYVIEW	Provide Price to mulch ALL garden beds on the site (Bayview Manor) with 3" of black root mulch (includes labor & material).	\$875.00
MLCH-DELIVD	Provide price for material & delivery to provide 1 Yard of Black root mulch (Delivered to any of the 3 sites)	\$80.00

Vendor is required to visit each property to verify the current site conditions and the number of garden beds present on each site, if a tree currently has mulch around it then it shall also be included in the cost to mulch the garden beds. Garden bed shall be free from weeds prior to installing mulch, weed killer shall also be applied where needed.

No count or clarification will be issued on the number of garden beds present, sizes of garden beds, or quantity of mulch needed. It is the vendor's responsibility to visit each site and determine the quantities and costs involved. See site maps in this specification for property boundaries.

## QUOTE FORM

thirteen thousand two hundred ninety dollars  
Total Price of all rows listed on the Unit Pricing Table

RPM LandScape Contractor LLC  
Company Name


20-4408575  
Federal I.D. # or Socail Security #

125 Pomona Road, Galloway, NJ 08205  
Address

The undersigned hereby proposes and agrees to furnish all the necessary labor, materials, equipment, tools and services necessary for the work specified.

The undersigned has examined the location of the proposed work, the plans specifications, and other contract documents and is familiar with the local conditions at the place where the work is to be performed.

The undersigned declares that this proposal is made without connection with any other person or persons making proposals for the same work and is, in all respects, fair and without collusion or fraud.

  
Signature of Authorized Agent

Robert P. Miller Jr.  
Type or Print Name

Title: managing member

609-568-6081  
Telephone Number

3-14-19  
Date

609-568-6145  
Fax Number

rmiller@rpmlandscaping.com  
E-mail address

**Ocean City Housing Authority  
County of Cape May  
State of New Jersey**

**RESOLUTION NO. 2019-14  
APPROVAL OF OPERATING SUBSIDY 2019**

**WHEREAS**, it becomes necessary to prepare and submit the Calculation of Operating Subsidy of the Ocean City Housing Authority for the calendar year 2019 per HUD form 52723 attached; and

**WHEREAS**, this Calculation has anticipated subsidy at \$373,460;

**NOW, THEREFORE, BE IT RESOLVED**, by the Commissioners of the Ocean City Housing Authority that the Calculation of Operating Subsidy per HUD form 52723 for the calendar year 2019 be approved.


**ADOPTED:** March 19, 2019

***VOTE:***

Commissioner	Yes	No	Abstain	Absent	Motion	Second
Commissioner Dattilo	✓					
Vice Chairman Halliday	✓					✓
Commissioner McCall	✓				✓	
Commissioner Scarborough	✓					
Commissioner Jackson				✓		
Commissioner Henry	✓					
Chairman Barr	✓					

OCEAN CITY HOUSING AUTHORITY


BY: \_\_\_\_\_

  
Robert Barr, Chairperson

***ATTESTATION:***

This resolution was acted upon at the Regular Meeting of the Ocean City Housing Authority's Board of Commissioners held on March 19, 2019 at Administrative Offices – 204 4<sup>th</sup> Street, Ocean City, New Jersey.

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

  
Jacqueline S. Jones, Executive Director  
Secretary/Treasurer

**Operating Fund  
Calculation of Operating Subsidy  
PHA-Owned Rental Housing**

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

OMB Approval No. 2577-0029 (exp.08/31/2020)

Public Reporting Burden for this collection of information is estimated to average .75 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 collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. This information is required by Section 9(a) of the U.S. Housing Act of 1937, as amended, and by 24 CFR Part 990 HUD regulations. HUD makes payments for the operation and maintenance of low-income housing projects to PHAs/projects. The Operating Fund determines the amount of operating subsidy to be paid to PHAs/projects. PHAs/projects provide information on the Project Expense Level (PEL), Utilities Expense Level (UEL), Other Formula Expenses (Add-ons) and Formula Income – the major Operating Fund components. HUD reviews the information to determine each PHA's/project's Formula Amount and the funds to be obligated for the Funding Period to each PHA/project based on the appropriation by Congress. HUD also uses the information as the basis for requesting annual appropriations from Congress. Responses to the collection of information are required to obtain a benefit. The information requested does not lend itself to confidentiality. Formula Amount and the funds to be obligated for the Funding Period to each PHA/project based on the appropriation by Congress. HUD also uses the information as the basis for requesting annual appropriations from Congress. Responses to the collection of information are required to obtain a benefit. The information requested does not lend itself to confidentiality.

Enter Total Number of ACC Units for this PHA > 121

**1. Name and Address of Public Housing Agency:**

Ocean City Housing Authority  
204 Fourth Street  
Ocean City NJ 08226

**2. Funding Period:** 01/01/2019 to 12/31/2019

**3. Type of Submission:**

☒ Original

☐ Revision No.

**4. ACC Number:**

NY-410

**5. Fiscal Year End:**

☐ 12/31 ☐ 03/31 ☐ 06/30 ☒ 09/30

**6. Operating Fund Project Number:**

NJ053000001

**7. DUNS Number:**

960919223

HUD Use Only

**8. ROFO Code:**

0239

**Section 2**

**Calculation of ACC Units for 12-month period from July 1 to June 30 that is prior to the first day of the Funding Period:**

	ACC Units on 7/1/2017	Units Added to ACC (+)	Units Deleted from ACC (-)	ACC Units on 6/30/2018 (=)
Requested by PHA	121	0	0	121
HUD Modifications				

Line No.	Category	Column A Unit Months		Column B Eligible Unit Months (EUMs)		Column C Resident Participation Unit Months	
		Req'd by PHA	HUD Mod.	Req'd by PHA	HUD Mod.	Req'd by PHA	HUD Mod.

**Categorization of Unit Months:**

☒ First of Month

**Occupied Unit Months**

☐ Last of Month

01	Occupied dwelling units -- by public housing eligible family under lease	1,414		1,414		1,414	
02	Occupied dwelling units -- by PHA employee, police officer, or other security personnel who is not otherwise eligible for public housing	0				0	
03	New units -- eligible to receive subsidy during the Funding Period but not included on Lines 01, 02, or 05-13 of this section	0		0		0	
04	New units -- eligible to receive subsidy from 10/1 to 12/31 of previous funding period but not included on previous Calculation of Operating Subsidy	0		0		0	

**Vacant Unit Months**

05	Units undergoing modernization	0		0			
06	Special use units	0		0			
06a	Units on Line 02 that are occupied by police officers and that also qualify as special use units			0			
07	Units vacant due to litigation	0		0			
08	Units vacant due to disasters	0		0			
09	Units vacant due to casualty losses	0		0			
10	Units vacant due to changing market conditions	0		0			
11	Units vacant and not categorized above	38					

**Other ACC Unit Months**

12	Units eligible for asset repositioning fee and still on ACC (occupied or vacant)	0					
13	All other ACC units not categorized above	0					

**Calculations Based on Unit Months:**

14	Limited vacancies		38		
15	<b>Total Unit Months</b>	1,452	1,452	1,414	
16	Units eligible for funding for resident participation activities (Line 15C divided by 12)			118	

**Special Provision for Calculation of Utilities Expense Level:**

17	Unit months for which actual consumption is included on Line 01 of form HUD-52722 and that were removed from Lines 01 through 11, above, because of removal from inventory, including eligibility for the asset repositioning fee		0		
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**Section 3**

Line No.	Description	Requested by PHA	HUD Modifications
----------	-------------	------------------	-------------------

**Part A. Formula Expenses****Project Expense Level (PEL)**

01	PUM project expense level (PEL)	\$394.85	
02	Inflation factor	1.01700	
03	PUM inflated PEL (Part A, Line 01 times Line 02)	\$401.56	
04	PEL (Part A, Line 03 times Section 2, Line 15, Column B)	\$583,065	

**Utilities Expense Level (UEL)**

05	PUM utilities expense level (UEL) (from Line 26 of form HUD-52722)	\$159.84	
06	UEL (Part A, Line 05 times Section 2, Line 15, Column B)	\$232,088	

**Add-Ons**

07	Self-sufficiency		
08	Energy loan amortization	\$0	
09	Payment in lieu of taxes (PILOT)	\$21,582	
10	Cost of independent audit	\$9,000	
11	Funding for resident participation activities	\$2,950	
12	Asset management fee <input type="checkbox"/> Eligible for an Asset Management Fee	\$0	
13	Information technology fee	\$2,904	
14	Asset repositioning fee	\$0	
15	Costs attributable to changes in federal law, regulation, or economy		
16	<b>Total Add-Ons</b> (Sum of Part A, Lines 07 through 15)	\$36,436	
17	<b>Total Formula Expenses</b> (Part A, Line 04 plus Line 06 plus Line 16)	\$851,589	

**Part B. Formula Income**

01	PUM formula income	\$329.29	
02	Resident Paid Utility (RPU) Energy Performance Contract (EPC) Benefit	\$0.00	
03	PUM adjusted formula income (Sum of Part B, Lines 01 and 02)	\$329.29	
04	<b>Total Formula Income</b> (Part B, Line 03 times Section 2, Line 15, Column B)	\$478,129	

**Part C. Other Formula Provisions**

01	Moving-to-Work (MTW)	\$0	
02	Transition funding	0.00	\$0
03	Other		
04	<b>Total Other Formula Provisions</b> (Sum of Part C, Lines 01 through 03)	\$0	

**Part D. Calculation of Formula Amount**

01	Formula calculation (Part A, Line 17 minus Part B, Line 04 plus Part C, Line 04)	\$373,460	
02	Cost of independent audit (Same as Part A, Line 10)	\$9,000	
03	Formula amount (Greater of Part D, Lines 01 or 02)	\$373,460	

**Part E. Calculation of Operating Subsidy (HUD Use Only)**

01	Formula amount (Same as Part D, Line 03)		
02	Adjustment due to availability of funds		
03	HUD discretionary adjustments		
04	<b>Funds Obligated for Period</b> (Part E, Line 01 minus Line 02 minus Line 03) Appropriation symbol(s):		

## Section 4

Remarks (provide section, part and line numbers):

## Section 5

- ☒ In accordance with 24 CFR 990.215, I hereby certify that Ocean City Housing Authority Housing Agency is in compliance with the annual income reexamination requirements and that rents and utility allowance calculations have been or will be adjusted in accordance with current HUD requirements and regulations.
- ☐ In accordance with 24 CFR 990.255 through 990.285 of Subpart H – Asset Management, I hereby certify that Ocean City Housing Authority has less than 250 units and is in compliance with asset management. I understand in accordance with 24 CFR 990.190(f), PHAs that are not in compliance with asset management will forfeit the asset management fee.
- ☐ In accordance with 24 CFR 990.255 through 990.285 of Subpart H – Asset Management, I hereby certify that Ocean City Housing Authority has 250 units or more and is in compliance with asset management. I understand in accordance with 24 CFR 990.190(f), PHAs that are not in compliance with asset management will forfeit the asset management fee.
- ☒ I hereby certify that 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 PHA Representative &amp; Date:

Signature of Authorized HUD Representative &amp; Date:

X

X



A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R																																																																																										
1	<b>Operating Fund</b>							U.S. Department of Housing and Urban Development					Version 1.1																																																																																														
2	<b>Calculation of Utilities Expense Level</b>							Office of Public and Indian Housing																																																																																																			
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1.	Name of Public Housing Agency:			2.	Funding Period:			3.	Type of Submission:			4.	Unit Change Indicator:			5.	DUNS Number:			6.	Rate Reduction Incentive:																																																																																						
8	Ocean City Housing Authority			11/2019	to 12/31/2019			9	Special			10				11	960919223			12	No																																																																																						
13	7. ACC Number:			14	8. Operating Fund Project Number:			15	9. Fiscal Year End:			16	10. ROFO Code (HUD Use Only):																																																																																														
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<b>Section 2 - Current consumption Level</b>																																																																																																											
01	Actual Consumption (12-month period 7/1/2017 to 6/30/2018)			651,107	32,617	6,295,000	0	0	0	0	0	0	0	0	0	0	0																																																																																										
01a	Unit of consumption (e.g., gallons, kWh, therms)																																																																																																										
<b>Section 3 - Rolling Base consumption Level</b>																																																																																																											
02	Rolling base year 1 - actual consumption (12-month period 7/1/2016 to 6/30/2017)			631,317	31,131	4,084,200	0	0	0	0	0	0	0	0	0	0	0																																																																																										
03	Rolling base year 2 - actual consumption (12-month period 7/1/2015 to 6/30/2016)			655,261	28,663	5,750,100	0	0	0	0	0	0	0	0	0	0	0																																																																																										
04	Rolling base year 3 - actual consumption (12-month period 7/1/2014 to 6/30/2015)			654,194	32,607	4,769,000	0	0	0	0	0	0	0	0	0	0	0																																																																																										
05	Total Consumption during 3-year Rolling Base period (Lines 02 + 03 + 04)			1,940,772	92,401	14,603,300	0	0	0	0	0	0	0	0	0	0	0																																																																																										
<div>Operating Fund Project Number @NJ053000001</div> <div>Operating Fund Project Number @NJ053000001</div>																																																																																																											
06	Average rolling base consumption (Line 05 ÷ 3)			646,924	30,800	4,867,767	0	0	0	0	0	0	0	0	0	0	0																																																																																										
07	Actual consumption for new units			0	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																										
08	Rolling Base Consumption (Line 06 + 07)			646,924	30,800	4,867,767	0	0	0	0	0	0	0	0	0	0	0																																																																																										
<b>Section 4 - Base Consumption</b>																																																																																																											
09	Base Consumption (lesser of Line 01 or 06)			646,924	30,800	4,867,767	0	0	0	0	0	0	0	0	0	0	0																																																																																										
<b>Section 5 - Utility Consumption Incentive</b>																																																																																																											
10	Actual consumption > rolling base (If Line 01 is greater than Line 08, enter the difference as positive; if not, enter 0)			4,183	1,817	1,427,233	0	0	0	0	0	0	0	0	0	0	0																																																																																										
11	Actual consumption < rolling base (If Line 01 is less than Line 08, enter the difference as positive; if not, enter 0)			0	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																										
12	75%/25% Split (Line 10 x 0.25)			1,046	454	356,808	0	0	0	0	0	0	0	0	0	0	0																																																																																										
13	75%/25% Split (Line 11 x 0.75)			0	0	0	0	0	0	0	0	0	0	0	0	0	0																																																																																										

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
38																		
39	14	Annualization of consumption for new units				0	0	0	0	0	0	0	0	0	0	0	0	
40	15	Payable consumption (Sum of Line 09, Line 12, Line 13, and Line 14)				647.970	31.254	5.224.575	0	0	0	0	0	0	0	0	0	
41																		
42	16	Actual utility costs (12-month period 7/1/2017 to 6/30/2018)				\$96,487	\$44,734	\$101,190	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
43	17	Actual average utility rate (Line 16 ÷ Line 01)				\$0.1482	\$1.3715	\$0.0161	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000	\$0.0000	
44																		
45	18	Base utilities expense level - whole dollars (Line 15 x Line 17)				\$96,029	\$42,865	\$84,116	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$223,010
46	19	Surcharges for excess consumption of PHA-supplied utilities (12-month period 7/1/2017 to 6/30/2018) - whole dollars																\$5,719
47																		
48	20	Base Utilities expense level minus surcharges (Line 18 minus Line 19)																\$217,291
49	21	Utilities inflation/deflation factor																1.0681
50																		
51	22	Utilities expense level adjusted for inflation/deflation - whole dollars (Line 20 x Line 21)																\$232,089
52	23	Energy rate incentive																\$0
53	24	Utilities expense level - whole dollars (Line 22 + Line 23)																\$232,089
54	25	Eligible unit months (from the original form HUD-52723, Column B, Line 15 plus Line 17 minus Line 04)																1,452
55	26	Utilities Expense Level - PUM (Line 24 ÷ Line 25)																\$159.84
56																		
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**Application for Federal Assistance SF-424**

**\* 1. Type of Submission:**

- ☐ Preapplication  
☒ Application  
☐ Changed/Corrected Application

**\* 2. Type of Application:**

- ☒ New  
☐ Continuation  
☐ Revision

**\* If Revision, select appropriate letter(s):**

**\* Other (Specify):**

**\* 3. Date Received:**

**4. Applicant Identifier:**

NJ053000001

**5a. Federal Entity Identifier:**

NJ053000001

**5b. Federal Award Identifier:**

NJ053

**State Use Only:**

6. Date Received by State:

7. State Application Identifier:

**8. APPLICANT INFORMATION:**

\* a. Legal Name: OCEAN CITY HOUSING AUTHORITY

\* b. Employer/Taxpayer Identification Number (EIN/TIN):

210726363

\* c. Organizational DUNS:

9609192230000

**d. Address:**

\* Street1: 204 EAST FOURTH STREET

Street2:

\* City: OCEAN CITY

County/Parish: CAPE MAY

\* State: NJ; New Jersey

Province:

\* Country: USA; UNITED STATES

\* Zip / Postal Code: 08226-3906

**e. Organizational Unit:**

Department Name:  
US DEPT OF HOUSING & URBAN DEV

Division Name:  
PUBLIC AND INDIAN HOUSING

**f. Name and contact information of person to be contacted on matters involving this application:**

Prefix:  \* First Name: JACQUELINE

Middle Name: S

\* Last Name: JONES

Suffix:

Title: EXECUTIVE DIRECTOR

**Organizational Affiliation:**

\* Telephone Number: 609-399-1062

Fax Number: 609-399-7590

\* Email: jjones@vha.org

**Application for Federal Assistance SF-424**

**\* 9. Type of Applicant 1: Select Applicant Type:**

L: Public/Indian Housing Authority

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

\* Other (specify):

**\* 10. Name of Federal Agency:**

US DEPT OF HOUSING & URBAN DEVELOPMENT

**11. Catalog of Federal Domestic Assistance Number:**

14-840

CFDA Title:

OPERATING SUBSIDY

**\* 12. Funding Opportunity Number:**

9999

\* Title:

OPERATING SUBSIDY

**13. Competition Identification Number:**

Title:

**14. Areas Affected by Project (Cities, Counties, States, etc.):**

Areas Affected.xlsx

Add Attachment

Delete Attachment

View Attachment

**\* 15. Descriptive Title of Applicant's Project:**

PIA-OWNED RENTAL HOUSING

Attach supporting documents as specified in agency instructions

Add Attachments

Delete Attachments

View Attachments

**Application for Federal Assistance SF-424****16. Congressional Districts Of:**\* a. Applicant \* b. Program/Project 

Attach an additional list of Program/Project Congressional Districts if needed.

**17. Proposed Project:**\* a. Start Date: \* b. End Date: **18. Estimated Funding (\$):**

* a. Federal	<input type="text" value="373,460.00"/>
* b. Applicant	<input type="text" value="0.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="373,460.00"/>

**\* 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- ☐ a. This application was made available to the State under the Executive Order 12372 Process for review on .
- ☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ☒ c. Program is not covered by E.O. 12372.

**\* 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**☐ Yes ☒ No

If "Yes", provide explanation and attach

**21. \*By signing this application, I certify (1) to the statements contained in the list of certifications\*\* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances\*\* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

☒ \*\* I AGREE

\*\* The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

**Authorized Representative:**

Prefix:  \* First Name:

Middle Name:

\* Last Name:

Suffix:

\* Title: \* Telephone Number:  Fax Number: \* Email: \* Signature of Authorized Representative: \* Date Signed:

Ocean City Housing Authority

Form SF-424

Areas Affected by Project

Page 2, Line 14

CITY OF OCEAN CITY, CAPE MAY COUNTY, NEW JERSEY