

# Revere Housing Authority

## Annual Plan for Fiscal Year 2023

### For State-Aided Public Housing

The Annual Plan is a document compiled by housing authority staff in advance of each new fiscal year. The plan serves as both a tool for the Local Housing Authority (LHA) to reflect upon the prior fiscal year, and as an opportunity to develop a clear and transparent plan that builds on successes, identifies needs, and corrects any issues that have arisen in prior years. Additionally, the Annual Plan is an important tool for tenants, who may use the document to better understand the operations and needs of their housing authority, advocate for changes to policies and procedures, access data about the housing authority, and participate in their housing authority's governance.

In addition to the physical document, the Annual Plan is also a process of public engagement. Throughout the Annual Plan process, the LHA executive director or their designee will be expected to review the Plan with any Local Tenant Organizations (LTO's) and Resident Advisory Board (RAB) before the LHA presents the plan to the LHA Board of Commissioners; make a draft available for review to all residents and the general public; post on the website and make a copy available to each LTO at least 30 business days before the public hearing; hold a hearing on the document; and collect, integrate, and report back on substantive comments. Additionally, the Board will read, offer recommendations, and approve the Annual Plan in advance of its submission to DHCD.

The law that mandates the Annual Plan is [An Act Relative to Local Housing Authorities, Massachusetts General Laws, Chapter 121B Section 28A](#). The regulation that expands upon Section 28A is [760 CMR 4.16](#). The regulations that address Local Tenant Organization (LTO) and resident participation in the Annual Plan are [760 CMR 6.09 \(3\)\(h\)](#) and [760 CMR 6.09\(4\)\(a\)\(4\)](#).

The Revere Housing Authority's Annual Plan for their 2023 fiscal year includes the following components:

1. Overview and Certification
2. Capital Improvement Plan (CIP)
3. Maintenance and Repair Plan
4. Operating Budget
5. Narrative responses to Performance Management Review (PMR) findings
6. Policies
7. Waivers
8. Glossary
9. Other Elements
  - a. Public Comments and LHA Responses
  - b. Cover sheet for AP Survey
  - c. Tenant Satisfaction Survey 667 Program
  - d. Tenant Satisfaction Survey 200 and 705 Program

**State-Aided Public Housing Developments**

The following table identifies the state-aided public housing units with developments of more than 8 units listed separately. Units in developments of 8 or fewer units are aggregated as noted. Units that the LHA provides to assist clients of the Department of Mental Health (DMH), the Department of Developmental Services (DDS), or other agencies are also aggregated separately.

Dev No	Type	Development Name	Num Bldgs	Year Built	Dwelling Units
667-03	Elderly	ADAMS COURT 667-03	6	1968	60
667-1B	Elderly	CUSHMAN AVENUE 667-1B	4	1956	16
667-02	Elderly	GARFIELD and ELIOT 667-02	3	1961	46
667-04	Elderly	LISTON TOWERS 667-04	1	1969	103
667-1A	Elderly	PROCTOR AVENUE 667-1A	7	1956	20
705-G	Family	SCATTERED SITE- NAHANT 705-G	1	1920	16
200-01	Family	STATE VETERANS 200-01	80	1950	286
	Family	Family units in smaller developments	14		53
Total			116		600

The following development(s) operate under a combination of state and federal requirements, including HUD's Section 8 New Construction and Substantial Rehabilitation Program (see the Glossary for a program description).

Dev No	Type	Development Name	Num Bldgs	Year Built	Dwelling Units
667-06	Elderly	HYMAN TOWERS 667-06	1	1976	106

**Massachusetts Rental Voucher Program (MRVP)**

The Massachusetts Rental Voucher Program (MRVP) is a state-funded program that provides rental subsidies to low-income families and individuals. In most cases, a “mobile” voucher is issued to the household, which is valid for any market-rate housing unit that meets the standards of the state sanitary code and program rent limitations. In some cases, vouchers are “project-based” into a specific housing development; such vouchers remain at the development if the tenant decides to move out.

Revere Housing Authority manages 106 MRVP vouchers.

**Federally Assisted Developments**

Revere Housing Authority also manages Federally-assisted public housing developments and/or federal rental subsidy vouchers serving 659 households.

**LHA Central Office**

Revere Housing Authority  
 70 Cooledge St., Revere, MA, 02151  
 Patricia Duffy, Interim Executive Director  
 Phone: 781-284-4394  
 Email: tduffy@revereha.com

**LHA Board of Commissioners**

	<u>Role</u>	<u>Category</u>	<u>From</u>	<u>To</u>
George Anzuoni	Vice-Chair	State Appointee	02/18/2020	03/18/2024
Fatou Drammeh	Member		03/13/2017	03/13/2022
Anthony Perrone	Chair	Labor Appointee	11/13/2017	11/12/2022
Richard Viscay	Treasurer		03/16/2020	03/31/2025

## Plan History

The following required actions have taken place on the dates indicated.

	REQUIREMENT	DATE COMPLETED
A.	Advertise the public hearing on the LHA website.	11/22/2021
B.	Advertise the public hearing in public postings.	11/22/2021
C.	Notify all LTO's and RAB, if there is one, of the hearing and provide access to the Proposed Annual Plan.	N/A
D.	Post draft AP for tenant and public viewing.	11/22/2021
E.	Hold quarterly meeting with LTO or RAB to review the draft AP. (Must occur before the LHA Board reviews the Annual Plan.)	N/A
F.	Annual Plan Hearing. Hosted by the LHA Board, with a quorum of members present. (For Boston, the Administrator will host the hearing.)	01/05/2022
G.	Executive Director presents the Annual Plan to the Board.	01/05/2022
H.	Board votes to approve the AP. (For Boston Housing Authority, the Administrator approves and submits the AP.)	01/05/2022

## Certification

### CERTIFICATION OF LHA USER AUTHORIZATION FOR DHCD CAPITAL SOFTWARE AND HOUSING APPLICATIONS

I, Patricia Duffy, Interim Executive Director of the Revere Housing Authority, certify on behalf of the Housing Authority that I have conducted an annual review of all Revere Housing Authority users of DHCD Capital Software applications and Housing Applications and that all current LHA users are authorized to use the systems and have the appropriate level of user access based on their job responsibility. I approve all system access and access levels for all Revere Housing Authority users.

This certification applies to the following applications:

- Capital Planning System (CPS)
- Consolidated Information Management System (CIMS)
- Cap Hub
- DHCD Housing Management Systems

### CERTIFICATION FOR SUBMISSION OF THE ANNUAL PLAN

I, Patricia Duffy, Interim Executive Director of the Revere Housing Authority, certify on behalf of the Housing Authority that: a) the above actions all took place on the dates listed above; b) all facts and information contained in this Annual Plan are true, correct and complete to the best of my knowledge and belief and c) that the Annual Plan was prepared in accordance with and meets the requirements of the regulations at 760 CMR 4.16 and 6.09.

Date of certification: 01/22/2022

## CERTIFICATION FOR SUBMISSION OF THE ANNUAL PLAN

I, Patricia Duffy, Interim Executive Director of the Revere Housing Authority, certify on behalf of the Housing Authority that: a) the above actions all took place on the dates listed above; b) all facts and information contained in this Annual Plan are true, correct and complete to the best of my knowledge and belief and c) that the Annual Plan was prepared in accordance with and meets the requirements of the regulations at 760 CMR 4.16 and 6.09.

The Board and Executive Director further certify that LHA operations and all LHA Board-adopted policies are in accordance with M.G.L. c. 121B and all Massachusetts state-aided public housing regulations, including, but not limited to 760 CMR 4.00; 5.00; 6.00; 8.00; and 11:00, as well as adhere to Department-promulgated guidance.

Date of certification: 01/22/2022

The Department of Housing and Community Development (DHCD) completed its review of this Annual Plan (AP) on May 10, 2022. Review comments have been inserted into the plan.

**Capital Improvement Plan (CIP)****Capital Improvement Plan****DHCD Description of CIPs:**

The Capital Improvement Plan (CIP) is a five year plan which identifies capital projects, provides a planning scope, schedule and budget for each capital project and identifies options for financing and implementing the plan. The CIP identifies anticipated spending for each Department of Housing and Community Development (DHCD) fiscal year (July 1 to June 30) based on the project schedules.

Local Housing Authorities (LHAs) receive yearly awards from DHCD (Formula Funding Awards) which they target to their most urgent capital needs in their CIP. They may also receive special awards from DHCD for specific projects which meet specific criteria. Special awards may be given for certain emergency, regulation compliance, energy and water conservation, and other projects. The first three years of the CIP are based on actual awards made to the LHA, while years four and five are based on estimated planning amounts, not actual awards.

LHAs may sometimes secure other sources of funding and assistance that you will note in their CIP, such as: Community Preservation Act (CPA) funding, Community Development Block Grant (CDBG) funding, Local Affordable Housing Trust Funds (AHTF), HOME grants, income from leasing a cell tower on their property, savings from net meter credit contracts with solar developers, utility rebates and contracted work from utility providers, and Sheriff's Department work crews. However, not all of these funding sources are available every year, or in all communities.

The CIP includes the following parts:

- A table of available funding sources and amounts
- A list of planned capital projects showing spending per fiscal year
- A table showing special awards and other funding for targeted projects, if any, which supplements Formula Funding awarded to the LHA
- A 'narrative' with a variety of additional information.

**Additional Remarks by Revere Housing Authority**

Significant improvements of the next 5 years include the 2nd phase of siding and roof replacements at State Family Housing Development (200-1) and start the 3rd phase. We expect to find functional improvements to the heating and energy usage, along with aesthetic improvements for the whole neighborhood. Our other focus is making our elderly housing development safe by removing asbestos tile.

**Capital Improvement Plan (CIP)**

**Aggregate Funding Available for Projects in the First Three Years of the CIP:**

<b>Category of Funds</b>	<b>Allocation</b>	<b>Planned Spending</b>	<b>Description</b>
Balance of Formula Funding (FF)	\$4,128,982.39		Total of all FF awards minus prior FF spending
LHA Emergency Reserve	\$619,347.36		Amount to reserve for emergencies
Net FF Funds (First 3 Years of the CIP)	\$3,509,635.03	\$3,723,602.40	Funds to plan & amount actually planned in the first 3 years of the CIP
ADA Set-aside	\$25,948.06	\$25,950.00	Accessibility projects
DMH Set-aside	\$0.00	\$0.00	Dept. of Mental Health facility
DDS Set-aside	\$0.00	\$0.00	Dept. of Developmental Services facility
Unrestricted Formula Funding (FF)	\$3,483,686.97	\$3,697,652.40	Funds awarded by DHCD to be used on projects selected by the LHA and approved by DHCD.
Special DHCD Funding	\$158,567.64	\$158,567.64	Targeted awards from DHCD
Community Development Block Grant (CDBG) Funds	\$0.00	\$0.00	Federal funds awarded by a city or town for specific projects.
Community Preservation Act (CPA) Funds	\$0.00	\$0.00	Community Preservation Act funds awarded by a city of town for specific projects.
Operating Reserve(OR) Funds	\$0.00	\$0.00	Funds from the LHA's operating budget.
Other Funds	\$0.00	\$0.00	Funds other than those in the above categories. See explanation below.
<b>Total funds and planned spending</b>	<b>\$3,668,202.67</b>	<b>\$3,882,170.04</b>	<b>Total of all anticipated funding available for planned projects and the total of planned spending.</b>



**Capital Improvement Plan (CIP)****CIP Definitions:**

**ADA Set-aside** is funding allocated within the Formula Funding (FF) for use on projects that improve accessibility for people with disabilities. 10% of FF awards are designated for this purpose.

**Available State Bond Funding** is the amount of State Bond Funding available to the LHA for the first three years of the CIP. It is calculated by totaling all of FF and Special Awards granted to the LHA through the end of the third year of the plan and subtracting the amount of these funds spent prior to July 1 of the first year of the plan.

**Amount spent prior to the plan** is the total amount of Formula Funding (FF) and Special Awards spent prior to July 1 of the first year of the plan.

**Capital project** is a project that adds significant value to an asset or replaces building systems or components. Project cost must be greater than \$1000.

**CDBG** stands for Community Development Block Grant, a potential source of project funds.

**CPA** stands for Community Preservation Act, a potential source of project funds.

**CapHub Project Number** is the number given to projects entered into DHCD's project management system known as CapHub.

**DMH Set-aside** is funding allocated within the Formula Funding (FF) for use on facilities leased to the Department of Mental Health (DMH) program vendors, if any exist at this LHA.

**DDS Set-aside** is funding allocated within the Formula Funding (FF) for use on facilities leased to the Department of Developmental Services (DDS) program vendors, if any exist at this LHA.

**Formula Funding (FF)** is an allocation of state bond funds to each LHA according to the condition (needs) of its portfolio in comparison to the entire state-aided public housing portfolio.

**Operating Reserve** is an account, funded from the LHA operating budget, primarily used for unexpected operating costs, including certain extraordinary maintenance or capital projects.

**Other Funds** could include other funding by the city or town or from other sources.

**Special Awards** are DHCD awards targeted to specific projects. Award programs include funds for emergencies beyond what an LHA can fund, for complying with regulatory requirements, for projects that will save water or energy use, and various other programs the department may run from time to time.

**Total Cost** is the sum of investigation, design, administration, permitting, and construction costs for a project

**Unrestricted Formula Funding (FF)** is money awarded to the LHA by DHCD under the Formula Funding program other than amounts set aside (restricted) for accessibility improvements or for facilities operated by DMH or DDS.

Capital Improvement Plan (CIP)

Formula Funding and Special DHCD Award Planned Spending - Other funding not included

Cap Hub Project Number	Project Name	Development(s)	Total Cost	Amount Spent Prior to Plan	fy2022 Spent	fy2022 Planned	fy2023	fy2024	fy2025	fy2026
248060	2008 FF Master CFA	STATE VETERANS 200-01	\$3,500	\$3,500	\$0	\$0	\$0	\$0	\$0	\$0
248102	FF: 20-22 Thornton Common Interior	SCATTERED SITE-THORNTON ST 705-L	\$466,245	\$29,116	\$0	\$11,832	\$425,299	\$0	\$0	\$0
248105	FY17 - Sustainability - Water - toilets (286)	STATE VETERANS 200-01	\$130,000	\$0	\$0	\$130,000	\$0	\$0	\$0	\$0
248108	FF: Roofs 110-112 Shirley Ave	SCATTERED SITE-SHIRLEY AVE 705-J	\$138,795	\$118,511	\$0	\$3,400	\$0	\$0	\$0	\$0
248109	FF: 22-26 Raymd,150 Cooledge, 16-18 Raymd Roof Rplcmnt	STATE VETERANS 200-01	\$1,018,690	\$1,045,042	\$0	\$890	\$0	\$0	\$0	\$0
248112	FF: Fuse box replacement	CUSHMAN AVENUE 667-1B	\$519,080	\$413,955	\$3,542	\$102,742	\$0	\$0	\$0	\$0
248114	200-1 Siding, Roofing, & Window Replacement Phase 2	STATE VETERANS 200-01	\$1,878,286	\$6,375	\$17,850	\$737,176	\$1,118,585	\$0	\$0	\$0
248117	1513 North Shore Road Roof Replacement	SCATTERED SITE-NORTH SHORE RD 705-H	\$29,795	\$19,614	\$0	\$10,181	\$0	\$0	\$0	\$0
248118	Repair spalling concrete walkways	GARFIELD and ELIOT 667-02	\$25,950	\$0	\$0	\$25,950	\$0	\$0	\$0	\$0

Capital Improvement Plan (CIP)

Formula Funding and Special DHCD Award Planned Spending - Other funding not included

Cap Hub Project Number	Project Name	Development(s)	Total Cost	Amount Spent Prior to Plan	fy2022 Spent	fy2022 Planned	fy2023	fy2024	fy2025	fy2026
248119	Adams Court Water Main Replacement	Adams Court 667-01	\$294,091	\$179,794	\$29,551	\$84,747	\$0	\$0	\$0	\$0
248121	SUST-R: SHMCAP Flood Elevation Survey	LISTON TOWERS 667-04	\$15,000	\$0	\$0	\$15,000	\$0	\$0	\$0	\$0
•	200-1 Siding/Bulkhead Replacement Phase IV	STATE VETERANS 200-01	\$484,000	\$0	\$0	\$0	\$0	\$230,802	\$253,199	\$0
•	200-1 Siding/Bulkhead Replacement Phase V	STATE VETERANS 200-01	\$484,000	\$0	\$0	\$0	\$0	\$230,802	\$253,199	\$0
•	200-1 Siding/Bulkhead Replacement Phase VI	STATE VETERANS 200-01	\$484,000	\$0	\$0	\$0	\$0	\$230,802	\$253,199	\$0
•	200-1 Siding/Bulkhead Replacement Phase VII	STATE VETERANS 200-01	\$484,000	\$0	\$0	\$0	\$0	\$0	\$230,802	\$253,199
•	200-1 Siding/Bulkhead Replacement Phase VIII	STATE VETERANS 200-01	\$484,000	\$0	\$0	\$0	\$0	\$0	\$0	\$230,802
•	Garfield Eliot Roof Replacement	GARFIELD and ELIOT 667-02	\$297,678	\$0	\$0	\$141,952	\$155,727	\$0	\$0	\$0

**Capital Improvement Plan (CIP)**

Formula Funding and Special DHCD Award Planned Spending - Other funding not included

Cap Hub Project Number	Project Name	Development(s)	Total Cost	Amount Spent Prior to Plan	fy2022 Spent	fy2022 Planned	fy2023	fy2024	fy2025	fy2026
•	Asbestos Removal in Common areas Elderly Housing	GARFIELD and ELIOT 667-02 \ ADAMS COURT 667-03	\$303,958	\$0	\$0	\$144,969	\$159,029	\$0	\$0	\$0
<b>TOTALS</b>			\$7,541,067	\$1,815,904	\$50,943	\$1,408,836	\$1,858,638	\$692,405	\$990,397	\$484,000

FUNDS IN ADDITION TO ANNUAL FORMULA FUNDING AWARD

Cap Hub Project Number	Project Name	DHCD Special Award Comment	Special DHCD Awards				Other Funding			
			Emergency Reserve	Compliance Reserve	Sustainability	Special Awards	CDBG	CPA	Operating Reserve	Other Funds
248105	FY17 - Sustainability - Water - toilets (286)	Toilets & showerheads (286)	\$0	\$0	\$130,000	\$0	\$0	\$0	\$0	\$0
248109	FF: 22-26 Raymd,150 Cooledge, 16-18 Raymd Roof Rplcmnt		\$0	\$0	\$0	\$12,194	\$0	\$0	\$0	\$0
248112	FF: Fuse box replacement	asbestos abatement fuse box and electric circuit panel replacement	\$0	\$141,100	\$0	\$0	\$0	\$0	\$0	\$0
<b>TOTALS</b>			\$0	\$141,100	\$130,000	\$12,194	\$0	\$0	\$0	\$0

## **Capital Improvement Plan (CIP) Narrative**

### **Including Requests to DHCD & Supporting Statements**

#### **1. Request for increased spending flexibility.**

DHCD designates a spending target (cap share) and an allowable spending range for each year of the CIP. A Housing Authority may request to shift the cap shares of the first three years in order to increase scheduling flexibility. A CIP utilizing this flexibility is called an Alternate CIP. The total spending over three years and over five years must continue to meet the limits set by DHCD. DHCD will approve an Alternate CIP only with acceptable justification and only if funding is available.

Revere Housing Authority has submitted an Alternate CIP with the following justification:

- Projected spending on projects currently in bidding or construction exceeds Cap Share in one or more years of the CIP.

The bulk of the \$1.8M construction costs of 248114 falls against year 2 CAP Share, which is insufficient to cover the cost.

#### **2. Request for additional funding.**

A Housing Authority may request additional funding from DHCD for projects that qualify as emergencies, required legal compliance upgrades, or sustainability improvements.

Revere Housing Authority has requested \$170,000.00 in DHCD Compliance Reserve funding for project #248-667-02-0-21-855\ 248-667-3-0-09-1919, Asbestos Removal in Common areas Elderly Housing. Reason: Asbestos is chipped and frayed. Need removal in common areas and stair wellls.

Revere Housing Authority has requested \$15,000.00 in DHCD Sustainability funding for project #248-667-04-0-21-750, SUST-R: SHMCP Flood Elevation Survey. Reason: SHMCP Flood Elevation Survey for 667-04

#### **3. Overall goals of the Housing Authority's CIP**

The overall goal of the Revere Housing Authority is to provide good, clean, safe and affordable housing to our residents. Under the direction of the Board of Commissioners, our dedicated staff works with resources both from the capital improvement program and operating budgets to provide quality housing units and services to our residents. The Revere Housing Authority strives to turn over vacant units in an efficient, effective manner to improve access to housing. Our 2022 CIP is a continuation of our 2021CIP, focusing on the building envelope of State Veterans buildings and the health and safety issues at our Elderly sites. This ongoing project covers all 5 years of our plan.

**4. Changes from the Housing Authority's previous CIP**

Every new CIP differs from the previous CIP because projects have been completed and a new year has been added with new projects. These changes and other significant changes to the content of the CIP are highlighted below:

No significant changes.

**5. Requirements of previous CIP approval**

There were no special conditions attached to the approval of our previous CIP.

**6. Quarterly capital reports**

Our most recent quarterly capital report (form 80 and 90) was submitted on 08/27/2021.

**7. Capital Planning System (CPS) updates**

Our CPS facility data has been updated with current condition information, including changes resulting from projects completed in the past year, as of 09/29/2021.

**8. Project priorities**

All the projects in our CIP are high priority (Priority 1 and 2 projects).

**9. High priority deficiencies**

We have not been able to include all of our high priority (CPS priority 1 and 2) projects in our CIP:

See attached.

**10. Accessibility**

We have identified the following accessibility deficiencies in our portfolio:

Repair spalling concrete walkways at GARFIELD and ELIOT 667-02

We have incorporated the following projects in our CIP to address accessibility deficiencies:

FISH 248118 is planned to Repair spalling concrete walkways at GARFIELD and ELIOT 667-02

**11. Special needs development**

Revere Housing Authority does not have a special needs (167 or 689 programs) development.

12. Energy and water consumption

Our 12 most recent monthly energy reports are for months 10/2020 to 9/2021.

The following table lists the DHCD thresholds for Per Unit Monthly (PUM) expense for electricity, natural gas, oil, and water use and the developments at the Housing Authority that have expenses in excess of the thresholds, if any.

	Electric PUM > Threshold	Gas PUM > Threshold	Oil PUM > Threshold	Water PUM > Threshold
Threshold PUM:	\$100	\$80	\$50	\$60
	667-03			705--G
	667-04			705--B
	667-06			667-03
				705--L
				667-02
				705--I
				667-04
				200-01
				705--D
				705--N
				705--H
				705--M
				705--K
				705--F
				667-06
				705--J
				705--E
				705--O
				705--C

We are surprised and worried about significant increase of water usage PUM. We have contracted with a company to explore underground leaks and we have requested water bills for the adjacent building to our 705s using FOIA. We'll have a better understanding of the situation in a few months.

We have a low flow toilet installation project starting soon at our 200-01 development.

### **13. Energy or water saving initiatives**

Revere Housing Authority is currently pursuing energy or water-saving audits or grants as noted below. We have a project for low flow toilets at 200-1 in this CIP. We are also actively working with ABC door-to-door to give out high efficiency bulbs and lamps to each resident. We are also interested in heat pumps at our 667 units. We are hiring a company to investigate our underground water line for potential water loss.

### **14. Vacancy rate**

Our unadjusted vacancy rate reported to DHCD is as follows. (The unadjusted vacancy rate captured in these figures is the percentage of ALL housing units that are vacant, including both offline units being used for other purposes and units with DHCD vacancy waivers.)

4% c. 667 (DHCD Goal 2%)

5% c. 200 (DHCD Goal 2%)

6% c. 705 (DHCD Goal 2%)

Revere Housing Authority will address the excess vacancies in the following manner:

Our vacancy rate is not caused by any units waiting for capital improvements.

### **15. Vacancies**

Revere Housing Authority has no units listed as vacant, proposed to be vacant, or at risk of becoming vacant.



# CIP Approval For Revere Housing Authority for FY 2022

## Formula Funding Capital Improvement Plan (CIP), WorkPlan 5001

5/10/2022

Congratulations! The CIP-2022 submitted by Revere Housing Authority is approved, subject to the following conditions:

- Please ensure projects are designed resiliently where needed. In addition, if insulation is needed as part of the re-siding projects, please add it (particularly continuous insulation). At this time you do not qualify for Asbestos funds as you have significant Operating Reserves at this time. You are encouraged to use those funds on any of your projects in construction or design.

There are no projects to be managed independently by the LHA.

Projects for which the Primary PM is DHCD or RCAT - Large\*\*

CPS Number	FISH #	Project Name	TDC Amount *	Other Funding	DHCD Staff Arch/ Eng	WO/RFS Date
248-667-02-0-21-855\ 248-667-3-0-09-1919	248122	Asbestos Removal in Common areas Elderly Housing	\$303,958.00	\$0.00	Sli	06/12/2022
248-200-01-0-18-1460\ 248-200-01-0-18-1461	248123	200-1 Siding/Bulkhead Replacement Phase IV & V	\$968,000.00	\$0.00	Sli	06/29/2022
248-200-01-0-18-1462	248124	200-1 Siding/Bulkhead Replacement Phase VI	\$484,000.00	\$0.00	Sli	02/03/2023
248-667-02-0-20-139	248125	Garfield Eliot Roof Replacement	\$297,678.00	\$0.00	Sli	07/14/2022

Going forward, if you need to add a project that is not in your approved CIP you will need to submit a revision through CIMS. Instructions for revising your CIP can be found on the CIMS Forms menu.

Details of the Approved CIP can be found at the link to 'Approved & Active CIP Reports' on the CIMS forms page in the CIP Reports section. Projects may utilize funding from multiple sources. The 'Original Approved' report details the proposed funding as submitted by the LHA. Please feel free to call DHCD Project Manager Cynthia Barney at (617) 573-1179 with any questions.

\* Where the TDC is followed by an asterisk the project has been indicated as 'Complex' by DHCD.

\*\*'Primary PM' is used to identify the agency responsible for updating a project's budget and schedule.

This document was created on 5/10/2022 by Cynthia Barney, Project Manager

Maintenance and Repair Plan**Maintenance Objective**

The goal of good property maintenance at a public housing authority is to serve the residents by assuring that the homes in which they live are decent, safe, and sanitary.

**About This Maintenance and Repair Plan**

This Maintenance & Repair Plan consists of several subsections describing maintenance systems followed by charts showing typical preventive maintenance, routine maintenance, and unit inspection tasks and schedules. These subsections are:

- a. **Classification and Prioritization of Maintenance Tasks** - Defines and prioritizes types of work to be accomplished by maintenance staff and vendors. Explains how the housing authority is expected to respond to work orders (tasks or requests) based on the work order classification.
- b. **Emergency Response System** - Defines what constitutes an emergency and how to notify staff of an emergency.
- c. **Normal Maintenance Response System** - How to contact the maintenance staff for a non-emergency request.
- d. **Work Order Management** - Description of the housing authority's system for managing work orders (tasks and requests).
- e. **Maintenance Plan Narrative & Policy Statement** - Self-assessment, basic information, and goals for the coming year, along with a description of the housing authority's maintenance program.
- f. **Preventive Maintenance Schedule** - A listing and schedule of tasks designed to keep systems and equipment operating properly, to extend the life these systems and equipment, and to avoid unexpected breakdowns.
- g. **Routine Maintenance Schedule** - A listing and schedule of ordinary maintenance tasks such as mopping, mowing, raking, and trash collection required to keep the facilities in good condition.
- h. **Unit Inspections** - Scheduling of annual unit inspections.

### Classification and Prioritization of Maintenance Tasks

Maintenance items are tracked as “work orders” and are classified in the following categories. They are prioritized in the order listed. The following classifications and prioritization are required by the Department of Housing and Community Development (DHCD).

- I. **Emergencies** - Emergencies are only those conditions which are **immediately threatening** to the life or safety of our residents, staff, or structures.
  - **Goal: initiated with 24 to 48 hours.**
- II. **Vacancy Refurbishment - Work necessary to make empty units ready for new tenants.**
  - After emergencies, the refurbishment of vacancies for immediate re-occupancy has the highest priority for staff assignments. **Everyday a unit is vacant is a day of lost rent.**
  - **Goal: vacancy work orders are completed within 30 calendar days or if not completed within that timeframe, LHA has a waiver.**
- III. **Preventive Maintenance** - Work which must be done to **preserve and extend the useful life** of various elements of your physical property and avoid emergency situations.
  - A thorough Preventive Maintenance Program and Schedule that deals with all elements of the physical property is provided later in the document.
  - The Preventive Maintenance Program is reviewed and updated annually and as new systems and facilities are installed.
- IV. **Programmed Maintenance** - Work which is important and is completed to the greatest extent possible within time and budget constraints. Programmed maintenance is grouped and scheduled to make its completion as efficient as possible. Sources of programmed maintenance include:
  - Routine Work includes those tasks that need to be done on a regular basis to keep our physical property in good shape. (Mopping, Mowing, Raking, Trash, etc.)
  - Inspections are the other source of programmed maintenance.
    - o Inspections are visual and operational examinations of parts of our property to determine their condition.
    - o All dwelling units, buildings and sites must be inspected at least annually.
    - o **Goal: Inspection-generated work orders are completed within 30 calendar days from the date of inspection, OR if cannot be completed within 30 calendar days, are added to the Deferred Maintenance Plan or the Capital Improvement Plan in the case of qualifying capital repairs (unless health/safety issue).**
- V. **Requested Maintenance** - Work which is requested by residents or others, does not fall into any category above, and should be accomplished as time and funds are available.
  - Requests from residents or others for maintenance work which does not fall into one of the other categories has the lowest priority for staff assignment.
  - **Goal: Requested work orders are completed in 14 calendar days from the date of tenant request or if not completed within that timeframe (and not a health or safety issue), the task is added and completed in a timely manner as a part of the Deferred Maintenance Plan and/or CIP.**

**Emergency Request System**

For emergency requests call the numbers listed here. Qualifying emergency work requests are listed below.

<b>METHOD</b>	<b>CONTACT INFO.</b>	<b>TIMES</b>
Call Answering Service	781-284-7079	24 hr. Maintenance line answering se
Call LHA at Phone Number	781-284-4394	Prefer tenants to use the emergency

List of Emergencies - Emergencies are those conditions which are immediately threatening to the life or safety of our residents, staff, or structures. The following is a list of typical conditions that warrant an emergency response. If there is an emergency condition whether or not enumerated on this list please notify the office or answering service at the numbers listed above. If you have any questions regarding this list or other matters that may constitute an emergency, please contact the Revere Housing Authority main office.

<b>QUALIFYING EMERGENCY WORK REQUESTS</b>
Fires of any kind (Call 911)
Gas leaks/ Gas odor (Call 911)
No electric power in unit
Electrical hazards, sparking outlets
Broken water pipes, flood
No water/ unsafe water
Sewer or toilet blockage
Roof leak
Lock outs
Door or window lock failure
No heat
No hot water
Snow or ice hazard condition
Dangerous structural defects
Inoperable smoke/CO detectors, beeping or chirping
Elevator stoppage or entrapment
Inoperable refrigerator (667 properties)

**Normal Maintenance Request Process**

Make normal (non-emergency) maintenance requests using the following methods:

<b>METHOD</b>	<b>CONTACT INFO.</b>	<b>TIMES</b>
Text Phone Number		
Call Answering Service		
Call Housing Authority Office		
Submit Online at Website		
Email to Following Email		
Other	781-284-7079	24 hr. Maintenance line

**Work Order Management**

A. DHCD review of this housing authority’s operations shows that the authority uses the following system for tracking work orders:

Type of work order system:

Work order classification used:

Emergency	
Vacancy	
Preventative Maintenance	
Routine	
Inspections	
Tenant Requests	

B. We do not track deferred maintenance tasks in our work order system.

C. Our work order process includes the following steps:

Step	Description	Checked steps are used by LHA
1	Maintenance Request taken/submitted per the standard procedures listed above for the Emergency Request System and the Normal Maintenance Request Process.	<input checked="" type="checkbox"/>
2	Maintenance Requests logged into the work system	<input checked="" type="checkbox"/>
3	Work Orders generated	<input checked="" type="checkbox"/>
4	Work Orders assigned	<input checked="" type="checkbox"/>
5	Work Orders tracked	<input checked="" type="checkbox"/>
6	Work Orders completed/closed out	<input checked="" type="checkbox"/>
7	Maintenance Reports or Lists generated	<input checked="" type="checkbox"/>

D. Additional comments by the LHA regarding work order management:

We use HAB for work orders.

**Maintenance Plan Narrative**

Following are Revere Housing Authority’s answers to questions posed by DHCD.

A. Narrative Question #1: How would you assess your Maintenance Operations based on feedback you’ve received from staff, tenants, DHCD’s Performance Management Review (PMR) & Agreed Upon Procedures (AUP), and any other sources?

Given the fact there very are seldom calls from residents regarding work orders not being completed appropriately, I would assess our maintenance operations to be efficient and adequate. Staff members have not raised any concerns about maintenance operations and are able to freely collaborate with the maintenance department to address any resident of site needs. Projects are handled in accordance with all regulatory standards and residents are well informed of any work that may directly affect them.

B. Narrative Question #2: What changes have you made to maintenance operations in the past year?

Due to COVID-19 precautionary measures in accordance with the CDC, Federal and state guidelines, only resident emergency work orders are being addressed at this time. Routine work orders are being logged into the work order system and work on these will resume as state continues to open of in its third phase. Currently, our city is listed a "high" risk city for positive COVID tests which have delayed our ability to resume all normal maintenance operations. In the meantime, all maintenance staff use PPE, sanitizing and conducting electrostatic cleanings of the buildings on a daily basis.

C. Narrative Question #3: What are your maintenance goals for this coming year?

Continue to complete Capital improvement projects which include siding and roofing, address all outstanding work orders, begin strategies to redo mid-rise building common area flooring and painting. Also, address the majority of our deferred maintenance issues such as windows screens, resident apartment painting and screen doors.

D. Maintenance Budget Summary

The budget numbers shown below are for the consolidated budget only. They do not include values from supplemental budgets, if any.

	Total Regular Maintenance Budget	Extraordinary Maintenance Budget
Last Fiscal Year Budget	\$1,249,738.00	\$247,705.00
Last Fiscal Year Actual Spending	\$1,117,200.00	\$162,049.00
Current Fiscal Year Budget	\$1,229,626.00	\$191,000.00

E. Unit Turnover Summary

# Turnovers Last Fiscal Year	38
Average time from date vacated to make Unit "Maintenance Ready"	34 days
Average time from date vacated to lease up of unit	145 days

F. Anything else to say regarding the Maintenance Plan Narrative?

Maintenance department has been in process of adding staff to fill past vacant positions. The maintenance team continues to work together to train and improve operations in accordance with changing service trends. In addition, maintenance team will continue to implement the most up-to-date safety protocols and best practices as part of the developing continuing education risk management programs.

**Attachments**

These items have been prepared by the Revere Housing Authority and appear on the following pages:

Preventive Maintenance Schedule - a table of preventive maintenance items showing specific tasks, who is responsible (staff or vendor), and the month(s) they are scheduled

Deferred Maintenance Schedule - a table of maintenance items which have been deferred due to lack of resources.



# Revere Housing Authority

## PREVENTIVE MAINTENANCE POLICY

March 28, 2018

Preventive maintenance is work undertaken according to a schedule to prevent breakdown of major mechanical systems and equipment, and to prevent the deterioration of apartments and equipment. The RHA Preventive Maintenance Program will include regular comprehensive inspections and repairs of all units, equipment, buildings, and common areas. Identifying these maintenance needs will help the authority reduce the frequency and severity of breakdowns and service interruptions. These inspections will include checking, measuring, observing, and correcting deficiencies found in the units, major mechanical systems, equipment/vehicles, exterior of units, and grounds.

The RHA Preventive Maintenance Program will be the key to achieving control of maintenance. It will reduce resident-generated work orders to a manageable level, speed up vacancy turnaround since units will be generally in better condition upon a vacate, and provide information to management for follow-up with regard to care of the unit by the occupant.

The Maintenance Department will have more control over the scheduling of Preventive maintenance than it has over routine corrective or emergency maintenance. Repair needs caught early will prevent emergencies, save dollars later, and substantially reduce resident generated work-orders. The Preventive maintenance inspections and work also will help establish a record of deterioration which may signal modernization needs that can be systematically planned and scheduled. This maintenance will avoid waiting for a major crisis to occur before addressing a predictable problem.

The RHA Preventive Maintenance Schedule will identify when tasks need to be completed. The system in place will record the date each inspection was conducted; who did it, and a process for ensuring that needed work is completed. This process will assign accountability to inspectors, and provides a sense of responsibility for their work.

When the Preventive maintenance program requires work that is predictable and repetitive (such as cleaning burners or replacing filters), maintenance staff will tend to work from a schedule. If inspections identify a need for unanticipated repairs, or replacements, the staff will generate work orders. If work orders are written, they will be identified as routine or emergency and will follow the work assignment process. A schedule of unit inspections will be prepared at the beginning of each calendar year and monitored each month to ensure that all units are inspected at least annually.

## **1.0 PREVENTIVE MAINTENANCE PROGRAM**

Preventive maintenance is part of the planned or scheduled maintenance program of the Housing Authority. The purpose of the scheduled maintenance program is to allow the Authority to anticipate maintenance requirements and make sure the Authority can address them in the most cost-effective manner. The Preventive maintenance program focuses on the major systems that keep the properties operating. These systems include heating and air conditioning, electrical, life safety and plumbing.

### **A. General Operating Systems**

The heart of any Preventive maintenance program is a schedule that calls for the regular servicing of all systems. The development of this schedule begins with the identification of each system or item that must be checked and serviced, the date it must be serviced, and the individual responsible for the work. The servicing intervals and tasks for each system must be included in the schedule. The completion of all required tasks is considered a high priority for the Housing Authority.

The systems covered by the Preventive maintenance program include but are not limited to:

#### **1. HVAC SYSTEMS**

- A. boilers
- B. circulators
- C. domestic hw tanks
- D. air conditioning units

#### **2. SECURITY SYSTEMS**

- A. exterior lighting
- B. public hallway lighting
- C. building doors and locks

#### **3. FIRE AND LIFE SAFETY SYSTEMS**

- A. emergency generators
- B. fire extinguishers
- C. emergency lighting
- D. exit lights
- E. sprinkler systems
- F. fire alarm systems

4. ROOFS

- A. roof inspection
- B. gutter cleaning

5. ELEVATORS

- A. elevator inspection

6. PLUMBING

- A. catch basins
- B. sanitary drains

7. VEHICLES

- A. safety inspection
- B. tune up
- C. fluid check

8. ELECTRICAL HEAT

- A. common area electric heaters

9. LARGE EXHAUST FANS

- A. roof top units

10. ANNUAL INSPECTIONS

- A. dwelling units
- B. site
- C. building systems
- D. common areas

11. MECHANICAL EQUIPMENT

- A. sump pumps

12. COMMON AREAS

- A. grounds
- B. hallways and stairwells
- C. community rooms and rest rooms

D. elevators

13. PLAYGROUND

A. Inspection

14. PEST CONTROL A.

Extermination

**2.0 PREVENTIVE MAINTENANCE PROCEDURE**

A specific program will be developed for each system. This program shall include a list of the scheduled service maintenance for each system and the frequency and interval at which that service must be performed. The equipment and materials required to perform the service will be listed as well so that they will be on hand when needed. As assessment of the skills or licensing needed to perform the tasks will also be made to determine if an outside contractor must be used to perform the work. The Preventive maintenance schedule must be updated each time a system is added, updated, or replaced.

1. HVAC Systems

The Housing Authority will have a program for maintenance of the mechanical systems to ensure that the proper amount of heat and hot water is readily available and maintained at the proper temperature and that all circulator pumps are serviced and air filters Changed.

A. Check all units including controls.

B. Inspect unit and piping for leaks, holes, or loose connections.

C. Natural Gas Units: inspect and clean burners if needed;

check pilot operation;

inspect flue and clean if needed;

check firebox for soot buildup

check temperature settings-hot water tanks should not be more than 130\*

check pressure relief valve for proper operation and check that drain pipe length satisfies code requirements;

remove any combustible materials;

D. Check circulator pumps for proper operation and leaks. Oil if required.

E. Check A.C. units for proper operation: listen for short cycling

check for refrigerant and oil leaks

inspect wiring and controls

check for corrosion

replace air filters bi annually

## 2. Security Systems

The Housing Authority will have a program for maintenance of security systems to ensure they will perform as needed to maintain a well-lit and secure environment. A. Check that all exterior and hallway lights are in place, undamaged and working;

Replace bulbs as needed.

B Check operation of time clocks and or sensors;

C. Check door closers to insure doors close and latch;

D. Make sure doorknobs and panic bars are not loose;

E. Inspect door frame and glass.

## 3. Life Safety Systems

The Housing Authority shall have a comprehensive program for maintenance of life safety systems to ensure that they will be fully functional in the case of an emergency Implementation of a schedule that includes the inspection, servicing and testing of this equipment to be included in the plan includes the following:

A. Exercise the emergency generator every week

Inspect generator battery for corrosion

Check generator for oil leaks

B. Have all fire extinguishers inspected and certified annually

C. Inspect all emergency lights annually

Test each light with test switch

Replace bulbs or batteries as needed

D. Inspect all exit lights

Replace bulbs as needed

E. Check sprinkler system for signs of corrosion and leaks

Have system inspected by a certified sprinkler engineering firm annually

D. Inspect and test every smoke alarm, heat detector and carbon monoxide detector in every unit; hallway; common area; boiler room; basement and attic to insure that each device works and rings out to the fire alarm panel annually.

Inspect and test all fire alarm panels to insure that all signals will report to central fire alarm monitoring system annually.

## 4 Roof Repairs/ Replacement

The plan will include the required testing and servicing as required by manufacturer's recommendations. It will also include a determination of the most reliable and cost effective way to perform the work including the decision to hire a contractor.

Maintenance of roofs requires regular inspections by knowledgeable personnel to ensure that there is no unauthorized access to roof surfaces and that there is good drainage, clear gutters and prompt discovery of any deficiencies.

- A. Remove any trash and debris from roof.
- B. Inspect roof for damage and deterioration; punctures; missing shingles; loose flashing.
- C. Inspect gutters and downspouts for obstructions (clean as necessary).
- D. Inspect stack vents for obstruction and security covers.

The authority maintenance staff will usually undertake only minor roof repairs. Therefore there should be a list of approved roofing contractors to take on more serious problems for roofs no longer under warranty.

5. The Housing Authority will have a program that ensures that the elevators are inspected annually by The Commonwealth of Massachusetts Department of Public Safety elevator inspection division. The elevators will be properly maintained by a reputable elevator service company.

- A. Check elevator signal lights for proper operation
- B. Inspect elevators for graffiti and damage - clean as needed.

6. The Housing Authority will have a program in which will ensure that the storm drains, catch basins and sanitary drain lines are maintained and remain flowing at all times.

- A. Storm drains and catch basins should be inspected as needed.
- B. Storm drains and catch basins should be cleaned annually.

7. Vehicle/Equipment Maintenance

The Housing Authority will protect the investment it has made in vehicles and other motorized equipment by putting in place a comprehensive maintenance program. The vehicles and equipment to be covered include:

- A. See Appendix B.

8. Electrical Heat

The Housing Authority will have a program that inspects all common area electric heaters to ensure that the public areas of all buildings are adequately heated and that all building systems in these areas are protected.

- A. Check electric heating units for proper operation, including any thermostats.
- B. Check that fan motors are operating properly if applicable.

9. Large Exhaust Fans

The Housing Authority will have a program that inspects all rooftop exhaust fans for operation. Motors will be checked and belts adjusted to ensure the longest life possible for all mechanical parts.

- A. Listen for unusual noises or vibrations
- B. Inspect belt condition and alignment; adjust tension as required.
- C. check motor and fan bearings.
- D. Inspect general condition of exterior and interior of unit.
- E. Check operation of controls.

10 Annual Inspections

The Housing Authority's goals of efficiency and cost-effectiveness are achieved through a carefully designed and rigorously implemented inspection program. This program calls for the inspection of all areas of the Authority's property including;

- A. Dwelling Units
- B. Site
- C. Common areas
- D. Building exterior
- E. Building Systems

Each area is to be inspected annually and documented with inspection forms and work orders as backup and will ensure that all areas comply with standards set by HUD and local codes.

11 Mechanical Equipment

Sump pumps are to be inspected and tested for proper operation to provide protection against flooding and subsequently damage to boilers; hot water tanks, basements and crawl spaces.

- A. Manually test all flotation devices to ensure proper function.
- B. Visually inspect each sump pump and its associated wires and switches for wear and proper connections.

12 Common Areas

Regular inspections of the property grounds and building exteriors as well as building interiors are required to maintain the curb appeal and marketability of the property.

- A. Ground will be policed daily and any trash or debris will be disposed of from the site as well as around any and all dumpster enclosures.

- B. Grounds and buildings will be policed daily for any graffiti. Graffiti will be removed within twenty four hours whenever possible.
- C. Common hallways and stairs will be swept and mopped on a regular schedule. Each hallway should be done at least once per week.
- D. Community rooms, kitchens and rest rooms will be cleaned and vacuumed daily. All trash barrels will be emptied and any paper supplies will be restocked as needed.

13. Playgrounds

- A. Playgrounds will be policed daily for graffiti and trash and all shall be removed immediately.
- B. Check all apparatus daily for any damage.
- C. Tighten any and all nuts and bolts bi-annually.

14. Pest Control

The Housing Authority will make all efforts to provide a healthy and pest-free environment for its residents. The Authority will determine which, if any, pests infest its properties and will then provide the best possible treatment for the eradication of those pests. All residents will be informed at least forty eight hours before treatment. The notification will be in writing and will include instructions that describe how to prepare the unit for treatment. If necessary, the instructions shall be bi-lingual to properly notify the resident population. Resident requests for extermination will be done routinely at least once per week or as often as needed. Annual flush out of buildings will be completed on an as needed basis and determined by funding.



**APPENDIX A**  
**Scheduled Checklist**

**Liston Towers**

<b>Task</b>	<b>Frequency</b>	<b>By</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>
Generator Test	Weekly	Vendor	X	X	X	X	X	X	X	X	X	X	X	X
Fire Alarm Test	Bi-Annual	Vendor		X						X				
Elevator	Monthly	Vendor												
Grounds	Weekly	Staff	X	X	X	X	X	X	X	X	X	X	X	X
Backflow Check	Annual	Vendor		X										
Fire Extinguisher Check	Annual	Vendor					X							
Exhaust Fan Check	Monthly	Staff	X	X	X	X	X	X	X	X	X	X	X	X
Sprinkler System Test	Annual	Vendor				X								

**The Carl Hyman Tower**

<b>Task</b>	<b>Frequency</b>	<b>By</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>
Generator Test	Weekly	Vendor	X	X	X	X	X	X	X	X	X	X	X	X
Fire Alarm Test	Bi-Annual	Vendor		X						X				
Elevator	Monthly	Vendor												
Grounds	Weekly	Staff	X	X	X	X	X	X	X	X	X	X	X	X
Backflow Check	Annual	Vendor		X										
Fire Extinguisher Check	Annual	Vendor					X							
Exhaust Fan Check	Monthly	Staff	X	X	X	X	X	X	X	X	X	X	X	X
Common Drain	Bi-Annual	Staff			X						X			
Sprinkler System Test	Annual	Vendor				X								
AC Filters	Annual	Staff					X							

**Adams Court**

<b>Task</b>	<b>Frequency</b>	<b>By</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>
Fire Alarm Test	Bi-Annual	Vendor		X						X				
Grounds	Weekly	Staff	X	X	X	X	X	X	X	X	X	X	X	X
Fire Extinguisher Check	Annual	Vendor					X							





## APPENDIX B

### Vehicles Equipment

	Year	Make	Model	Body	Vin#	Registration #
1	2008	FORD	ECONOLINE E250	CARGO VAN	1 FTNE24LX8DB25101	M26323
2	1998	FORD	ECONOLINE E150	CARGO VAN	1FTRE1462WHC15967	M34014
3	2002	FORD	ECONOLINE E150	CARGO VAN	1 FTRE14L82HA59482	M43581
4	2008	USCA	UTILITY TRAIL	OTHER	5NHUAS21381033576	M53258
5	2003	FORD	F250	SUPER DUTY PICKUP	3FTNF21L83MB28318	M70512
6	2008	FORD	F350	SUPER DUTY PICKUP	1FTWF31518EE11667	M79945
7	2008	FORD	F450	SUPER DUTY CAB AND	1FDXF47Y68EE11669	M77414
8	2008	FORD	ESCAPE XLT	WAGON 4 DR,	1FMCU93148KE68951	M76382
9	2000	CHEVROLET	EXPRESS 62500	CARGO VAN	1GCGG25R6Y1188932	M82402
10	2010	FORD	ECONOLINE E250	CARGO VAN	1 FTNE2EL3ADA67045	M83646
11	2011	FORD	ECONOLINE E250	CARGO VAN	1FTNE2EL2BDA98918	M87745
12	2011	FORD	RANGER	CLUB CAB PICKUP	1FTLR1FE8BPA51767	M87744
13	2015	FORD	F350	SUPER DUTY PICKUP	1FTRF3B69FEC37963	M93672
14	2016	FORD	TRANSIT T-150	CARGO VAN	1FTYE1ZMOGKA18481	M35531
15	2016	FORD	TRANSIT T-150	CARGO VAN	1FTYE1ZM2GKA18482	M55487
16	2016	FORD	F350	SUPER DUTY CAB AND	1FDRF3H6XGEA92856	M14849
17	2015	BOBCAT	LOADER	OTHER	ALJ814681	M87610
18	2016	KUBOTA	LOADER	OTHER	A5KC2GDBCFG024026	M96270
19	2016	CROSS	CONSTR	OTHER	431FS0813G1000124	M96271

# Revere Housing Authority Deferred Maintenance List

## GARFIELD/ELIOT 672

1	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
2	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	Damage to sills frames lintels or trim but nothing is missing and surrounding wall is not exposed. No impact on the function of the window or weather tightness.								
3	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								
4	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
5	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
6	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The porch or side rails enclosing the area are loose damaged or missing limiting the safe use of this area.								
7	Unit	102-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
8	Unit	102-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
9	Unit	102-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
10	Unit	186-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
11	Unit	186-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
12	Unit	186-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
13	Unit	186-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								

14	Unit	186-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
15	Unit	186-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	You see that a basin or associated pipes are leaking water.								
16	Unit	186-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
17	Unit	186-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								
18	Unit	186-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
19	Unit	186-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One or more stair steps or treads is missing damaged or loose.								
20	Unit	186-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
21	Unit	186-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The porch or side rails enclosing the area are loose damaged or missing limiting the safe use of this area.								
22	Unit	186-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front
	Deficiency	The sink drain is completely clogged or has suffered extensive deterioration. The fixture cannot be used.								
23	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
24	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
25	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
26	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
27	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								

28	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
29	Unit	190-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
30	Unit	190-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	5-10% of the floor covering has stains surface burns shallow cuts small holes tear loose areas or exposed seams. It is functional and poses no safety hazard.								
31	Unit	190-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
32	Unit	190-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Rear
	Deficiency	One or more stair steps or treads is missing damaged or loose.								
33	Unit	190-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Rear
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
34	Unit	190-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
35	Unit	190-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	The seals are missing on one entry door or they are so damaged that they do not function as they should.								
36	Unit	190-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	You see that a basin or associated pipes are leaking water.								
37	Unit	190-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
38	Unit	190-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	The tub stopper is missing.								
39	Unit	190-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	A sink stopper is missing.								
40	Unit	190-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
41	Unit	190-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								

42	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	Center Center
	Deficiency	Most of the window shows missing or deteriorated caulk or glazing compound but there is no evidence of damage to the window or surrounding structure.								
43	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are small areas of deterioration in the trim surfaces and 5-10% of the wall area is affected.								
44	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
45	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	A bathroom or entry door has a hole or holes larger than 1 inch in diameter.								
46	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	Center Center
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
47	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Kitchen	Location	Center Center
	Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
48	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
49	Unit	194-1	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are small areas of deterioration in the trim surfaces and 5-10% of the wall area is affected.								
50	Unit	194-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
51	Unit	194-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	Center Center
	Deficiency	One door has a hole or holes with a diameter ranging from 1/4 inch to 1 inch.								
52	Unit	194-2	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front
	Deficiency	5-10% of the floor covering has stains surface burns shallow cuts small holes teare loose areas or exposed seams. It is functional and poses no safety hazard.								
53	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
54	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								



55	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	The tub stopper is missing.								
56	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	A sink stopper is missing.								
57	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
58	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Kitchen	Location	
	Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
59	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bedroom	Location	Center Center
	Deficiency	Damage to sills frames lintels or trim but nothing is missing and surrounding wall is not exposed. No impact on the function of the window or weather tightness.								
60	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
61	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
62	Unit	194-3	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
63	Unit	194-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
64	Unit	194-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
65	Unit	194-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
66	Unit	194-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
67	Unit	194-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
68	Unit	194-4	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								

69	Unit	ABLDG	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	Left Center
	Deficiency	There is a defect or hazard that may cause the cutting or breaking of human skin or other bodily harm.								
70	Unit	ABLDG	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	Left Center
	Deficiency	There are cracks or gaps in the foundation measuring more than 1/8in wide by 1/8in deep by 6in long.								
71	Unit	ABLDG	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	Left Center
	Deficiency	More than 5% of the walkway/steps have small areas of spalling--spalled areas are 4in X 4in or less.								
72	Unit	ABLDG	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	Left Center
	Deficiency	More than 5% of the walkway/steps have small areas of spalling--spalled areas are 4in X 4in or less.								
73	Unit	ABLDG	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	Left Center
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
74	Unit	ABLDG	Address	102-194 GARFIELD AVE AND ELIOT	Insp Date	8/16/2021	Room	N/A	Location	Left Center
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
75	Unit	106-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
76	Unit	106-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One or more stair steps or treads is missing damaged or loose.								
77	Unit	106-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								
78	Unit	106-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	At least one bathroom or entry door is not functioning or cannot be locked because of damage to the frame threshold lintel or trim.								
79	Unit	106-2	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
80	Unit	106-2	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
81	Unit	106-2	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	Center Rear
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
82	Unit	106-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
83	Unit	106-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front
	Deficiency	There is a crack in the ceiling more than 1/8 inches wide and 11 inches long.								
84	Unit	106-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front
	Deficiency	The tub stopper is missing.								

85	Unit	106-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Front	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.
86	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	Center Center	Deficiency	A closet door does not function as it should because of damage to the doors hardware.
87	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	Center Center	Deficiency	A restroom (bathroom) entry or fire door does not function as it should because of damage to the doors hardware.
88	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.
89	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.
90	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.
91	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	Damage to sills frames lintels or trim but nothing is missing and surrounding wall is not exposed. No impact on the function of the window or weather tightness.
92	Unit	106-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.
93	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.
94	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.
95	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center	Deficiency	The tub stopper is missing.
96	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center	Deficiency	A sink stopper is missing.
97	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.
98	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	Left Center	Deficiency	The seals are missing on one entry door or they are so damaged that they do not function as they should.
99	Unit	110-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	One or more stair steps or treads is missing damaged or loose.
100	Unit	110-2	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.
101	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location		Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.
102	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.

103	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
104	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Kitchen	Location	
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
105	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Utility Room	Location	Left Center
	Deficiency	There are small holes that are no larger than 8.5 inches by 11 inches.								
106	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
107	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Right Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
108	Unit	110-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
109	Unit	110-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
110	Unit	114-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
111	Unit	114-1	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
112	Unit	114-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
113	Unit	114-3	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	There are small areas of deterioration in the trim surfaces and 5-10% of the wall area is affected.								
114	Unit	114-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Living Room	Location	
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
115	Unit	114-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Left Rear
	Deficiency	The tub stopper is missing.								
116	Unit	114-4	Address	106-122 ELIOT RD	Insp Date	8/16/2021	Room	Bathroom	Location	Left Rear
	Deficiency	The sink or associated hardware has failed or is missing. The sink cannot be used.								
117	Unit	118-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
118	Unit	118-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Living Room	Location	Center Front
	Deficiency	A door does not function as it should because of damage to the doors hardware.								
119	Unit	118-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	An switch has no power.								
120	Unit	118-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Living Room	Location	Center Front
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
121	Unit	118-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								

122	Unit	118-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	There is a crack in the ceiling more than 1/8 inches wide and 11 inches long.								
123	Unit	118-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
124	Unit	118-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Living Room	Location	
	Deficiency	One interior door (not a bathroom or entry door) has a hole or holes with a diameter ranging from 1/4 inch to 1 inch.								
125	Unit	118-4	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
126	Unit	122-1	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
127	Unit	122-2	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
128	Unit	122-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bedroom	Location	Center Center
	Deficiency	At least one door is not functioning or cannot be locked because of damage to the frame threshold lintel or trim.								
129	Unit	122-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
130	Unit	122-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Kitchen	Location	Left Center
	Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
131	Unit	122-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	Damage to sills frames lintels or trim but nothing is missing and surrounding wall is not exposed. No impact on the function of the window or weather tightness.								
132	Unit	122-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								
133	Unit	122-3	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
134	Unit	122-4	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Bedroom	Location	Center Center
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
135	Unit	122-4	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	Living Room	Location	Center Center
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
136	Unit	BBLDG	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	An outlet or switch cover is damaged but does not result in exposed wiring.								
137	Unit	BBLDG	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
138	Unit	BBLDG	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	There is evidence of standing water on the roof causing potential or visible damage to the roof surface or underlying materials.								

139	Unit	BBLDG	Address	106-122 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Damage to sills frames lintels or trim but nothing is missing and surrounding wall is not exposed. No impact on the function of the window or weather tightness.								
140	Unit	126-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
141	Unit	126-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bedroom	Location	Left Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
142	Unit	126-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
143	Unit	126-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	The hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								
144	Unit	126-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are more than 3 ceiling tiles or panels missing.								
145	Unit	126-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Living Room	Location	
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
146	Unit	126-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is larger than 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
147	Unit	126-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Kitchen	Location	Center Center
	Deficiency	The hood exhaust fan does not function as it should.								
148	Unit	126-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Front
	Deficiency	The tub stopper is missing.								
149	Unit	126-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Front
	Deficiency	You see that a basin or associated pipes are leaking water.								
150	Unit	126-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Front
	Deficiency	A sink stopper is missing.								
151	Unit	126-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Front
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
152	Unit	126-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Front
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
153	Unit	126-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
154	Unit	130-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
155	Unit	130-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Living Room	Location	
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
156	Unit	130-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One or more stair steps or treads is missing damaged or loose.								

157	Unit	130-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
158	Unit	130-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
159	Unit	134-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
160	Unit	134-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	Sills frames lintels or trim are missing or damaged exposing the inside of the surrounding walls and compromising its weather tightness.								
161	Unit	134-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bedroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
162	Unit	134-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
163	Unit	134-1	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
164	Unit	134-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
165	Unit	134-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
166	Unit	134-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
167	Unit	134-2	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
168	Unit	134-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
169	Unit	134-3	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
170	Unit	134-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Kitchen	Location	
	Deficiency	The GFI is inoperable and does not function as it should. It does not trip or de-energize when tested.								
171	Unit	134-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Kitchen	Location	
	Deficiency	You see that a basin or associated pipes are leaking water.								
172	Unit	134-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bedroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
173	Unit	134-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
174	Unit	134-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								

175	Unit	134-4	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
176	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
177	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								
178	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	The site hand-rail for four or more stairs or rises is missing damaged loose or otherwise unusable.								
179	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
180	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
181	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
182	Unit	CBLDG	Address	126-134 ELIOT RD	Insp Date	8/17/2021	Room	N/A	Location	Right Rear
	Deficiency	Extensive dense vegetation obstructs the intended path of walkways or roads but the path is still passable.								

## LISTON TOWERS

183	Unit	102	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
184	Unit	102	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Front
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
185	Unit	103	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	A closet door that requires locking cannot be locked because of damage to the doors hardware.								
186	Unit	104	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
187	Unit	104	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
188	Unit	107	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								



189	Unit	107	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
190	Unit	107	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	You see that a basin or associated pipes are leaking water.								
191	Unit	109	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
192	Unit	109	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
193	Unit	110	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
194	Unit	110	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	You see that a basin or associated pipes are leaking water.								
195	Unit	111	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
196	Unit	112	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
197	Unit	113	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	10-50% of the floor covering has stains surface burns shallow cuts small holes tears loose areas or exposed seams. It is functional and poses no safety hazard.								
198	Unit	113	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	There is evidence of a water stain or mold or mildew on the floor--4 square inches to 1 square foot.								
199	Unit	114	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
200	Unit	115	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
201	Unit	115	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								

202	Unit	115	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
203	Unit	115	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
204	Unit	116	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	A security door is missing damaged or not functioning properly.								
205	Unit	116	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
206	Unit	116	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
207	Unit	116	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
208	Unit	117	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
209	Unit	117	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
210	Unit	201	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
211	Unit	202	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	There is evidence of a water stain or mold/mildew on one or more walls affecting an area of more than 4 square inches but less than 1 square foot.								
212	Unit	202	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	The tub stopper is missing.								
213	Unit	202	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	A sink stopper is missing.								
214	Unit	203	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	N/A
	Deficiency	N/A								

215	Unit	204	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
216	Unit	206	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
217	Unit	207	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
218	Unit	207	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bedroom	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
219	Unit	207	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
220	Unit	212	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
221	Unit	213	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
222	Unit	213	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	The toilet seat is cracked or broken or the hinge is broken.								
223	Unit	214	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
224	Unit	215	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
225	Unit	216	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
226	Unit	217	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
227	Unit	301	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
228	Unit	302	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								

229	Unit	303	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Front
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
230	Unit	303	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
231	Unit	304	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	The tub stopper is missing.								
232	Unit	304	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	A sink stopper is missing.								
233	Unit	304	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Front
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								
234	Unit	305	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Front
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
235	Unit	305	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
236	Unit	306	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
237	Unit	307	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
238	Unit	307	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
239	Unit	307	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
240	Unit	309	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	You see that a basin or associated pipes are leaking water.								
241	Unit	310	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	20% or more of the countertop working surface is missing deteriorated or damaged below the laminate. It is not sanitary for food preparation.								
242	Unit	310	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								

243	Unit	310	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
244	Unit	310	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
245	Unit	311	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	Center Center
	Deficiency	The apartment/house has and excessive amount of clutter and needs to be cleaned								
246	Unit	313	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Left Rear
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
247	Unit	313	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bedroom	Location	Right Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
248	Unit	313	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Left Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
249	Unit	314	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
250	Unit	315	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	Center Center
	Deficiency	The apartment/house has and excessive amount of clutter and needs to be cleaned								
251	Unit	316	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Living Room	Location	Center Center
	Deficiency	The seals are missing on one entry door or they are so damaged that they do not function as they should.								
252	Unit	403	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
253	Unit	405	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
254	Unit	408	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Rear
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
255	Unit	408	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is more than 4 square feet of peeling or chipping paint on one or more walls.								
256	Unit	408	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	You see that a basin or associated pipes are leaking water.								

257	Unit	409	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
258	Unit	411	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
259	Unit	412	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Kitchen	Location	Center Center
	Deficiency	A closet door does not function as it should because of damage to the doors hardware.								
260	Unit	412	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Rear
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
261	Unit	412	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
262	Unit	412	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
263	Unit	413	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
264	Unit	415	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Front
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
265	Unit	416	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Front
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
266	Unit	417	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
267	Unit	501	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
268	Unit	501	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
269	Unit	502	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								

270	Unit	503	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
271	Unit	504	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
272	Unit	505	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Kitchen	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
273	Unit	506	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
274	Unit	507	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
275	Unit	508	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Kitchen	Location	Center Center
	Deficiency	20% or more of the countertop working surface is missing deteriorated or damaged below the laminate. It is not sanitary for food preparation.								
276	Unit	509	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
277	Unit	509	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
278	Unit	510	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
279	Unit	511	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
280	Unit	511	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
281	Unit	514	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
282	Unit	517	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								

283	Unit	604	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	A closet door that requires locking cannot be locked because of damage to the doors hardware.								
284	Unit	604	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Front
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
285	Unit	604	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Front
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
286	Unit	605	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
287	Unit	606	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
288	Unit	606	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
289	Unit	608	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
290	Unit	608	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	You see that a basin or associated pipes are leaking water.								
291	Unit	608	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
292	Unit	610	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
293	Unit	612	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
294	Unit	613	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
295	Unit	614	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								



296	Unit	1BLDG	Address	45 DOLPHIN AVENUE	Insp Date	8/4/2021	Room	N/A	Location	
	Deficiency	Extensive dense vegetation obstructs the intended path of walkways or roads but the path is still passable.								
297	Unit	G1	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	Center Center
	Deficiency	The apartment/house has and excessive amount of clutter and needs to be cleaned								
298	Unit	G2	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	N/A	Location	N/A
	Deficiency	N/A								
299	Unit	G3	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Kitchen	Location	Right Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
300	Unit	G3	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
301	Unit	G3	Address	45 DOLPHIN AVENUE	Insp Date	8/3/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								

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501	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
502	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
503	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	At least one door is not functioning or cannot be locked because of damage to the frame threshold lintel or trim.								
504	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one door is not functioning or cannot be locked because of damage to the frame threshold lintel or trim.								
505	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
506	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	10-50% of the flooring has small holes or is damaged but there are no safety issues								
507	Unit	177	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								

508	Unit	179	Address	177-179 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Front
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
509	Unit	181	Address	181-187 PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
510	Unit	181	Address	181-187 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
511	Unit	181	Address	181-187 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
512	Unit	183	Address	181-187 PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
513	Unit	187	Address	181-187 PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
514	Unit	210	Address	204-210 CUSHMAN AVE	Insp Date	8/5/2021	Room	Kitchen	Location	Center Rear
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
515	Unit	210	Address	204-210 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
516	Unit	212	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Front
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
517	Unit	214	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
518	Unit	214	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	A sink stopper is missing.								
519	Unit	214	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
520	Unit	216	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	A restroom (bathroom) entry or fire door that requires locking cannot be locked because of damage to the doors hardware.								

521	Unit	216	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
522	Unit	218	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Kitchen	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
523	Unit	218	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
524	Unit	220	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
525	Unit	220	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
526	Unit	220	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
527	Unit	222	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
528	Unit	222	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
529	Unit	222	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
530	Unit	224	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
531	Unit	224	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
532	Unit	224	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
533	Unit	226	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
534	Unit	226	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								

535	Unit	228	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	Kitchen	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
536	Unit	228	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
537	Unit	230	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
538	Unit	232	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	A restroom (bathroom) entry or fire door that requires locking cannot be locked because of damage to the doors hardware.								
539	Unit	232	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
540	Unit	10BLDG	Address	177A-179A PROCTOR AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
541	Unit	11BLDG	Address	181A-187A PROCTOR AVE	Insp Date	8/5/2021	Room	N/A	Location	Right Rear
	Deficiency	Water accumulation has made a large section of the grounds (>20%) unusable for its intended purpose.								
542	Unit	169A	Address	169A-171A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
543	Unit	171A	Address	169A-171A PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.								
544	Unit	171A	Address	169A-171A PROCTOR AVE	Insp Date	8/5/2021	Room	Living Room	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
545	Unit	173A	Address	173A-175A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
546	Unit	175A	Address	173A-175A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Right Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
547	Unit	175A	Address	173A-175A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Right Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
548	Unit	181A	Address	181A-187A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								

549	Unit	183A	Address	181A-187A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
550	Unit	185A	Address	181A-187A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Rear
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
551	Unit	187A	Address	181A-187A PROCTOR AVE	Insp Date	8/5/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
552	Unit	1BLDG	Address	204-210 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
553	Unit	1BLDG	Address	204-210 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Water accumulation has made a large section of the grounds (>20%) unusable for its intended purpose.								
554	Unit	2BLDG	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Less than 50% of a single building exterior wall is affected.								
555	Unit	2BLDG	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
556	Unit	2BLDG	Address	212-218 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
557	Unit	3BLDG	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								
558	Unit	3BLDG	Address	220-226 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Water accumulation has made a large section of the grounds (>20%) unusable for its intended purpose.								
559	Unit	4BLDG	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								
560	Unit	4BLDG	Address	228-234 CUSHMAN AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Water accumulation has made a large section of the grounds (>20%) unusable for its intended purpose.								
561	Unit	5BLDG	Address	169-175 PROCTOR AVE	Insp Date	8/5/2021	Room	N/A	Location	
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								

562 Unit	5BLDG	Address	169-175 PROCTOR AVE	Insp Date	8/5/2021	Room	N/A	Location	
Deficiency		Water accumulation has made a large section of the grounds (>20%) unusable for its intended purpose.							
563 Unit	9BLDG	Address	173A-175A PROCTOR AVE	Insp Date	8/5/2021	Room	N/A	Location	
Deficiency		Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.							

## SCATTERED SITES

302 Unit	10BLDG	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency		There is a missing piece--a single brick or section of siding--or a hole larger than 1/2 inch in diameter.							
303 Unit	10BLDG	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency		Trash cannot be stored in the designated area because it is too small to store refuse until disposal.							
304 Unit	110-1ST FL	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
Deficiency		There is less than 4 sq ft of peeling paint on the ceiling.							
305 Unit	110-2ND FL	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Left Center
Deficiency		There is less than 4 sq ft of peeling paint on the ceiling.							
306 Unit	110-2ND FL	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	Hall/Stairway	Location	Center Rear
Deficiency		There is less than 4 sq ft of peeling paint on the ceiling.							
307 Unit	112-1ST FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
Deficiency		10-50% of the ceiling area area shows damage from stains mold or mildew.							
308 Unit	112-1ST FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
Deficiency		There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.							
309 Unit	112-1ST FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Living Room	Location	Center Front
Deficiency		The seals are missing on one entry door or they are so damaged that they do not function as they should.							
310 Unit	112-2ND FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Right Center
Deficiency		Fixture elements--seat flush handle cover etc--are missing or damaged.							
311 Unit	112-3RD FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Hall/Stairway	Location	Center Center
Deficiency		There is less than 4 sq ft of peeling paint on the ceiling.							
312 Unit	112-3RD FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
Deficiency		There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.							
313 Unit	112-3RD FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
Deficiency		The tub stopper is missing.							
314 Unit	112-3RD FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
Deficiency		A sink stopper is missing.							
315 Unit	112-3RD FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Living Room	Location	Center Center
Deficiency		At least one screen is missing or is punctured torn or otherwise damaged.							

316	Unit	112-3RD FL	Address	112 SHIRLEY AVE	Insp Date	8/18/2021	Room	Bedroom 4	Location	Center Center
	Deficiency	A door does not function as it should because of damage to the doors hardware.								
317	Unit	11BLDG	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	N/A	Location	
	Deficiency	Less than 50% of a single building exterior wall is affected.								
318	Unit	11BLDG	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	N/A	Location	
	Deficiency	The floor is bulging buckling or sagging or there is a problem with alignment.								
319	Unit	1-1ST FL	Address	1-3 DANA ST	Insp Date	8/18/2021	Room	Bathroom	Location	Left Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
320	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	5-10% of the floor covering has stains surface burns shallow cuts small holes tear loose areas or exposed seams. It is functional and poses no safety hazard.								
321	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
322	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
323	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
324	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
	Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
325	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Dining Room	Location	Center Center
	Deficiency	A window is not functioning but can be secured. Other windows in the immediate are functioning.								
326	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Dining Room	Location	Center Center
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
327	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Bedroom 4	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
328	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
329	Unit	128-2ND FL	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
330	Unit	12BLDG	Address	65 THORNTON ST	Insp Date	8/18/2021	Room	N/A	Location	
	Deficiency	Trash cannot be stored in the designated area because it is too small to store refuse until disposal.								

331	Unit	12BLDG	Address	65 THORNTON ST	Insp Date	8/18/2021	Room	N/A	Location	
	Deficiency	Trash cannot be stored in the designated area because it is too small to store refuse until disposal.								
332	Unit	12BLDG	Address	65 THORNTON ST	Insp Date	8/18/2021	Room	N/A	Location	
	Deficiency	The floor is bulging buckling or sagging or there is a problem with alignment.								
333	Unit	13BLDG	Address	45 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	Center Center
	Deficiency	Three or more screens in one building are missing or punctured torn or otherwise damaged or missing.								
334	Unit	13BLDG	Address	45 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	Center Center
	Deficiency	There are more than 3 ceiling tiles or panels missing.								
335	Unit	13BLDG	Address	45 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	Center Center
	Deficiency	An accumulation of water 3-5 inches deep affects the use of a section of the grounds but the grounds are generally usable.								
336	Unit	13BLDG	Address	45 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	Center Center
	Deficiency	Less than 3 inches of water has accumulated affecting the use of 5% or more of a parking lot driveway or road. The area is passable.								
337	Unit	13BLDG	Address	45 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	Center Center
	Deficiency	Cracks more than 3/4 inches or hinging/tilting or missing section(s) that affect traffic ability over more than 10% of the property parking lots driveways or roads.								
338	Unit	14BLDG	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
339	Unit	14BLDG	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	There is between 1 and 4 sq ft of peeling or chipping paint on the floor.								
340	Unit	14BLDG	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
341	Unit	14BLDG	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	An accumulation of water 3-5 inches deep affects the use of a section of the grounds but the grounds are generally usable.								
342	Unit	14BLDG	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	Other items that may need attention or repairs.								
343	Unit	1513-1	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	The tub stopper is missing.								
344	Unit	1513-1	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Kitchen	Location	Center Center
	Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
345	Unit	1513-1	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bedroom	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
346	Unit	1513-1	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
347	Unit	1513-1	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	An exhaust fan is not functioning.								
348	Unit	1513-2	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Kitchen	Location	Center Center
	Deficiency	10-50% of the ceiling area area shows damage from stains mold or mildew.								



349	Unit	1513-2	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Living Room	Location	
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
350	Unit	1513-2	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a cracked window pane.								
351	Unit	1513-2	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
352	Unit	1513-2	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
353	Unit	1513-2	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
354	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	There is between 1 and 4 sq ft of peeling or chipping paint on the floor.								
355	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
356	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
357	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
358	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
359	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
360	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	An accumulation of water 3-5 inches deep affects the use of a section of the grounds but the grounds are generally usable.								
361	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	Trash cannot be stored in the designated area because it is too small to store refuse until disposal.								
362	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								

363	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	The seals are missing on one entry door or they are so damaged that they do not function as they should.								
364	Unit	15BLDG	Address	128-130 WALNUT AVE	Insp Date	8/19/2021	Room	N/A	Location	
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
365	Unit	168-3RD FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Bedroom 3	Location	Left Center
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
366	Unit	168-3RD FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Bedroom 3	Location	Left Center
	Deficiency	A door does not function as it should because of damage to the doors hardware.								
367	Unit	168-3RD FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	A door does not function as it should because of damage to the doors hardware.								
368	Unit	168-3RD FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Left Center
	Deficiency	An exhaust fan is not functioning.								
369	Unit	170-1ST FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Left Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
370	Unit	170-2ND FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Kitchen	Location	
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
371	Unit	170-2ND FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
372	Unit	170-2ND FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	A door has a hole or holes larger than 1 inch or significant peeling/cracking/no paint or rust that affects the integrity of the door surface or broken/missing glass.								
373	Unit	170-2ND FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
374	Unit	170-3RD FL	Address	168-170 HICHBORN ST	Insp Date	9/20/2021	Room	Bedroom 3	Location	Center Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
375	Unit	174-2ND FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								

376	Unit	174-3RD FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Right Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
377	Unit	174-3RD FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Right Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
378	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
379	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
380	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Kitchen	Location	
	Deficiency	An outlet or switch cover is damaged but does not result in exposed wiring.								
381	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Kitchen	Location	
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
382	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bedroom 3	Location	Right Center
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
383	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	10-50% of the flooring has small holes or is damaged but there are no safety issues								
384	Unit	176-1ST FL	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
385	Unit	1BLDG	Address	1-3 DANA ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
386	Unit	1BLDG	Address	1-3 DANA ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
387	Unit	1BLDG	Address	1-3 DANA ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								
388	Unit	20-1ST FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Right Rear
	Deficiency	The tub stopper is missing.								
389	Unit	20-1ST FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	10-50% of the flooring has small holes or is damaged but there are no safety issues								

390	Unit	20-2ND FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
391	Unit	20-2ND FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Kitchen	Location	
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
392	Unit	20-2ND FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	An exhaust fan is not functioning.								
393	Unit	20-3RD FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is evidence of a leak mold or mildew (more than 1 sq ft but less than 4 sq ft). Less than 10% of the ceiling surface area is affected.								
394	Unit	20-3RD FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bedroom 3	Location	Center Center
	Deficiency	5-10% of the floor covering has stains surface burns shallow cuts small holes teare loose areas or exposed seams. It is functional and poses no safety hazard.								
395	Unit	20-3RD FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Kitchen	Location	
	Deficiency	There is 1 to 4 square feet of peeling or chipping paint on two or more walls.								
396	Unit	20-3RD FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	One interior door (not a bathroom or entry door) has a hole or holes with a diatmeter ranging from 1/4 inch to 1 inch.								
397	Unit	20-3RD FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	10-50% of the flooring has small holes or is damaged but there are no safety issues								
398	Unit	22-1ST FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	An exhaust fan is not functioning.								
399	Unit	22-3RD FL	Address	20-22 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
400	Unit	39-6R	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	Bathroom	Location	Left Center
	Deficiency	One door has a hole or holes with a diameter ranging from 1/4 inch to 1 inch.								
401	Unit	39-6R	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
402	Unit	3BLDG	Address	174-176 HICHBORN ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
403	Unit	47-1ST FL	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	Bedroom	Location	Left Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
404	Unit	47-1ST FL	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	Living Room	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
405	Unit	47-1ST FL	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								

406	Unit	47-1ST FL	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
407	Unit	47-3RD FL	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								
408	Unit	4BLDG	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	5-10% of the floor covering has stains surface burns shallow cuts small holes teare loose areas or exposed seams. It is functional and poses no safety hazard.								
409	Unit	4BLDG	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	There are more than 3 ceiling tiles or panels missing.								
410	Unit	4BLDG	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	10-50% of the flooring has small holes or is damaged but there are no safety issues								
411	Unit	4BLDG	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
412	Unit	4BLDG	Address	39 HIGHLAND ST	Insp Date	9/20/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
413	Unit	51-1	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
414	Unit	51-1	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Living Room	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
415	Unit	51-1	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Living Room	Location	Center Center
	Deficiency	The seals are missing on one entry door or they are so damaged that they do not function as they should.								
416	Unit	51-2	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
417	Unit	51-2	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
418	Unit	51-2	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Living Room	Location	
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
419	Unit	52-2	Address	50-52 PLEASANT ST	Insp Date	9/21/2021	Room	Dining Room	Location	Center Center
	Deficiency	An outlet or switch cover is damaged but does not result in exposed wiring.								
420	Unit	52-2	Address	50-52 PLEASANT ST	Insp Date	9/21/2021	Room	Kitchen	Location	Left Center
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
421	Unit	52-2	Address	50-52 PLEASANT ST	Insp Date	9/21/2021	Room	Bedroom 3	Location	Left Front
	Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.								
422	Unit	53-5	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
423	Unit	53-5	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
	Deficiency	The refrigerator has an excessive accumulation of ice.								

424	Unit	53-5	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Living Room	Location	Left Center	Deficiency	A window is not functioning but can be secured. Other windows in the immediate are functioning.
425	Unit	53-6	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Right Center	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.
426	Unit	53-6	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Right Center	Deficiency	There are small areas of deterioration in the trim surfaces and 5-10% of the wall area is affected.
427	Unit	53-6	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Living Room	Location		Deficiency	A door that requires locking cannot be locked because of damage to the doors hardware.
428	Unit	53-7	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	Kitchen	Location		Deficiency	At least one screen door or storm door is damaged or is missing screens or glass - shown by an empty frame or frames.
429	Unit	53-7	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	Bedroom	Location	Left Center	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.
430	Unit	53-7	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	Bedroom 2	Location	Right Center	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.
431	Unit	53-7	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	Living Room	Location	Center Center	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.
432	Unit	53-7	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.
433	Unit	53-7	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	Bathroom	Location	Center Center	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.
434	Unit	53-8	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.
435	Unit	53-8	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway 2	Location	Center Center	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.
436	Unit	53-8	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Kitchen	Location		Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.
437	Unit	55-10	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.
438	Unit	55-10	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.
439	Unit	55-10	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.
440	Unit	55-10	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.
441	Unit	55-10	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.
442	Unit	55-12	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.

443	Unit	55-12	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
444	Unit	55-12	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								
445	Unit	57-16	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
446	Unit	57-16	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
447	Unit	57-16	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Living Room	Location	Center Center
	Deficiency	There is a cracked window pane.								
448	Unit	57-16	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								
449	Unit	57-17	Address	51-57 NAHANT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
450	Unit	5BLDG	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	
	Deficiency	At least one screen is missing or is punctured torn or otherwise damaged.								
451	Unit	5BLDG	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
452	Unit	5BLDG	Address	47 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
453	Unit	65-1ST FL	Address	65 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is evidence of a leak mold or mildew (more than 4 sq ft).								
454	Unit	65-2ND FL	Address	65 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								
455	Unit	65-2ND FL	Address	65 THORNTON ST	Insp Date	8/18/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is evidence of a water stain or mold or mildew on the floor--4 square inches to 1 square foot.								
456	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
457	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
458	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	There is a crack in the wall greater than 1/8 inches wide and at least 11 inches long.								
459	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
460	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Three or more screens in one building are missing or punctured torn or otherwise damaged or missing.								
461	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	There are cracks or gaps in the wall measuring more than 1/8in wide by 1/8in deep by 6in long.								

462	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	There is evidence of a water stain or mold or mildew on the floor--4 square inches to 1 square foot.								
463	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
464	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
465	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
466	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Vegetation contacts or penetrates an unintended surface--buildings gutters fences walls roofs--but there is no visible damage.								
467	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
468	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
469	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
470	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Water accumulation has made a large section of the grounds (>20%) unusable for its intended purpose.								
471	Unit	6BLDG	Address	51-57 NAHANT AVE	Insp Date	9/21/2021	Room	N/A	Location	Right Rear
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								
472	Unit	7BLDG	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	N/A	Location	
	Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								
473	Unit	7BLDG	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	N/A	Location	
	Deficiency	An exterior entrance door seal or caulking is missing or is damaged limiting functionality of the door.								
474	Unit	7BLDG	Address	1513 N SHORE RD	Insp Date	9/21/2021	Room	N/A	Location	
	Deficiency	Plants have visibly damaged a component area or system of the property or have made them unusable or unpassable.								
475	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
	Deficiency	5-10% of the flooring has small holes or is damaged but there are no safety issues.								
476	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
477	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Living Room	Location	
	Deficiency	Most of the window shows missing or deteriorated caulk or glazing compound but there is no evidence of damage to the window or surrounding structure.								



478	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
	Deficiency	20% or more of the countertop working surface is missing deteriorated or damaged below the laminate. It is not sanitary for food preparation.								
479	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
480	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Center Center
	Deficiency	An exhaust fan is not functioning.								
481	Unit	84-1ST FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Patio/Porches/ Balcony	Location	Center Center
	Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
482	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center
	Deficiency	There is a hole or missing tile/panel or other damage that is between 1 square inch and 8.5 inches by 11 inches. The hole does not penetrate the adjoining room.								
483	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Left Center
	Deficiency	The tub stopper is missing.								
484	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
	Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
485	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
	Deficiency	There is damaged or missing shelves vanity tops drawers or doors that are not functioning properly for storage or their intended purpose.								
486	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Left Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
487	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Left Center
	Deficiency	Fixture elements--seat flush handle cover etc--are missing or damaged.								
488	Unit	84-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Left Center
	Deficiency	At least one bathroom or entry door is not functioning or cannot be locked because of damage to the frame threshold lintel or trim.								
489	Unit	86-1ST FL	Address	84-86 WALNUT AVE	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
490	Unit	86-1ST FL	Address	84-86 WALNUT AVE	Insp Date	9/20/2021	Room	Kitchen	Location	Center Center
	Deficiency	There are cracks or extensive discoloration in over 50% of the basin but the sink can be used.								
491	Unit	86-1ST FL	Address	84-86 WALNUT AVE	Insp Date	9/20/2021	Room	Bedroom 3	Location	Right Center
	Deficiency	Most of the window shows missing or deteriorated caulk or glazing compound but there is no evidence of damage to the window or surrounding structure.								
492	Unit	86-1ST FL	Address	84-86 WALNUT AVE	Insp Date	9/20/2021	Room	Bathroom	Location	Center Center
	Deficiency	The shower or tub can be used but there are cracks or extensive discoloration in more than 50% of the basin.								
493	Unit	86-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Bathroom	Location	Left Center
	Deficiency	There is less than 4 sq ft of peeling paint on the ceiling.								

494 Unit	86-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Kitchen	Location	Center Center
Deficiency	An accumulation of dirt/grease in the hood exhaust threatens the free passage of air.								
495 Unit	86-2ND FL	Address	84-86 WALNUT AVE	Insp Date	8/19/2021	Room	Hall/Stairway	Location	Center Center
Deficiency	One entry door or fire/emergency door has a hole or holes larger than 1 inch in diameter.								
496 Unit	9BLDG	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency	Less than 50% of a single building exterior wall is affected.								
497 Unit	9BLDG	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency	There are more than 3 ceiling tiles or panels missing.								
498 Unit	9BLDG	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency	There is a missing piece--a single brick or section of siding--or a hole larger than 1/2 inch in diameter.								
499 Unit	9BLDG	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency	Vegetation is extensive and dense. It is difficult to see broken glass holes and other hazards.								
500 Unit	9BLDG	Address	110 SHIRLEY AVE	Insp Date	8/18/2021	Room	N/A	Location	
Deficiency	Cracks greater than 3/4in hinging tilting or missing section(s) that affect traffic ability over more than 5% of the property walkways or steps.								

Operating Budget

The tables on the following pages show the approved budget and actual income and spending per budget account (row) for the fiscal year ending 03/31/2021. It also shows the approved budget for the current year (2022) if there is one, and the percent change from last year's spending to this year's approved budget. The final column shows the current approved amount for each account divided by the number of housing units and by 12 months to show the amount per unit per month (PUM). The chart does not show a draft budget for the coming fiscal year as that will typically be developed in the final month of the fiscal year.

The budget format and accounts are mandated by the Department of Housing and Community Development (DHCD). For a better understanding of the accounts and discussion of special situations see the notes following the budget tables and the "Definitions of Accounts" at the end of this section.

The LHA maintains a consolidated budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by the LHA. It does not maintain separate budgets for each development, except as noted in the list of budgets below.

Budgets included in this Annual Plan:

- 1.Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by Revere Housing Authority , except as noted for separate budgets on the following pages.
- 2.Hyman Towers

**Operating Reserve**

The LHA's operating reserve is the amount of funds that an LHA sets aside to sustain itself during lean years, or to remedy urgent health and safety concern or address deferred maintenance items. In addition, while DHCD approves a fixed non-utility operating budget level for every LHA (called the Allowable Non-Utility Expense Level, or ANUEL), LHAs can propose a budget that exceeds that level, with the additional cost to be funded from the Operating Reserve, as long as the reserve will still remain above the minimum threshold set by DHCD.

DHCD defines a full (100%) Operating Reserve (OR) amount to be equal to one-half of the previous year's operating expenses and requires LHAs to maintain a minimum OR of 35% of this amount to cover any unplanned but urgent needs that may arise during the year and that can't be funded by the operating budget. If the reserve is between 20% and 35% of the full level, the LHA must obtain prior written approval from DHCD to spend reserve funds, unless the expense is to resolve a health and safety issue. If the reserve is below the 20% level, the LHA can only spend OR funds on health and safety issues. In both cases, the LHA should address the health and safety issue immediately but must retroactively inform DHCD and obtain its approval.

The Revere Housing Authority operating reserve at the end of fiscal year 2021 was \$2,346,618.00, which is 104.5% of the full reserve amount defined above.

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by Revere Housing Authority , except as noted for separate budgets on the following pages.						
<b>REVENUE</b>						
Account Number	Account Class	2021 Approved Revenue Budget	2021 Actual Amounts Received	2022 Approved Revenue Budget	% Change from 2021 Actual to 2022 Budget	2022 Dollars Budgeted per Unit per Month
3110	Shelter Rent - Tenants	\$3,164,040.00	\$3,188,970.00	\$3,181,920.00	-0.2%	\$443.41
3111	Shelter Rent - Tenants - Fraud/Retroactive	\$0.00	\$90,338.00	\$0.00	-100%	\$0.00
3115	Shelter Rent - Federal Section 8	\$0.00	\$0.00	\$0.00	0%	\$0.00
3190	Nondwelling Rentals	\$0.00	\$0.00	\$0.00	0%	\$0.00
3400	Administrative Fee - MRVP	\$0.00	\$0.00	\$0.00	0%	\$0.00
3610	Interest on Investments - Unrestricted	\$8,750.00	\$3,868.00	\$875.00	-77.4%	\$0.12
3611	Interest on Investments - Restricted	\$0.00	\$0.00	\$0.00	0%	\$0.00
3690	Other Revenue	\$18,000.00	\$18,384.00	\$20,000.00	8.8%	\$2.79
3691	Other Revenue - Retained	\$183,000.00	\$250,842.00	\$105,500.00	-57.9%	\$14.70
3692	Other Revenue - Operating Reserves	\$0.00	\$0.00	\$0.00	0%	\$0.00
3693	Other Revenue - Energy Net Meter	\$0.00	\$0.00	\$105,500.00	100%	\$14.70
3801	Operating Subsidy - DHCD (4001)	\$1,759,994.00	\$1,748,353.00	\$1,328,184.00	-24%	\$185.09
3802	Operating Subsidy - MRVP Landlords	\$0.00	\$0.00	\$0.00	0%	\$0.00
3803	Restricted Grants Received	\$0.00	\$0.00	\$0.00	0%	\$0.00
3920	Gain/Loss From Sale/Disp. of Prop.	\$0.00	\$0.00	\$0.00	0%	\$0.00
3000	TOTAL REVENUE	\$5,133,784.00	\$5,300,755.00	\$4,741,979.00	-10.5%	\$660.81

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by Revere Housing Authority , except as noted for separate budgets on the following pages.						
<b>EXPENSES</b>						
Account Number	Account Class	2021 Approved Expense Budget	2021 Actual Amounts Spent	2022 Approved Expense Budget	% Change from 2021 Actual to 2022 Budget.	2022 Dollars Budgeted per Unit per Month
4110	Administrative Salaries	\$446,275.00	\$393,023.00	\$444,762.00	13.2%	\$61.98
4120	Compensated Absences	\$0.00	\$14,384.00	\$0.00	-100%	\$0.00
4130	Legal	\$110,000.00	\$33,329.00	\$110,000.00	230%	\$15.33
4140	Members Compensation	\$30,000.00	\$36,580.00	\$33,000.00	-9.8%	\$4.60
4150	Travel & Related Expenses	\$3,209.00	\$728.00	\$3,245.00	345.7%	\$0.45
4170	Accounting Services	\$13,716.00	\$12,868.00	\$13,716.00	6.6%	\$1.91
4171	Audit Costs	\$10,000.00	\$8,602.00	\$10,000.00	16.3%	\$1.39
4180	Penalties & Interest	\$0.00	\$0.00	\$0.00	0%	\$0.00
4190	Administrative Other	\$125,742.00	\$143,402.00	\$128,551.00	-10.4%	\$17.91
4191	Tenant Organization	\$3,588.00	\$0.00	\$3,588.00	100%	\$0.50
4100	TOTAL ADMINISTRATION	\$742,530.00	\$642,916.00	\$746,862.00	16.2%	\$104.08
4310	Water	\$805,000.00	\$794,223.00	\$805,000.00	1.4%	\$112.18
4320	Electricity	\$590,000.00	\$650,842.00	\$590,000.00	-9.3%	\$82.22
4330	Gas	\$95,896.00	\$90,121.00	\$95,896.00	6.4%	\$13.36
4340	Fuel	\$0.00	\$0.00	\$0.00	0%	\$0.00
4360	Net Meter Utility Debit/Energy Conservation	\$0.00	\$214,182.00	\$105,500.00	-50.7%	\$14.70
4390	Other	\$0.00	\$0.00	\$0.00	0%	\$0.00
4391	Solar Operator Costs	\$340,000.00	\$320,421.00	\$300,000.00	-6.4%	\$41.81
4392	Net Meter Utility Credit (Negative Amount)	\$-340,000.00	\$-534,603.00	\$-405,500.0	-24.1%	\$-56.51
4300	TOTAL UTILITIES	\$1,490,896.0	\$1,535,186.0	\$1,490,896.	-2.9%	\$207.76

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by Revere Housing Authority , except as noted for separate budgets on the following pages.						
<b>EXPENSES</b>						
Account Number	Account Class	2021 Approved Expense Budget	2021 Actual Amounts Spent	2022 Approved Expense Budget	% Change from 2021 Actual to 2022 Budget	2022 Dollars Budgeted per Unit per Month
4410	Maintenance Labor	\$809,238.00	\$737,029.00	\$839,126.00	13.9%	\$116.94
4420	Materials & Supplies	\$210,000.00	\$165,877.00	\$210,000.00	26.6%	\$29.26
4430	Contract Costs	\$230,500.00	\$214,294.00	\$180,500.00	-15.8%	\$25.15
4400	TOTAL MAINTENANCE	\$1,249,738.00	\$1,117,200.00	\$1,229,626.00	10.1%	\$171.35
4510	Insurance	\$168,266.00	\$169,081.00	\$185,616.00	9.8%	\$25.87
4520	Payment in Lieu of Taxes	\$45,000.00	\$30,974.00	\$30,000.00	-3.1%	\$4.18
4540	Employee Benefits	\$697,754.00	\$640,792.00	\$754,283.00	17.7%	\$105.11
4541	Employee Benefits - GASB 45	\$0.00	\$257,774.00	\$0.00	-100%	\$0.00
4542	Pension Expense - GASB 68	\$0.00	\$0.00	\$0.00	0%	\$0.00
4570	Collection Loss	\$10,000.00	\$71,752.00	\$10,000.00	-86.1%	\$1.39
4571	Collection Loss - Fraud/Retroactive	\$0.00	\$90,338.00	\$0.00	-100%	\$0.00
4580	Interest Expense	\$0.00	\$0.00	\$0.00	0%	\$0.00
4590	Other General Expense	\$0.00	\$0.00	\$0.00	0%	\$0.00
4500	TOTAL GENERAL EXPENSES	\$921,020.00	\$1,260,711.00	\$979,899.00	-22.3%	\$136.55
4610	Extraordinary Maintenance	\$247,705.00	\$162,049.00	\$191,000.00	17.9%	\$26.62
4611	Equipment Purchases - Non Capitalized	\$42,000.00	\$28,704.00	\$30,000.00	4.5%	\$4.18
4612	Restricted Reserve Expenditures	\$0.00	\$0.00	\$0.00	0%	\$0.00
4715	Housing Assistance Payments	\$0.00	\$0.00	\$0.00	0%	\$0.00
4801	Depreciation Expense	\$0.00	\$1,332,196.00	\$0.00	-100%	\$0.00
4600	TOTAL OTHER EXPENSES	\$289,705.00	\$1,522,949.00	\$221,000.00	-85.5%	\$30.80
4000	TOTAL EXPENSES	\$4,693,889.00	\$6,078,962.00	\$4,668,283.00	-23.2%	\$650.54

Consolidated Budget (400-1) for all state-aided 667 (Elderly), 200 (family), and 705 (scattered site family) developments owned by Revere Housing Authority , except as noted for separate budgets on the following pages.						
<b>SUMMARY</b>						
Account Number	Account Class	2021 Approved Budget	2021 Actual Amounts	2022 Approved Budget	% Change from 2021 Actual to 2022 Budget	2022 Dollars Budgeted per Unit per Month
3000	TOTAL REVENUE	\$5,133,784.00	\$5,300,755.00	\$4,741,979.00	-10.5%	\$660.81
4000	TOTAL EXPENSES	\$4,693,889.00	\$6,078,962.00	\$4,668,283.00	-23.2%	\$650.54
2700	NET INCOME (DEFICIT)	\$439,895.00	\$-778,207.00	\$73,696.00	-109.5%	\$10.27
7520	Replacements of Equip. - Capitalized	\$23,000.00	\$112,616.00	\$40,000.00	-64.5%	\$5.57
7540	Betterments & Additions - Capitalized	\$15,000.00	\$62,155.00	\$0.00	-100%	\$0.00
7500	TOTAL NONOPERATING EXPENDITURES	\$38,000.00	\$174,771.00	\$40,000.00	-77.1%	\$5.57
7600	EXCESS REVENUE OVER EXPENSES	\$401,895.00	\$-952,978.00	\$33,696.00	-103.5%	\$4.70



Hyman Towers						
<b>REVENUE</b>						
Account Number	Account Class	2021 Approved Revenue Budget	2021 Actual Amounts Received	2022 Approved Revenue Budget	% Change from 2021 Actual to 2022 Budget	2022 Dollars Budgeted per Unit per Month
3110	Shelter Rent - Tenants	\$415,116.00	\$437,833.00	\$446,028.00	1.9%	\$350.65
3111	Shelter Rent - Tenants - Fraud/Retroactive	\$0.00	\$1,091,857.00	\$0.00	-100%	\$0.00
3115	Shelter Rent - Federal Section 8	\$1,110,012.00	\$0.00	\$1,122,348.00	100%	\$882.35
3190	Nondwelling Rentals	\$0.00	\$0.00	\$0.00	0%	\$0.00
3400	Administrative Fee - MRVP	\$0.00	\$0.00	\$0.00	0%	\$0.00
3610	Interest on Investments - Unrestricted	\$5,000.00	\$1,174.00	\$500.00	-57.4%	\$0.39
3611	Interest on Investments - Restricted	\$0.00	\$0.00	\$0.00	0%	\$0.00
3690	Other Revenue	\$8,900.00	\$72,781.00	\$25,000.00	-65.7%	\$19.65
3691	Other Revenue - Retained	\$58,000.00	\$3,490.00	\$0.00	-100%	\$0.00
3692	Other Revenue - Operating Reserves	\$0.00	\$0.00	\$0.00	0%	\$0.00
3693	Other Revenue - Energy Net Meter	\$0.00	\$90,278.00	\$80,000.00	-11.4%	\$62.89
3801	Operating Subsidy - DHCD (4001)	\$0.00	\$0.00	\$0.00	0%	\$0.00
3802	Operating Subsidy - MRVP Landlords	\$0.00	\$0.00	\$0.00	0%	\$0.00
3803	Restricted Grants Received	\$0.00	\$0.00	\$0.00	0%	\$0.00
3920	Gain/Loss From Sale/Disp. of Prop.	\$0.00	\$0.00	\$0.00	0%	\$0.00
3000	<b>TOTAL REVENUE</b>	<b>\$1,597,028.00</b>	<b>\$1,697,413.00</b>	<b>\$1,673,876.00</b>	<b>-1.4%</b>	<b>\$1,315.94</b>

Hyman Towers						
<b>EXPENSES</b>						
Account Number	Account Class	2021 Approved Expense Budget	2021 Actual Amounts Spent	2022 Approved Expense Budget	% Change from 2021 Actual to 2022 Budget	2022 Dollars Budgeted per Unit per Month
4110	Administrative Salaries	\$153,726.00	\$142,472.00	\$152,156.00	6.8%	\$119.62
4120	Compensated Absences	\$0.00	\$3,820.00	\$0.00	-100%	\$0.00
4130	Legal	\$7,500.00	\$1,865.00	\$7,500.00	302.1%	\$5.90
4140	Members Compensation	\$0.00	\$0.00	\$0.00	0%	\$0.00
4150	Travel & Related Expenses	\$605.00	\$129.00	\$613.00	375.2%	\$0.48
4170	Accounting Services	\$6,260.00	\$5,700.00	\$6,260.00	9.8%	\$4.92
4171	Audit Costs	\$5,000.00	\$787.00	\$5,000.00	535.3%	\$3.93
4180	Penalties & Interest	\$0.00	\$0.00	\$0.00	0%	\$0.00
4190	Administrative Other	\$28,530.00	\$29,090.00	\$28,671.00	-1.4%	\$22.54
4191	Tenant Organization	\$0.00	\$0.00	\$0.00	0%	\$0.00
4100	TOTAL ADMINISTRATION	\$201,621.00	\$183,863.00	\$200,200.00	8.9%	\$157.39
4310	Water	\$110,000.00	\$109,163.00	\$110,000.00	0.8%	\$86.48
4320	Electricity	\$218,000.00	\$242,513.00	\$218,000.00	-10.1%	\$171.38
4330	Gas	\$18,000.00	\$13,323.00	\$18,000.00	35.1%	\$14.15
4340	Fuel	\$0.00	\$0.00	\$0.00	0%	\$0.00
4360	Net Meter Utility Debit/Energy Conservation	\$0.00	\$90,278.00	\$80,000.00	-11.4%	\$62.89
4390	Other	\$0.00	\$0.00	\$0.00	0%	\$0.00
4391	Solar Operator Costs	\$140,000.00	\$131,901.00	\$150,000.00	13.7%	\$117.92
4392	Net Meter Utility Credit (Negative Amount)	\$-140,000.00	\$-222,179.00	\$-230,000.00	3.5%	\$-180.82
4300	TOTAL UTILITIES	\$346,000.00	\$364,999.00	\$346,000.00	-5.2%	\$272.01

Hyman Towers						
<b>EXPENSES</b>						
Account Number	Account Class	2021 Approved Expense Budget	2021 Actual Amounts Spent	2022 Approved Expense Budget	% Change from 2021 Actual to 2022 Spent	2022 Dollars Budgeted per Unit per Month
4410	Maintenance Labor	\$338,014.00	\$302,228.00	\$329,226.00	8.9%	\$258.83
4420	Materials & Supplies	\$36,000.00	\$32,245.00	\$36,000.00	11.6%	\$28.30
4430	Contract Costs	\$52,000.00	\$57,657.00	\$52,000.00	-9.8%	\$40.88
4400	TOTAL MAINTENANCE	\$426,014.00	\$392,130.00	\$417,226.00	6.4%	\$328.01
4510	Insurance	\$43,137.00	\$45,395.00	\$41,950.00	-7.6%	\$32.98
4520	Payment in Lieu of Taxes	\$8,000.00	\$8,000.00	\$8,000.00	0%	\$6.29
4540	Employee Benefits	\$277,852.00	\$255,370.00	\$283,807.00	11.1%	\$223.12
4541	Employee Benefits - GASB 45	\$0.00	\$54,650.00	\$0.00	-100%	\$0.00
4542	Pension Expense - GASB 68	\$0.00	\$0.00	\$0.00	0%	\$0.00
4570	Collection Loss	\$1,000.00	\$4,753.00	\$1,000.00	-79%	\$0.79
4571	Collection Loss - Fraud/Retroactive	\$0.00	\$0.00	\$0.00	0%	\$0.00
4580	Interest Expense	\$0.00	\$0.00	\$0.00	0%	\$0.00
4590	Other General Expense	\$0.00	\$0.00	\$0.00	0%	\$0.00
4500	TOTAL GENERAL EXPENSES	\$329,989.00	\$368,168.00	\$334,757.00	-9.1%	\$263.17
4610	Extraordinary Maintenance	\$78,000.00	\$20,721.00	\$18,000.00	-13.1%	\$14.15
4611	Equipment Purchases - Non Capitalized	\$18,000.00	\$728.00	\$7,000.00	861.5%	\$5.50
4612	Restricted Reserve Expenditures	\$0.00	\$0.00	\$0.00	0%	\$0.00
4715	Housing Assistance Payments	\$0.00	\$0.00	\$0.00	0%	\$0.00
4801	Depreciation Expense	\$0.00	\$128,928.00	\$0.00	-100%	\$0.00
4600	TOTAL OTHER EXPENSES	\$96,000.00	\$150,377.00	\$25,000.00	-83.4%	\$19.65
4000	TOTAL EXPENSES	\$1,399,624.00	\$1,459,537.00	\$1,323,183.00	-9.3%	\$1,040.24

**Annual Plan 2023  
Annual Operating Budget**

Hyman Towers						
<b>SUMMARY</b>						
Account Number	Account Class	2021 Approved Budget	2021 Actual Amounts	2022 Approved Budget	% Change from 2021 Actual to 2022 Budget	2022 Dollars Budgeted per Unit per Month
3000	TOTAL REVENUE	\$1,597,028.00	\$1,697,413.00	\$1,673,876.00	-1.4%	\$1,315.94
4000	TOTAL EXPENSES	\$1,399,624.00	\$1,459,537.00	\$1,323,183.00	-9.3%	\$1,040.24
2700	NET INCOME (DEFICIT)	\$197,404.00	\$237,876.00	\$350,693.00	47.4%	\$275.70
7520	Replacements of Equip. - Capitalized	\$0.00	\$0.00	\$5,000.00	100%	\$3.93
7540	Betterments & Additions - Capitalized	\$310,000.00	\$0.00	\$810,000.00	100%	\$636.79
7500	TOTAL NONOPERATING EXPENDITURES	\$310,000.00	\$0.00	\$815,000.00	100%	\$640.72
7600	EXCESS REVENUE OVER EXPENSES	\$-112,596.00	\$237,876.00	\$-464,307.00	-295.2%	\$-365.02

## Explanation of Budget Accounts

The following explains how each of the line items is to be prepared.

3110: Shelter Rent: The shelter rent projection should be based on the current rent roll plus anticipated changes expected from annual rent re-determinations or as a result of regulatory amendments.

3111: Shelter Rent – Tenants - Fraud/Retroactive: This account should be used for the reporting of total rent receipts from residents due to unreported income. These are often called fraud or retroactive balances. In cases where deficit LHAs discover, pursue cases, and have entered into a written fraud/retroactive re-payment agreement **with a present or former tenant who did not report income**, the LHA will be allowed to retain two-thirds of the funds recovered. One third of the total dollar amount recovered should be included in the LHA's quarterly or year-end Operating Statement as Shelter Rent, account #3111, and two-thirds of this total dollar amount should be included in Other Revenue-Retained, account #3691.

3115: Shelter Rent - Section 8: This account applies only to those developments receiving support through the federal government's Housing and Urban Development (HUD) Section 8 New Construction and/or Substantial Rehab Programs.

3190: Non-Dwelling Rental: This account should be credited with the rents, other than tenants rents reported in line 3110 and 3115, including charges for utilities and equipment, billed to lessees of non-dwelling facilities as well as apartments rented for non-dwelling purposes, such as social service programs.

3400: Administrative Fee- MRVP/AHVP: This account should be credited with Administrative Fees to be received for the MRVP/AHVP Program. The MRVP/AHVP administrative fee is \$50.00 per unit per month, as of July 1, 2020.

3610: Interest on Investments – Unrestricted: This account should be credited with interest earned on unrestricted administrative fund investments.

3611: Interest on Investments – Restricted: This account should be credited with interest earned on restricted administrative fund investments. For example, an LHA may receive a grant whose use is restricted to a specific purpose, and the interest income earned on that grant may also be restricted to the same purpose.

3690: Other Operating Revenues: This account should be credited with income from the operation of the project that cannot be otherwise classified. Income credits to this account include, but are not limited to, penalties for delinquent payments, rental of equipment, charges for use of community space, charges to other projects or programs for the use of central office management and maintenance space, commissions and profits from vending machines, including washing machines, and certain charges to residents for additional services, materials, and/or repairs of damage caused by neglect or abuse in accordance with the Department's regulations on lease provisions..

3691: Other Revenue – Retained: This account should be credited with certain miscellaneous revenue to be retained by the LHA, and which is not used to reduce the amount of operating subsidy the LHA is due. The most common examples for this account is receipts for the rental of roof antennas to cell phone providers and net meter credits earned on electricity bills from Net Meter Power Purchase Agreements (PPA's). Generally, surplus LHAs may retain 100% of these savings and deficit LHAs may retain 25% of the savings, with

the 75% balance used to offset its need for operating subsidy. However, for the period 7/1/16 through 6/30/20, all deficit LHAs may keep 100% of the net meter credit savings, while they can keep 50% effective 7/1/2020.

3692: Other Revenue - Operating Reserves: This account should be credited with funds that LHAs plan to utilize from their operating reserve accounts in excess of the Allowable Non-Utility Expense Level (ANUEL). To be approvable, LHA must maintain the DHCD prescribed operating reserve minimum level after deducting the amount budgeted. The only exception to this is when the expenses are for health and safety issues.

3693: Other Revenue – Net Meter: This account should normally be credited with 75% of the total net meter credit savings realized by a deficit LHA, while surplus LHAs with net meter credit savings would enter \$0 here. Savings are calculated as the value of the net meter credits appearing on the LHA's electric bills (or, in some cases, paid in cash to the LHA by their utility company), minus the cost of the payments made to the solar power developer under their Power Purchase Agreement (PPA). Deficit LHAs normally may retain 25% of the savings. That amount should be included as Other Revenue – Retained on line #3691. However, please note that for the period 7/1/16 through 6/30/20 all LHAs may retain 100% of their total net meter credit savings, and should report those savings as Other Revenue – Retained on line #3691. LHAs can keep 50% of savings effective 7/1/2020.

3801: Operating Subsidy – DHCD (400-1): This account represents all state-funded operating subsidy to be received and or to be earned for the fiscal year. At the end of each fiscal year, this account will be adjusted in the operating statement to equal the actual subsidy earned by the LHA.

3802: Operating Subsidy – MRVP/AHVP Landlords:

The credit balance in this account represents the anticipated total receipts from DHCD during the fiscal year for housing assistance payments to landlords. At the end of each fiscal year this account will be adjusted to equal the actual subsidy earned.

3920: Gain/Loss from Sale or Disposition of Property (Capitalized or Non-Capitalized): The debit or credit balance of this account represents the following items: a) Cash proceeds from the sale of property that was either: 1) non-capitalized; or 2) capitalized and has been fully depreciated, and b) Realized gain or loss from the sale or disposition of capitalized property that has not been fully depreciated.

4110: Administrative Salaries: This account should be charged with the gross salaries of LHA personnel engaged in administrative duties and in the supervision, planning, and direction of maintenance activities and operating services during the operations period. It should include the salaries of the executive director, assistant executive director, accountants, accounting clerks, clerks, secretaries, project managers, management aides, purchasing agents, engineers, draftsmen, maintenance superintendents, and all other employees assigned to administrative duties.

4120: Compensated Absences: The debit balance in this account represents the actual cost incurred during the fiscal year for vacation, paid holidays, vested sick leave and earned compensatory time. This account includes both the direct compensated absences cost and associated employer payroll expenses (employment taxes, pension cost, etc.).

4130: Legal Expense: This account should be charged with retainers and fees paid to attorneys for legal services relating to the operation of the projects.

4140: Compensation to Authority Members: A local authority may compensate its members for performance of their duties and such other services as they may render to the authority in connection with its Chapter 200 development(s). Compensation for any other program is not authorized. Because of this, LHAs must base such compensation only on the actual rent receipts for these developments plus a prorated share of other operating receipts of funds on a per unit basis. The precise amount that members may be compensated is defined by statute to a maximum of \$40 per member per day, and \$50 for the chairperson per day. The total of all compensation to all board members is not to exceed two percent (2%) of actual gross income of Chapter 200 developments in any given year, consistent with the approved budget amount. In no case shall the payment of compensation exceed \$12,500 annually for the chairperson, or \$10,000 for any member other than the chairperson. Please note the statute requires the member to perform housing authority business in order to receive compensation.

4150: Travel and Related Expense: Legitimate travel expenses incurred by board members and staff in the discharge of their duties for any **state-aided program** are reimbursable from this account, as consistent with Department policy.

4170: Contractual Accounting Services: Fees for accounting services that are provided routinely and are contracted for on an annual basis. Only accounting services performed on a contractual basis (fee accountant) should be included in this item. Full or part-time LHA accounting staff that provides routine accounting services should be included in Account 4110, Administrative Salaries.

4171: Audit Costs: This account includes the state program's prorated share of audit fees paid to an Independent Public Accountant (IPA). The procurement of an IPA is necessary to satisfy the Federal Government's audit requirements. Costs for these services should be shared with all state and federal programs of LHA. **Audit costs are to be absorbed within the ANUEL.** The new Agreed Upon procedures (AUP) audit costs for state-assisted public housing programs should also be included in this account.

4180: Penalties and Interest: Any expenses incurred from penalties, fees, and interest paid on delinquent accounts shall be included in this line item.

4190: Administrative Other: This account is provided for recording the cost of administrative items for which no specific amount is prescribed in this 4100 group of accounts. It includes, but is not limited to, the cost of such items as: reports and accounting forms; stationery and other office supplies; postage; telephone services; messenger service; rental of office space; advertising for bids; publications; membership dues; collection agency & court costs, training costs; management fees, and fiscal agent fees.

4191: Tenant Organization: LTO Funding by the LHA. Upon request the LHA shall fund all LTOs in a city or town at the annual rate of \$6.00 per state-aided public housing unit occupied or available for occupancy by residents represented by such LTO(s) or an annual total of \$500.00 prorated among all such LTO(s), whichever is more. For more information on the creation and funding of LTOs see 760 CMR 6.09.

Authorities which operate computer learning centers, which are funded by the state consolidated budget or by other sources (which are typically recorded in line #3691 as "Other Revenue Retained", should budget the cost of the centers on this line.

4310: Water: This account should be charged with the cost of water and sewer charges purchased for all purposes.

4320: Electricity: This account should be charged with the total cost of electricity purchased for all purposes. Many LHAs have entered into Net Meter Credit Power Purchase Agreements (PPA's). In these deals, an LHA executes a contract with a solar power developer who constructs and owns an off- site solar electricity-generating site. In exchange for contracting to purchase a percentage of the solar power produced, the LHA receives a credit on its utility electric bill for each KWH purchased or in some cases receives a direct cash payment from their utility company. Please ensure that the amount charged to this account is the total cost of electricity BEFORE any reductions due to the receipt of net meter credits.

4330: Gas: This account should be charged with the cost of gas (natural, artificial, or liquefied) purchased for all purposes.

4340: Fuel: This account should be charged with the cost of coal, fuel oil, steam purchased, and any other fuels (except electricity and gas) used in connection with Local Housing Authority operation of plants for the heating of space or water supplied to tenants as a part of rent.

4360: Net Meter Utility Debit/Energy Conservation: This account is to be charged with costs incurred for energy conservation measures.

4390: Other Utilities: This account should be charged with the cost of utilities which are not provided for in accounts 4310 through 4360. In addition, for all quarterly or year-end operating statements 9/30/20 or later, and all budgets 6/30/21 or later, please use this line to record the total net meter credits earned as reported in Line 4392, MINUS the Solar Operator Costs reported in Line 4391, with the result expressed as a positive number. For example, if you reported -\$20,000 in Net Meter Utility Credits in Line 4392 and \$15,000 in Solar Operator Costs in Line 4391, you would subtract the \$15,000 reported on Line 4391 from the -\$20,000 reported on Line 4392, and post the remainder of \$5,000 on Line 4360, as a positive number. This number essentially represents the "net" savings the LHA earned from its net meter credit contract.

4391: Solar Operator Costs: Many LHAs have entered into Net Meter Credit Power Purchase Agreements (PPA's). In these deals, an LHA executes a contract with a solar power developer who constructs and owns an off-site solar electricity-generating site. The LHA makes regular (usually monthly) payments to the developer for its contracted share of the solar electricity produced by the site. Those payments should be entered in this account.

4392: Net Meter Utility Credit (Negative Amount): As noted in account #4391 above, many LHAs have executed Net Meter Credit Power Purchase Agreements (PPA's). In exchange for contracting to purchase a percentage of the solar power produced, the LHA receives a credit on its utility electric bill for each KWH purchased from the developer, which reduces the balance on its electric bill, or, in some cases, the credits are paid in cash to the LHA by the utility company. The total gross amount of the net meter credits that appear on the LHA's utility bills should be carried in this account and entered as a negative number. In cases where credits are paid in cash to the Host LHA, the net balance after paying out the amounts due the participating housing authorities, should also be carried in this account and entered as a negative number.

4410: Maintenance Labor: This account should be charged with the gross salaries and wages, or applicable portions thereof, for LHA personnel engaged in the routine maintenance of the project.



4420: Materials & Supplies: This account should be charged with the cost of materials, supplies, and expendable equipment used in connection with the routine maintenance of the project. This includes the operation and maintenance of automotive and other movable equipment, and the cost of materials, supplies, and expendable equipment used in connection with operating services such as janitorial services, elevator services, extermination of rodents and household pests, and rubbish and garbage collection.

4430: Contract Costs: This account should be charged with contract costs (i.e. the cost of services for labor, materials, and supplies furnished by a firm or by persons other than Local Authority employees) incurred in connection with the routine maintenance of the project, including the maintenance of automotive and other movable equipment. This account should also be charged with contract costs incurred in connection with such operating services as janitorial services, fire alarm and elevator service, extermination of rodents and household pests, rubbish and garbage collection, snow removal, landscape services, oil burner maintenance, etc.

4510: Insurance: Includes the total amount of premiums charged all forms of insurance. Fire and extended coverage, crime, and general liability are handled by DHCD on a statewide basis. All other necessary insurance policies include: Workers' Compensation, boiler, vehicle liability and owner, etc.

4520: Payments in Lieu of Taxes:

This account should be charged with all payments in lieu of taxes accruing to a municipality or other local taxing body.

4540: Employee Benefits: This account should be charged with local housing authority contributions to employee benefit plans such as pension, retirement, and health and welfare plans. It should also be charged with administrative expenses paid to the State or other public agencies in connection with a retirement plan, if such payment is required by State Law, and with Trustee's fees paid in connection with a private retirement plan, if such payment is required under the retirement plan contract.

Employee benefits are based upon a given percentage of the total payroll; therefore, the total amount approved in this account will be based on the approved budgeted salaries representing the state's fair share.

4541: Employee Benefits - GASB 45: This line covers "Other Post-Employment Benefits" (OPEB). Of the total benefits offered by employers to attract and retain qualified employees, some benefits, including salaries and active-employee healthcare are taken while the employees are in active service, whereas other benefits, including post-employment healthcare and other OPEB are taken after the employees' services have ended. Nevertheless, both types of benefits constitute compensation for employee services. In accordance with required accounting practices, this amount is not projected in the budget (and is therefore blank) but the estimated future costs of this item is carried in the operating statement.

4542: Pension Expense – GASB 68: The primary objective of GASB 68 Statement is to improve accounting and financial reporting for pension costs. It also improves information provided by state and local governmental employers about financial support for pensions that is provided by other entities. As with account 4541 above, in accordance with required accounting practices, this amount is not projected in the budget (and is therefore blank) but the estimated future costs of this item is carried in the operating statement.

4570: Collection Loss: The balance in this account represents the estimated expense to cover unexpected losses for tenant rents. Note: Do not include losses from fraud/retroactive balances here. Report them in Account 4571 – Collection Loss – Fraud/Retroactive.

4571: Collection Loss – Fraud/Retroactive: The balance in this account represents the estimated expense to cover unexpected losses for tenant rents due to unreported income, i.e. fraud/retroactive balances.

4580: Interest Expense: The debit balance in this account represents the interest expense paid and accrued on loans and notes payable. This debt can be from operating borrowings or capital borrowings.

4590: Other General Expense: This account represents the cost of all items of general expenses for which no specific account is prescribed in the general group of accounts.

4610: Extraordinary Maintenance – Non-Capitalized: This account should be debited with all *costs* (labor, materials and supplies, expendable equipment (such as many tools or routine repair parts), and contract work) of repairs, replacements (but not replacements of non-expendable equipment), and rehabilitation of such a substantial nature that the work is clearly not a part of the routine maintenance and operating program. The items charged to this account should not increase the useful life or value of the asset being repaired. These items are not capitalized and are not added as an increase to fixed assets at the time of completion. Nor are these items depreciated. An example of this would be scheduled repainting of apartments.

4611: Equipment Purchases – Non-Capitalized: This account should be debited with the costs of equipment that does not meet the LHA's criteria for capitalization. Because these items are being expended when paid, they should not be categorized as a fixed asset and therefore will not be depreciated. These items include stoves, refrigerators, small tools, most computers and software, etc.

The budget is a planning tool and as our portfolio ages it is essential that LHAs evaluate their properties annually and plan for extraordinary maintenance. To that end DHCD very strongly recommends that for all 400-1 operating budgets, depending on the age of the portfolio and condition, LHAs spend between \$100 and \$500 a year per unit in Extraordinary Maintenance, Equipment Purchases, Replacement of Equipment, and Betterments & Additions to ensure that the aging public housing stock is preserved.

4715: Housing Assistance Payments: This account should be debited with all housing assistance payments paid to landlords for the MRVP program on a monthly basis.

4801: Depreciation Expense: This account should be debited with annual fixed asset depreciation expenses as determined by the LHA's capitalization policy.

7520: Replacement of Equipment – Capitalized: This account should be debited with the acquisition cost (only the net cash amount) of non-expendable equipment purchased as a replacement of equipment of substantially the same kind. These items, such as vehicles, computers, or furniture, meet the LHA's criteria for capitalization and will also be added to fixed assets and therefore depreciated over the useful life.

7540: Betterments & Additions – Capitalized: This account should be debited with the acquisition cost (only the net cash amount) of non-expendable equipment and major non-routine repairs that are classified as a betterment or addition. These items meet the LHA's criteria for capitalization and will also be added to fixed

assets and therefore depreciated over the useful life of the asset. Examples are: major roof replacement, structural repairs such as siding, or major paving work.

In accordance with GAAP accounting, inventory purchases (Replacement of Equipment and Betterments & Additions) are distinguished between capitalized and non-capitalized items. Any inventory or equipment purchase greater than \$5,000 is required by DHCD to be capitalized, inventoried and depreciated. Any inventory or equipment purchase costing \$1,000 to \$4,999 should be inventoried by LHA staff for control purposes only but is not subject to capitalization or depreciation, it is, however, required to be expensed when the items are paid for. An LHA's inventory listing should include both capitalized and non-capitalized items of \$1,000 and more, as well as all refrigerators and stoves of any value. All items that appear on the inventory listing should be tagged with a unique identification number, and all refrigerators and stoves (regardless of value) should be tagged. LHAs may adopt a capitalization policy that capitalizes inventory purchases at a lesser amount than the \$5,000 requirement (i.e. \$1,000 - \$4,999); however, no capitalization policy can have an amount higher than \$5,000. Any inventory or equipment purchases costing \$0 to \$999 are to be expensed when paid for.

**PMR Narrative Responses****Narrative Responses to the Performance Management Review (PMR) Findings**

DHCD has cancelled publication of Performance Management Reviews for fiscal years ending 3/31/2020 through 3/31/2021 due to disruptions of normal operations in response to the COVID-19 virus. Therefore, there are no ratings included in this report.

Explanation of PMR Criteria Ratings

CRITERION	DESCRIPTION
<b>Management</b>	
Occupancy Rate	<p>The rating is calculated using the following formula: (Total Number of Occupied units on Monthly Report divided by (Total Number of Units Minus Units that Received a Waiver Minus Number of Units Vacant less than 30 days on Monthly Report)</p> <ul style="list-style-type: none"> <li>• “No Findings” : Occupancy Rate is at or above 98%</li> <li>• Operational Guidance: Occupancy rate is at 95% up to 97.9%</li> <li>• Corrective Action: Adjusted occupancy rate is less than 95%</li> </ul>
Tenant Accounts Receivable (TAR)	<p>This criterion calculates the percentage of uncollected rent and related charges owed by starting with the amount reported by the LHA, as uncollected balances for the TAR (Account 1122 from the Balance Sheet) minus Normal Repayment Agreements* divided by Shelter (Tenant) Rent (account 3110 from the Operating Statement)</p> <ul style="list-style-type: none"> <li>• “No Findings” : At or below 2%</li> <li>• “Operational Guidance” : More than 2% , but less than 5%</li> <li>• “Corrective Action” : 5% or more</li> </ul>
Certifications and Reporting Submissions	<p>Housing authorities are required to submit 4 quarterly vacancy certifications by end of the month following quarter end; 4 quarterly operating statements and 4 Tenant Accounts Receivable (TAR) reports within 60 days of quarter end.</p> <ul style="list-style-type: none"> <li>• “No Findings” : At least 11 of the required 12 reports were submitted and at least 9 were submitted on time.</li> <li>• “Operational Guidance” : Less than 11 of the required 12 reports were submitted and/or less than 9 were submitted on time.</li> </ul>
Board Member Training	<p>Percentage of board members that have completed the mandatory online board member training.</p> <ul style="list-style-type: none"> <li>• “No Findings” : 80% or more completed training</li> <li>• “Operational Guidance” : 60-79.9% completed training</li> <li>• “Corrective Action” : &lt;60 % completed training</li> </ul>
Annual Plan (AP) Submitted	<p>Housing authorities are required to submit an annual plan every year.</p> <ul style="list-style-type: none"> <li>• “No Findings” =Submitted on time</li> <li>• “Operational Guidance” =Up to 45 days late</li> <li>• “Corrective Action” =More than 45 days late</li> </ul>

CRITERION	DESCRIPTION
<b>Financial</b>	
Adjusted Net Income	<p>The Adjusted Net Income criterion calculation starts with an LHA's Net Income and subtracts Depreciation, GASB 45 (Retirement Costs), GASB 68 (Retirement Costs), Extraordinary Maintenance (maintenance expense outside of routine/ordinary expenses), and Equipment Purchases – Non Capitalized. This Adjusted Net Income amount is then divided by the Total Expenses of the LHA. If this Adjusted Net Income amount is positive, it means underspending and if it is negative it means overspending.</p> <p>Underspending Rating:</p> <ul style="list-style-type: none"> <li>• “No Findings” : 0 to 9.9%</li> <li>• “Operational Guidance”: 10 to 14.9%</li> <li>• “Corrective Action”: 15% or higher</li> </ul> <p>Overspending Rating:</p> <ul style="list-style-type: none"> <li>• “No Findings” : 0 to -4.9%</li> <li>• “Operational Guidance”: -5% to -9.9%</li> <li>• “Corrective Action”: -10% or below</li> </ul>
Operating Reserves	<p>Current Operating Reserve as a percentage of total maximum reserve level. Appropriate reserve level is buffer against any unforeseen events or expenditures.</p> <ul style="list-style-type: none"> <li>• “No Findings” :35%+ of maximum operating reserve</li> <li>• “Operational Guidance”: 20% to 34.9% of maximum operating reserve</li> <li>• “Corrective Action”: &lt;20% of maximum operating reserve</li> </ul>
<b>Capital Planning</b>	
Capital Spending	<p>Under the Formula Funding Program (FF), authorities receive undesignated funds to spend on projects in their Capital Improvement Plan. They are rated on the percentage of available funds they have spent over a three-year period</p> <ul style="list-style-type: none"> <li>• “No Findings” = at least 80%</li> <li>• “Operational Guidance” = At least 50%</li> <li>• “Corrective Action” = Less than 50%</li> </ul>

CRITERION	DESCRIPTION
<b>Health &amp; Safety</b>	
Health & safety violations	DHCD has observed conditions at the LHA’s developments and reported health and safety violations. The LHA has certified the number of corrected violations in each category.
<b>Facility Management - Inspections</b>	
Unit Inspections Conducted	<p>Housing authorities are required to conduct inspections of all their occupied units at least once a year</p> <ul style="list-style-type: none"> <li>• “No Findings”: 100 % of sampled units had inspections conducted once during the year</li> <li>• “Corrective Action”: Fewer than 100% of sample units were inspected during the year</li> </ul>
Inspections Report	<p>Housing authorities are required to note all of the deficiencies found during inspections</p> <ul style="list-style-type: none"> <li>• “No Findings”: 100 % of deficiencies are noted on inspection report</li> <li>• “Corrective Action”: Fewer than 100% of deficiencies are noted in inspection report</li> </ul>
Inspection Work Order	<p>Housing authorities are required to generate work orders for all deficiencies noted during inspections</p> <ul style="list-style-type: none"> <li>• “No Findings”: 100 % of deficiencies noted on inspection reports generated work orders</li> <li>• “Corrective Action”: Fewer than 100% of deficiencies noted on inspection reports generated work orders</li> </ul>
Work Order System	<p>Work order system identifies, tracks, and can produce reports for inspection work orders.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Inspection work orders are identified, tracked, and reportable</li> <li>• “Operational Guidance”: Inspection work orders are not identified, and/or tracked, and/or reportable</li> </ul>
Inspections Work Orders Completed	<p>Inspection work orders were completed within 30 calendar days from the date of inspection, OR if cannot be completed within 30 calendar days, are added to the Deferred Maintenance Plan or included in the Capital Improvement Plan in the case of qualifying capital repairs (unless health/safety issue).</p> <ul style="list-style-type: none"> <li>• “No Findings”: Sampled inspection work orders were completed within 30 days of inspection date or added to deferred maintenance plan and/or CIP</li> <li>• “Operational Guidance”: Sampled inspection work orders were completed within 31 to 45 calendar days of inspection date and not added to deferred maintenance plan or CIP</li> <li>• “Corrective Action”: Sampled inspection work orders were completed in over 45 calendar days of inspection date</li> </ul>

CRITERION	DESCRIPTION
<b>Facility Management – Work Order System</b>	
Emergency Work Orders Properly Defined	<p>Emergency work orders should be defined per <u>Property Management Guide</u>, identified, tracked, reportable.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Emergency work orders defined per <u>Property Management Guide</u>, identified, tracked, reportable</li> <li>• “Operational Guidance”: Emergency work orders are not defined per <u>Property Management Guide</u>, and/or identified, and/or tracked, and/or reportable</li> </ul>
Emergency Work Orders Initiation	<p>Emergency work orders should be initiated within 24 to 48 hours.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Emergency work orders initiated within 24-48 hours</li> <li>• “Corrective Action”: Emergency work orders not initiated within 24-48 hours</li> </ul>
Vacancy Work Orders	<p>Vacancy work orders should be identified, tracked and reportable.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Vacancy work orders identified, tracked AND reportable</li> <li>• “Corrective Action”: Vacancy work orders are not identified, and/or tracked, and/or reportable</li> </ul>
Vacancy Work Orders Completed	<p>Vacancy work orders should be completed within 30 calendar days or if not completed within that timeframe, LHA has a waiver.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Vacancy work orders are completed within 30 calendar days or if not completed within timeframe, LHA has a waiver</li> <li>• “Operational Guidance”: Vacancy work orders completed within 31-60 calendar days</li> <li>• “Corrective Action”: Vacancy work orders completed 61+ calendar days</li> </ul>
Preventive Maintenance Program	<p>Housing authorities are required to maintain a comprehensive preventive maintenance program in which preventive work orders are identified, tracked, and reportable.</p> <ul style="list-style-type: none"> <li>• “No Findings”: A comprehensive preventive maintenance program exists and work orders are identified, tracked and reportable</li> <li>• “Corrective Action”: A comprehensive preventive maintenance program does not exist OR work orders are not identified and/or tracked and/or reportable</li> </ul>
Routine Work Orders	<p>Routine work orders should be identified, tracked, reportable and completed regularly.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Routine work orders identified, tracked, reportable and completed regularly</li> <li>• “Operational Guidance”: Routine work orders are not identified, and/or tracked and/or reportable, and/or completed regularly</li> </ul>



<b>CRITERION</b>	<b>DESCRIPTION</b>
Requested Work Orders	<p>Requested work orders should be identified, tracked and reportable.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Requested work orders identified, tracked, reportable and completed regularly</li> <li>• “Operational Guidance”: Requested work orders are not identified and/or tracked and/or reportable, and or completed regularly</li> </ul>
Requested Work Orders Completion	<p>Requested work orders should be completed in 14 calendar days from the date of tenant request or if not completed within that timeframe (and not a health or safety issue), the task should be added and completed in a timely manner as a part of the Deferred Maintenance Plan and/or CIP.</p> <ul style="list-style-type: none"> <li>• “No Findings”: Requested work orders are completed within 14 calendar days of tenant request OR added to deferred maintenance plan and/or CIP</li> <li>• “Operational Guidance”: Requested work orders are completed within 15-30 calendar days from the date of tenant request</li> <li>• “Corrective Action”: Requested work orders are completed in over 30 calendar days from the date of tenant request OR not completed</li> </ul>
Emergency Response System	<p>Housing authorities should have a 24 Hour Emergency Response System and distribute Emergency Definition to Residents, Staff, and Answering Service (if applicable).</p> <ul style="list-style-type: none"> <li>• “No Findings”: A 24-hour system for responding to emergencies exists AND definitions of emergencies have been distributed to staff, residents and answering service, if applicable</li> <li>• “Operational Guidance”: System exists, but no definition has been distributed</li> <li>• “Corrective Action”: Neither a system nor distributed definitions exist</li> </ul>

## Policies

The following policies are currently in force at the Revere Housing Authority:

<b>Policy</b>	<b>Last Ratified by Board Vote</b>	<b>Notes</b>
*Rent Collection Policy	10/18/2008	
*Personnel Policy	03/23/2017	
*Capitalization Policy	06/01/2007	
*Procurement Policy	01/11/2017	
*Grievance Policy	05/16/2018	
Affirmative Action Policy	03/15/2017	
Anti-Discriminatory Harassment Policy	03/15/2017	
Other – Define in the ‘Notes’ column	05/15/2019	Community Room Policy
Criminal Offender Records Information (CORI) Policy	01/04/2013	
Equal Employment Opportunity Policy and Affirmative Action Plan	03/15/2017	
Fair Housing Marketing Plan	06/01/2015	
Investment Policy	04/01/1985	
Language Access Plan	12/02/2015	
Parking	09/18/2018	
Pet Policy	03/11/2009	
Reasonable Accommodations Policy	12/09/2016	
Records Conservation and Disposal Policy	12/09/2016	

<b>Policy</b>	<b>Last Ratified by Board Vote</b>	<b>Notes</b>
Sexual Harassment Policy	03/15/2017	
Smoking Policy	08/01/2013	
Travel Policy	10/26/2006	
Other – Define in the ‘Notes’ column	03/28/2018	Security Camera Policy
Other – Define in the ‘Notes’ column	06/14/2017	VA.W.A.
Other – Define in the ‘Notes’ column	04/20/2018	Crime Report Dissemination
Other – Define in the ‘Notes’ column	08/15/2014	Fraud, Waste, and Abuse Policy
Other – Define in the ‘Notes’ column	03/15/2007	State Wage match Policy
Other – Define in the ‘Notes’ column	08/16/2018	Security Deposit Policy

\* Starred policies are required by DHCD. Policies without a “Latest Revision” date are not yet in force.

The list of policies has been provided by the LHA and has not been verified by DHCD.

## **Waivers**

AP-2023-Revere Housing Authority-00410 has no current waivers from the regulations of the Department of Housing and Community Development (DHCD).

## Glossary

**ADA:** Americans with Disabilities Act. Often used as shorthand for accessibility related issues or improvements.

**AHVP:** Alternative Housing Voucher Program

**Alternative Housing Voucher Program** provides rental vouchers to disabled applicants who are not elderly and who have been determined eligible for Chapter 667 (elderly and disabled) housing.

**Allowable Non-Utility Expense Level (ANUEL)** is the amount of non-utility expense allowed for each local housing authority based upon the type(s) of housing programs administered.

**ANUEL:** Allowable Non-Utility Expense Level

**AP:** Annual Plan

**Annual Plan:** A document prepared by each Local Housing Authority, incorporating the Capital Improvement Plan (CIP), Maintenance and Repair Plan, Budget, responses to the Performance Management Review, and other elements.

**Cap Share** is the amount of Formula Funding spending approved by DHCD for each year.

**Capital Funds:** Funds provided by DHCD to an LHA for the modernization and preservation of state-aided public housing, including Formula Funds and Special Capital Funds.

**Capital Needs Assessment**, similar to the CIP, often used for developments in the Section 8 New Construction/Substantial Rehabilitation program. Such developments are generally not eligible for state capital funds and therefore do not participate in the CIP process. However, to track their ongoing capital needs and plan for construction projects to address those needs, they often conduct a CNA to determine when building systems will wear out and need to be replaced, and what replacement will cost, so they can plan to ensure that the necessary funding will be available

**Capital Projects** are projects that add significant value to an asset or replace building systems or components. Project cost must be greater than \$1000.

**CIMS** is a web-based software system used for creating CIP's and Annual Plans. For the CIP, the CIMS program allows the LHA to prioritize, select and schedule projects, assign funding sources and direct project spending to specific fiscal years to create a CIP that is consistent with the LHA's FF award amount and FF cap shares, plus any additional funding resources the LHA has identified. The LHA submits its CIP and DHCD conducts its review of the LHA's CIP in CIMS. For the Annual Plan CIMS imports data from other DHCD systems and combines that with data entered by the LHA.

**CIP:** A Capital Improvement Plan (CIP) is a five (5) year plan which identifies capital projects, provides a planning scope, schedule and budget for each capital project and identifies options for financing and implementing the plan. The contents of a CIP are limited to available resources. An approved CIP is required in order to receive Formula Funds.

**CNA:** Capital Needs Assessment

**CPS** is DHCD's transparent Web-based capital planning system that catalogues the condition of every building and site in the statewide public housing portfolio, providing LHAs with detailed technical information to make strategic long-term capital investments. It includes a Facility Condition Index (FCI) for every development that compares the value of expired components of a development relative to its replacement cost.

**Deferred Maintenance** is maintenance, upgrades, or repairs that are deferred to a future budget cycle or postponed for some other reason. Sometimes it is referred to as extraordinary maintenance.

**Deficit housing authority:** a housing authority whose income (mainly from rent) does not cover all its normal operating costs in its approved operating budget, and which therefore operates at a deficit and requires operating subsidy from DHCD.

**DHCD:** Massachusetts Department of Housing & Community Development

**Extraordinary Maintenance:** see the description for budget line 4610 in the Explanation of Budget Accounts in the Budget Section of this Annual Plan.

**FF:** Formula Funding

**Formula Funding** is state bond funding allocated to each LHA according to the condition (needs) of its portfolio in comparison to the entire state-aided public housing portfolio.

**FYE:** Fiscal Year End

**HHA Administrative Fee** is the fee paid to an HHA from the RCAT Program budget.

**HHA:** Host Housing Authority for the RCAT program.

**Host Housing Authority (HHA).** An LHA selected by the Department to employ and oversee an RCAT.

**HUD:** U.S. Department of Housing and Urban Development

**LHA:** Local Housing Authority

**LTO:** Local Tenants Organization

**Management and Occupancy Report:** This is an annual HUD review process that is used to evaluate the performance of developments in various HUD housing programs, including the Section 8 New Construction/Substantial Rehabilitation program, which some LHAs operate. It is similar to the state PMR process in that it evaluates LHA performance on variety of financial, housing quality, and other standards

**Massachusetts Rental Voucher Program (MRVP)** is a state-funded program that provides rental subsidies to low-income families and individuals.

**MOR:** Management and Occupancy Report

**MRVP:** Massachusetts Rental V DHCD's annual review of each housing authority's performance. It pulls together data on the authority's occupancy rates, tenant accounts receivables, accounts payable, budget variance, operating reserve, capital improvement plan submission, capital spending, annual inspections and work order and maintenance systems to identify and address areas of strength and areas for development. Its goal is to allow DHCD and the LHA to

take a deep dive into the data, lift up best practices, and work together towards improving operations oucher Program.

**Performance Management Review (PMR):**

**PMR:** Performance Management Review

**RCAT:** Regional Capital Assistance Team

**Regional Capital Assistance Team:** One of three organizations employed at HHAs designated by the Department to carry out the RCAT Program.

**Sec.8 NC/SR (or S8NCSR):** Section 8 New Construction and Substantial Rehabilitation

**Section 8 New Construction and Substantial Rehabilitation (Sec.8 NC/SR):** This term refers to a federal HUD housing program operated at a small number of state public housing developments whose construction was funded by state grants, but whose ongoing operating costs are supported by project-based subsidies from HUD's federal Section 8 program, rather than from state public housing operating funds..

**Special Awards:** In addition to allocations to each LHA, DHCD has created limited set aside funds to provide for extreme emergency or code compliance needs which are beyond the capacity of an LHA's current FF balance.

**Surplus housing authority:** a housing authority whose income (mainly from rent) covers all its normal operating costs in its approved operating budget, and which therefore operates at a surplus and does not require operating subsidy from DHCD.

## **Attachments**

The following items have been uploaded as attachments to this Annual Plan.

Due to the COVID-19 emergency, on-site Performance Management Review (PMR) assessments by the Facilities Management Specialists were cancelled for the December fiscal year end housing authorities. Therefore, the Facility Management categories have been omitted from the PMR document.

- Public Comments and LHA Responses
- Cover sheet for AP Survey
- Tenant Satisfaction Survey 667 Program
- Tenant Satisfaction Survey 200 and 705 Program



Mr. Harris presented the plan. Most of the projects are almost completed. RHA is continuing with 200-1 roof/windows/siding. There have been smaller projects added to the plan: spalling concrete at 667-2; roof at 1513 Northshore Road; asbestos removal at 667-2 and 667-3 ; flood elevation at 667-4 (state is paying, but must be included in the plan); 667-3 water main work completed, but paving needs to be done in the spring.

The Chairman asked for proponents and opponents of the plan to please submit their name(s) and address.

**PROPOSERS:**

Patricia Duffy  
226 Pleasant Street  
Wakefield, Massachusetts

**OPPOSERS:**

None

Dean Harris  
25 Stark Avenue  
Revere, Massachusetts

**RESOLUTION #2-2022**

**January 5, 2022**

Commissioner George Anzuoni introduced the resolution as follows:

To approve the Annual and Five-Year Plan for 2022-2026 as presented.

Commissioner Richard Viscay made a motion to accept the resolution, which was seconded by Commissioner Fatou Drammeh,

**VOTED:** To approve the Annual and Five-Year Plan for 2022-2026 as presented.

ROLL CALL SHOWED THE FOLLOWING:

AYES: Drammeh - Viscay - Anzuoni - Perrone

NAYS: None

ABSENT: None

The Chairman declared the motion carried.

ATTEST

  
Patricia E. Duffy  
Interim Executive Director

## **Resident Surveys – Background**

Since 2016 DHCD has been working with the Center for Survey Research (CSR) at the University of Massachusetts Boston to survey residents in the state public housing units it oversees. The surveys are confidential, mailed directly to the residents and returned to the Center by mail (or, starting in 2019, completed on-line). CSR surveys residents of elderly/disabled units (also known as c. 667 developments) and family units (also known as c. 705 and c. 200 developments).

During each round, all individual residents are mailed surveys, with one exception: in the case of the twelve housing authorities with more than 225 c. 200 family units, a randomly selected group of 225 residents was surveyed at each housing authority. This group was determined to be large enough to generate statistically useful results. In both rounds, responses from c.200 and c.705 residents are always combined together.

### **Round One Surveys (2016 – 2018)**

In Round One of the surveys, CSR surveyed residents of elderly/disabled developments (c. 667) in three groups in the Fall of 2016, 2017 and 2018. CSR surveyed residents of family units (c. 705 and c. 200 developments) in the Spring of 2016. (Note: there are many more c. 667 units, so they were broken down into three groups).

#### *Notes re: Round One Surveys*

1. In previous publications of this survey data, if there were at least twenty responses from residents of an authority's c.667 units or from their c.200/705 units, then there is a separate report for that program.
2. However, to be consistent with the new Round Two methodology described below, we recalculated the Round One data using the new methodology. Since we no longer combine c.667 results with c.200/705 results, a number of LHAs no longer have a report for their c.200/705 units, given the small data set for those units.

### **Round Two Surveys (2019 – 2022)**

Round Two of the surveys began in 2019. CSR surveyed about one-third of the elderly/disabled residents in Fall 2019 and all of the family residents in Fall 2020. We expect the remaining elderly/disabled residents to be surveyed in Fall 2021 and Fall 2022.

#### *Notes re: Round Two Surveys*

1. We refined our reporting methodology and will issue survey results for any program (c. 667 or c. 200/705) meeting these requirements:
  - 8-19 completed surveys received, if the response rate is at least 40%
  - 20-29 completed surveys received, if the response rate is at least 20%
  - 30+ completed surveys received, if the response rate is at least 15%
2. Responses from the family units will not be combined with responses from elderly/disabled units as they were in Round One. Since the variance between the results of the elderly/disabled and family programs was sometimes significant, combining the two was determined to yield less accurate results.

# REVERE HOUSING AUTHORITY

## Chapter 667 Housing Summary 2016 - 2018

DHCD is working with the Center for Survey Research at the University of Massachusetts Boston to survey residents in the housing units it oversees.

### Fall 2016:

- Surveys were sent to 9624 housing units (Chapter 667). 5511 surveys were filled out and returned.

### Fall 2017:

- Surveys were sent to 6024 housing units (Chapter 667). 3391 surveys were filled out and returned.

### Fall 2018:

- Surveys were sent to 13,304 housing units (Chapter 667). 6717 surveys were filled out and returned.
- In the **Revere Housing Authority**, surveys were sent to a total of **351** housing units (Chapter 667); **138** surveys were completed.

This report provides some information about how the residents from the **Revere Housing Authority** who answered the survey responded. It compares their answers to those from residents in the entire state and to those from large LHAs in Greater Boston. These large LHAs in the Greater Boston area include: Arlington, Boston, Chelsea, Everett, Quincy, Revere, Somerville, Waltham, and Watertown.

## Communication

Residents in Ch. 667 housing were asked about how they interacted with the Revere Housing Authority in the last 12 months. The table below shows what percentage of residents said they did each of the following:

	Revere Housing Authority	Large LHAs in Greater Boston*	Entire State
Contacted management about a problem or concern.....	78%	79%	78%
Felt they were usually or always treated with courtesy and respect when they contacted management.....	83%	83%	87%
Saw the Capital Improvement Plan.....	11%	22%	30%
Saw the Operating Budget.....	10%	13%	17%
Knew the Executive Director held a meeting with residents...	44%	40%	53%

\* Large LHAs in the Greater Boston area include: Arlington, Boston, Chelsea, Everett, Quincy, Revere, Somerville, Waltham, and Watertown.

## Services and Programs

**50%** of the Revere Housing Authority residents in Ch. 667 who responded to the survey said they would be interested in services and programs. Here are the services and programs residents said they would be most interested in participating in:

	Revere Housing Authority	Large LHAs in Greater Boston	Entire State
Job training programs.....	10%	8%	6%
Money management programs ( <i>budgeting, taxes, income building</i> ).....	9%	9%	10%
Children’s programs ( <i>tutoring, childcare, afterschool programs</i> ).....	2%	3%	2%
Health and Medical Services ( <i>visiting nurse, meal programs</i> ).....	29%	39%	35%
Adult Education ( <i>GED, ESL, educational counseling</i> ) .....	10%	14%	10%

## Maintenance and Repair

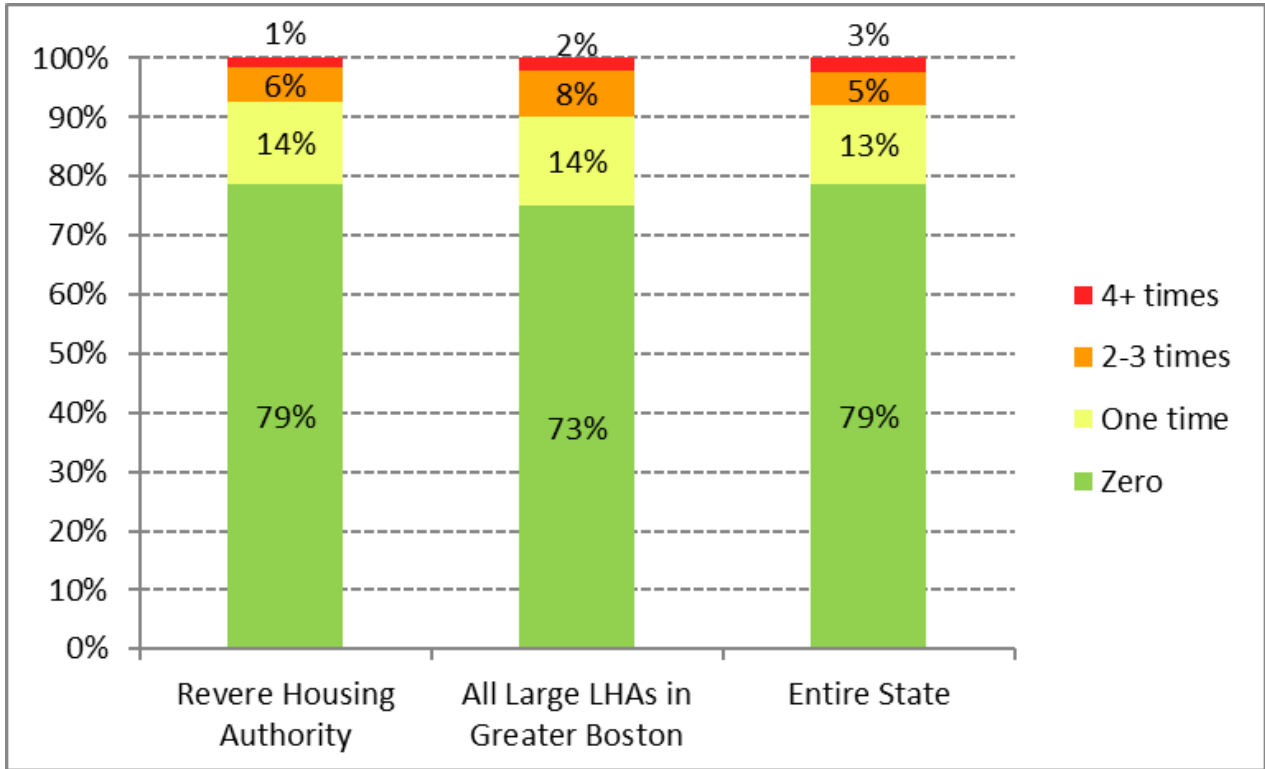
**Who had problems?** About one fifth of respondents had a problem with their heating and half had a plumbing problem in the last 12 months.

	Revere Housing Authority	Large LHAs in Greater Boston	Entire State
Had a heating problem.....	21%	27%	21%
Had a problem with water or plumbing.....	50%	51%	49%

- **Heating Problems**

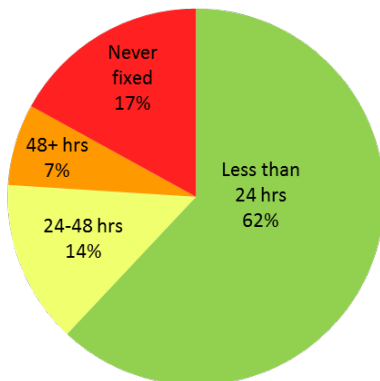
**How many times did residents have heating problems?**

The chart below shows how many times respondents had heat problems in the last 12 months. The green part of the bars shows what percentage of residents did not have the problem at all. The yellow shows who had the problem one time. The orange shows those who had the problem 2-3 times. And the red shows those who had the problem 4 or more times in the last 12 months.

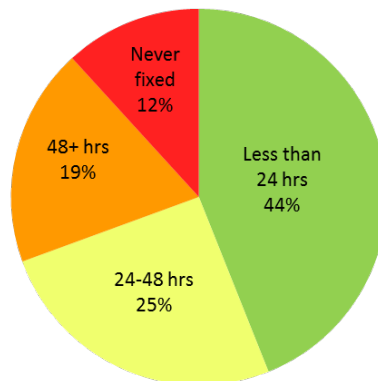


**How long did it take to fix the heating problems?** For those respondents who had problems, we asked how long it usually took for the problems to be fixed – less than 24 hours, 24 - 48 hours, more than 48 hours, or never fixed.

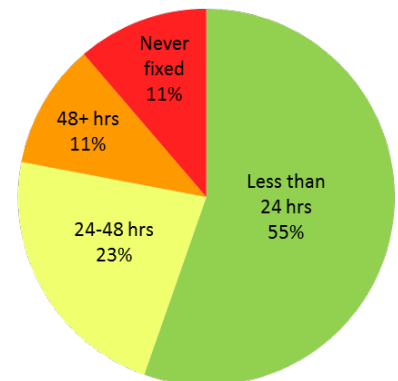
**Revere Housing Authority**



**Large LHAs in Greater Boston**



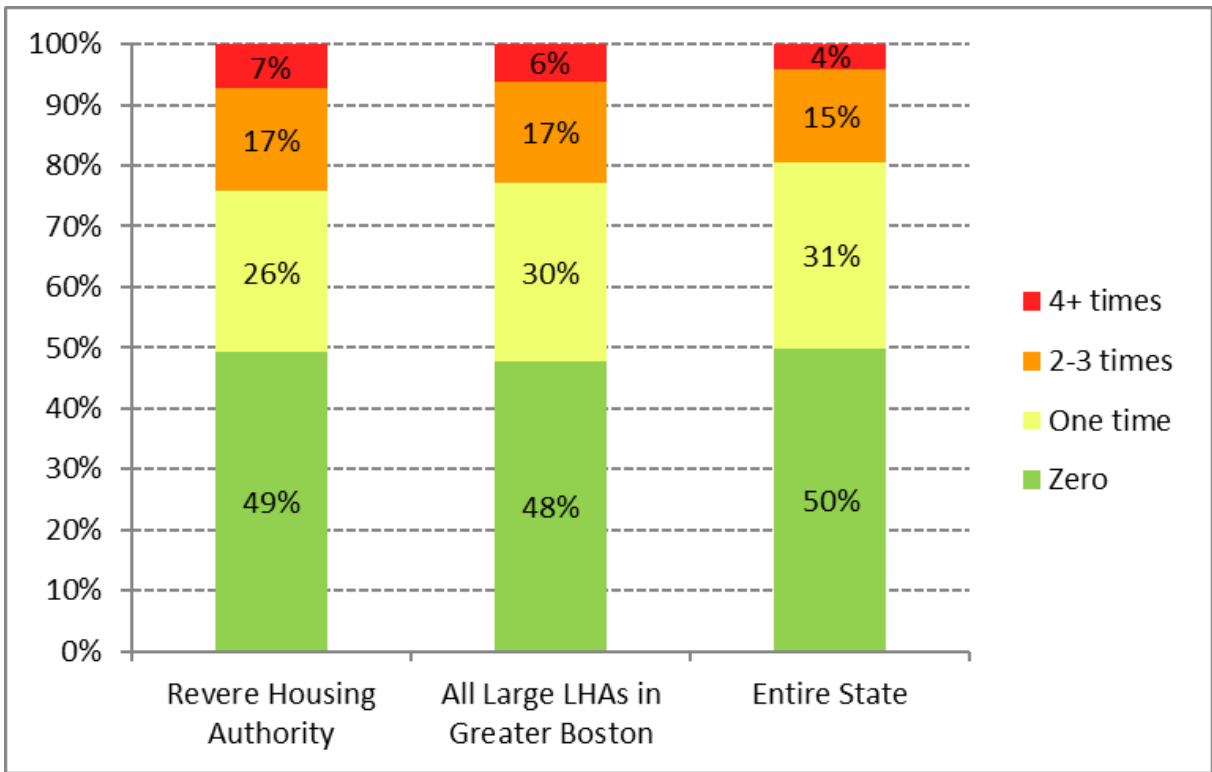
**Entire State**



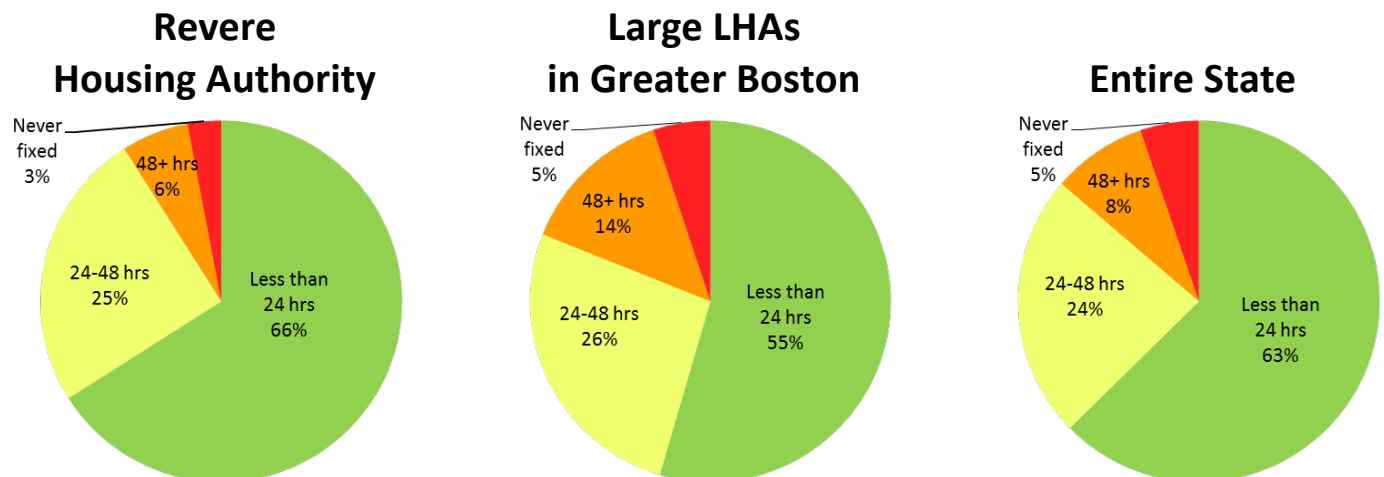
- **Water or Plumbing Problems**

**How many times did residents have problems with their water or plumbing?**

The chart below shows how many times respondents had water or plumbing problems in the last 12 months. The green part of the bars shows what percentage of residents did not have the problem at all. The yellow shows who had the problem one time. The orange shows those who had the problem 2-3 times. And the red shows those who had the problem 4 or more times in the last 12 months.

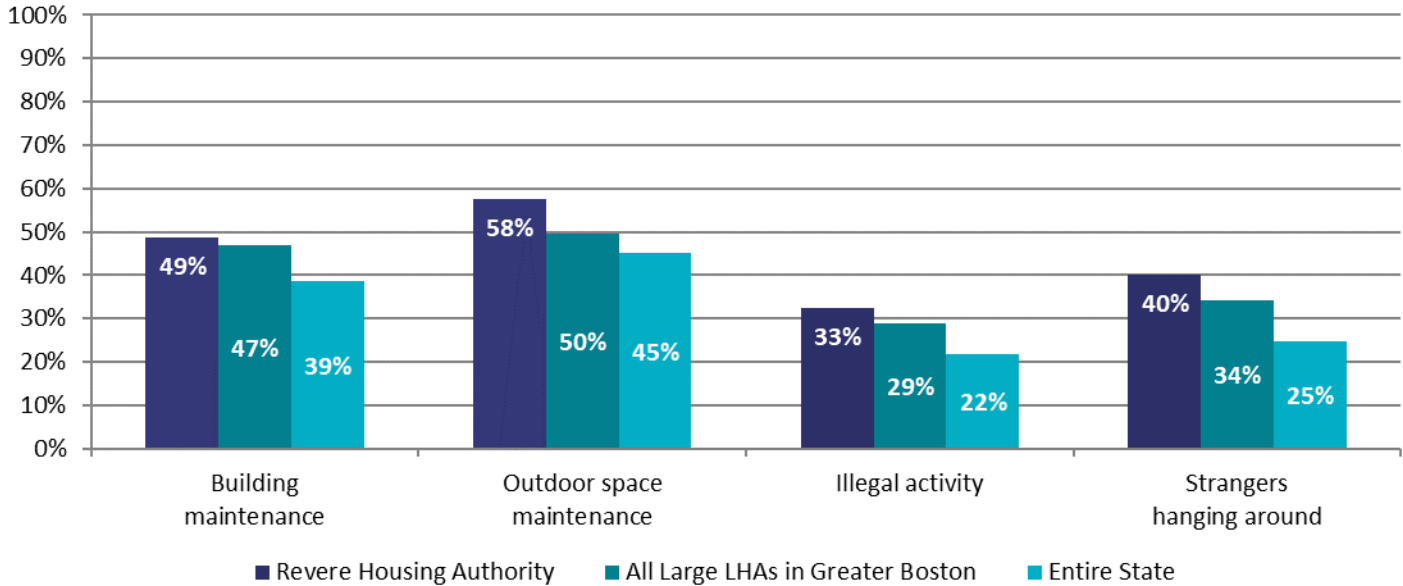


**How long did it take to fix the water or plumbing problems?** For those respondents who had problems, we asked how long it usually took for the problems to be fixed – less than 24 hours, 24 - 48 hours, more than 48 hours, or never fixed.



- What other problems did respondents have?** Respondents were asked how often they had problems with: building maintenance (*such as clean halls and stairways and having lights and elevators that work*), outdoor space maintenance (*such as litter removal and clear walk ways*), illegal activity in the development, and strangers hanging around who should not be there. The chart below shows what percentage of respondents said that they “always” or “sometimes” had this problem in the last 12 months.

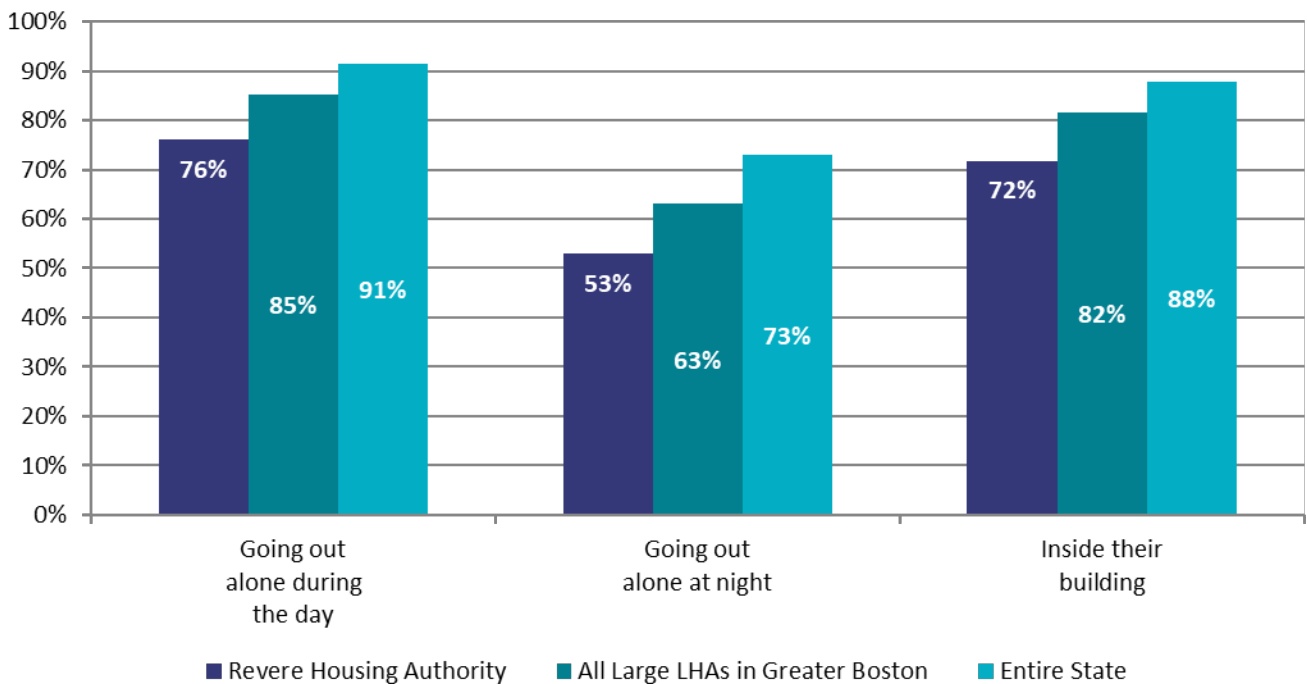
**Respondents who “always” or “sometimes” had problems with....**



**Safety**

Respondents were asked how safe they felt in their building and going outside alone. The chart below shows what percentage of people said they felt “very safe” or “mostly” safe.

**Respondents who felt “very safe” or “mostly safe” ....**



# Revere Housing Authority

## Chapter 200 & Chapter 705 Family Housing

### Fall 2020

DHCD is working with the Center for Survey Research at the University of Massachusetts Revere to survey residents in the housing units it oversees.

In the Fall of 2020, surveys were sent to 10,163 family housing units (Chapters 200 and 705). 2,124 surveys were filled out and returned.

In the **Revere Housing Authority**, surveys were sent to a total of **295** Revere housing units, **62** surveys were completed.

This report provides some information about how the residents from the **Revere Housing Authority** answered the survey. It compares their answers to those from residents in the entire state and to those from large LHAs in Metro Boston. These large LHAs in Metro Boston include: Arlington, Boston, Chelsea, Everett, Quincy, Somerville, Waltham, Watertown. (Please note that survey data may not have been received from each one of these nearby LHAs.)

## Communication

- **Communication with management:** Residents were asked about how they interacted with their Housing Authorities in the last 12 months. The table below shows what percentage of residents said they did each of the following:

	Revere Housing Authority	Large LHAs in Metro Boston*	Entire State
Felt they were usually or always treated with courtesy and respect when they contacted management.....	68%	69%	71%
Knew the Executive Director held a meeting with residents.....	17%	11%	15%

\* Large LHAs in Metro Boston include: Arlington, Boston, Chelsea, Everett, Quincy, Revere, Somerville, Waltham, Watertown. (Please note that survey data may not have been received from each one of these nearby LHAs.)



# Maintenance and Repair

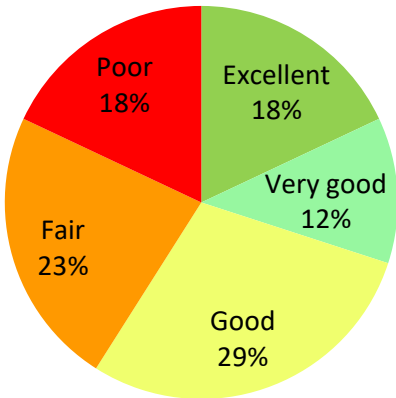
- Communication with maintenance staff:** Residents were asked about their interactions with the Revere Housing Authority maintenance staff in the last 12 months.

	Revere Housing Authority	Large LHAs in Metro Boston	Entire State
Felt they were usually or always treated with courtesy and respect when they contacted maintenance.....	74%	72%	75%
Were contacted by the Housing Authority before staff entered their apartment.....	90%	86%	86%

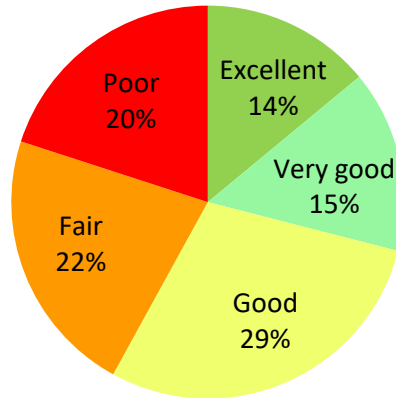
- Overall maintenance:** Respondents were asked how they would rate overall building maintenance (such as clean halls and stairways and having lights and elevators that work) and outdoor space maintenance (such as litter removal and clear walkways) in the last 12 months.

**Building maintenance:**

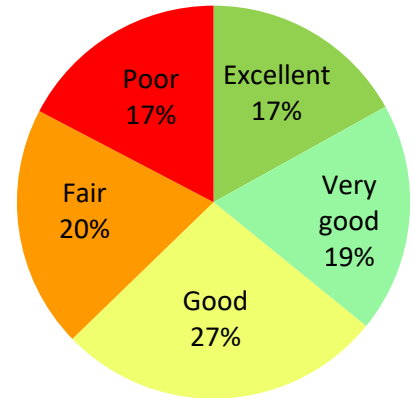
**Revere Housing Authority**



**Large LHAs in Metro Boston**

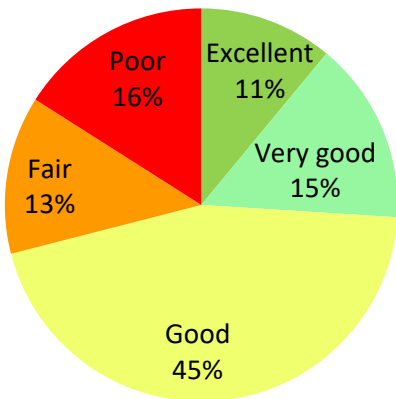


**Entire State**

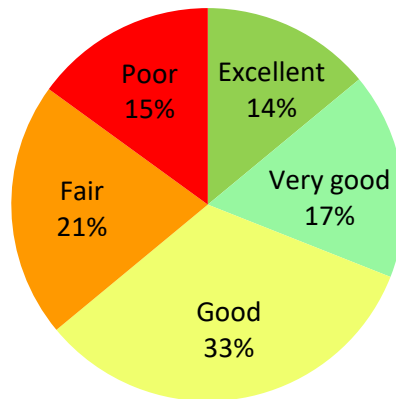


**Outdoor maintenance:**

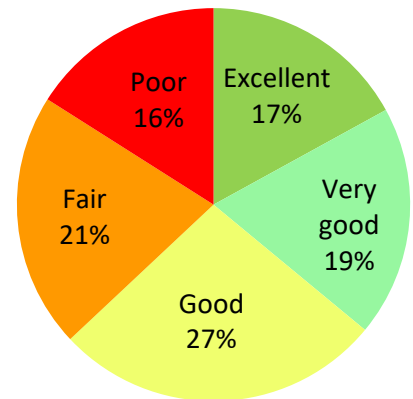
**Revere Housing Authority**



**Large LHAs in Metro Boston**



**Entire State**



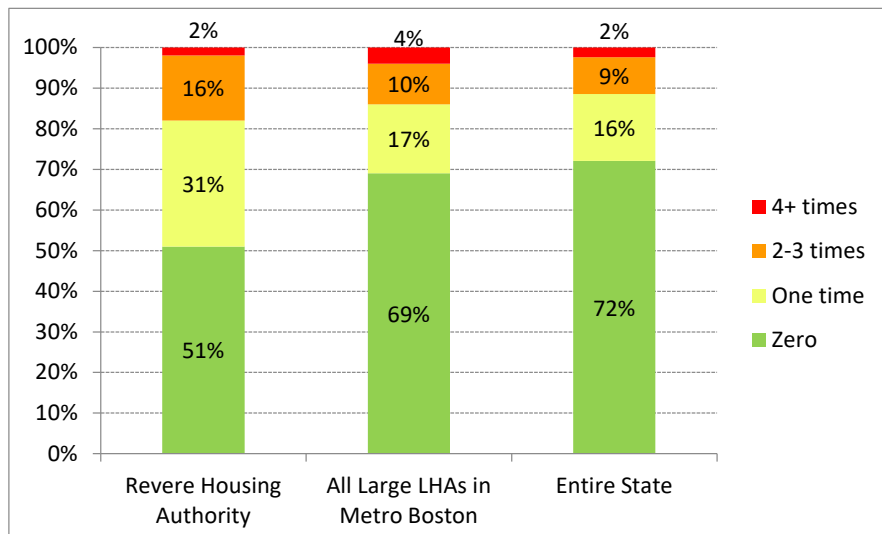
- Heating and Water Problems:** About two-thirds of respondents had a problem with their heating and more than three-quarters had a plumbing problem in the last 12 months.

	Revere Housing Authority	Large LHAs in Metro Boston	Entire State
Had any heating problem.....	68%	55%	56%
Had any water problem.....	82%	74%	74%

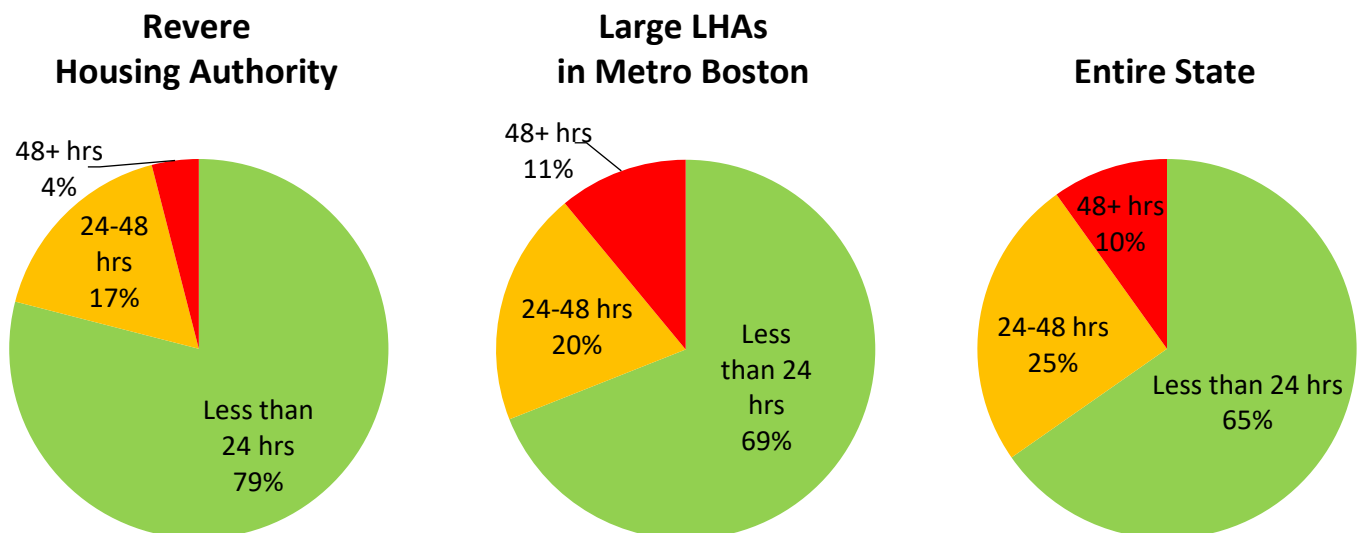
- Heating Problems**

**How many times did residents completely lose heat?**

The chart below shows how many times respondents had completely lost heat in the last 12 months. The green part of the bars shows what percentage of residents never completely lost heat. The yellow shows who lost heat one time. The orange shows those who lost heat 2-3 times. And the red shows those who lost heat 4 or more times in the last 12 months.



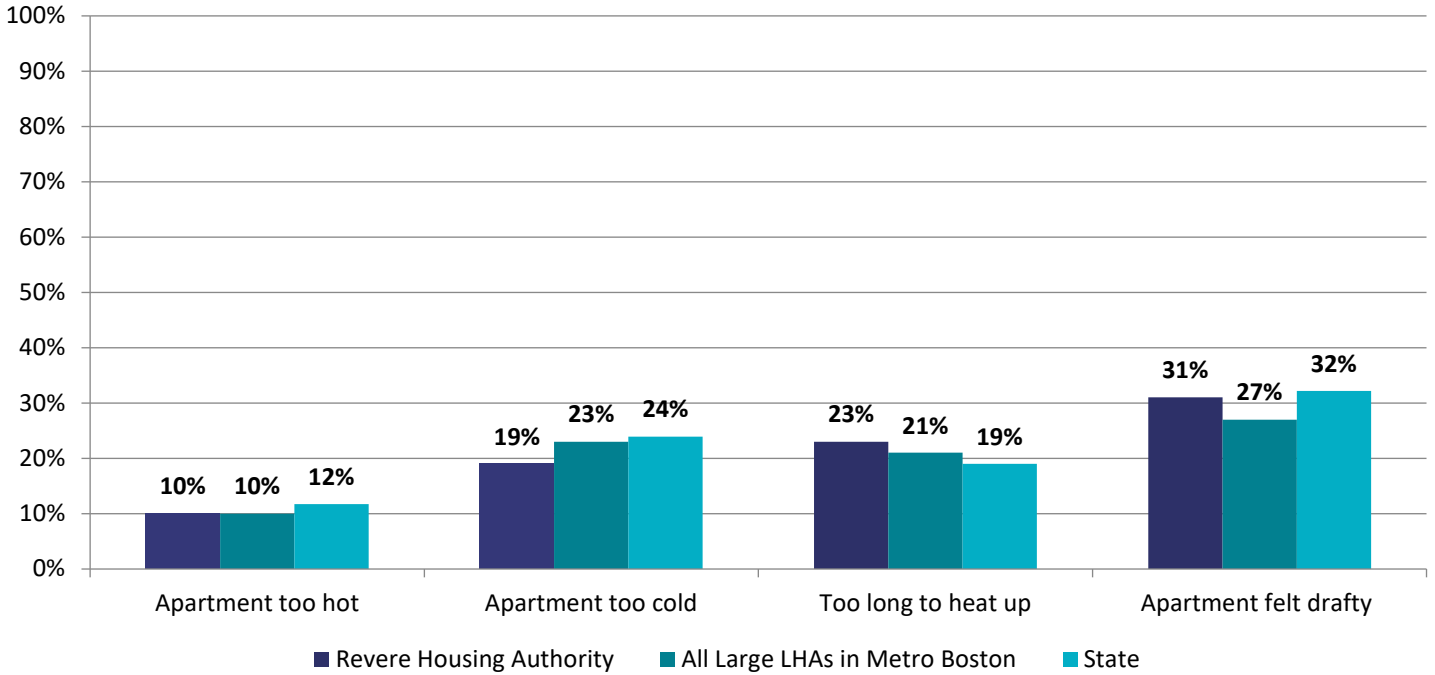
**How long did it usually take for heat to come back on?** For those respondents who reported completely losing heat, we asked how long it usually took for the heat to come back on – less than 24 hours, 24 - 48 hours, or more than 48 hours.



- **Other Heating Problems**

**In the last 12 months did residents have other heating problems?**

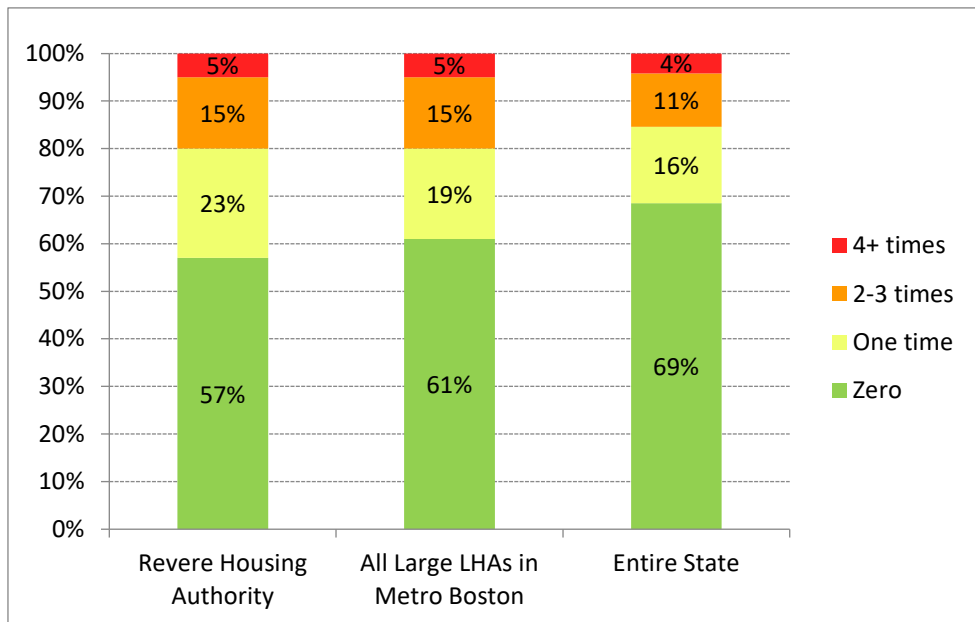
The chart below shows what percentage of residents experienced other heating problems in the last 12 months.



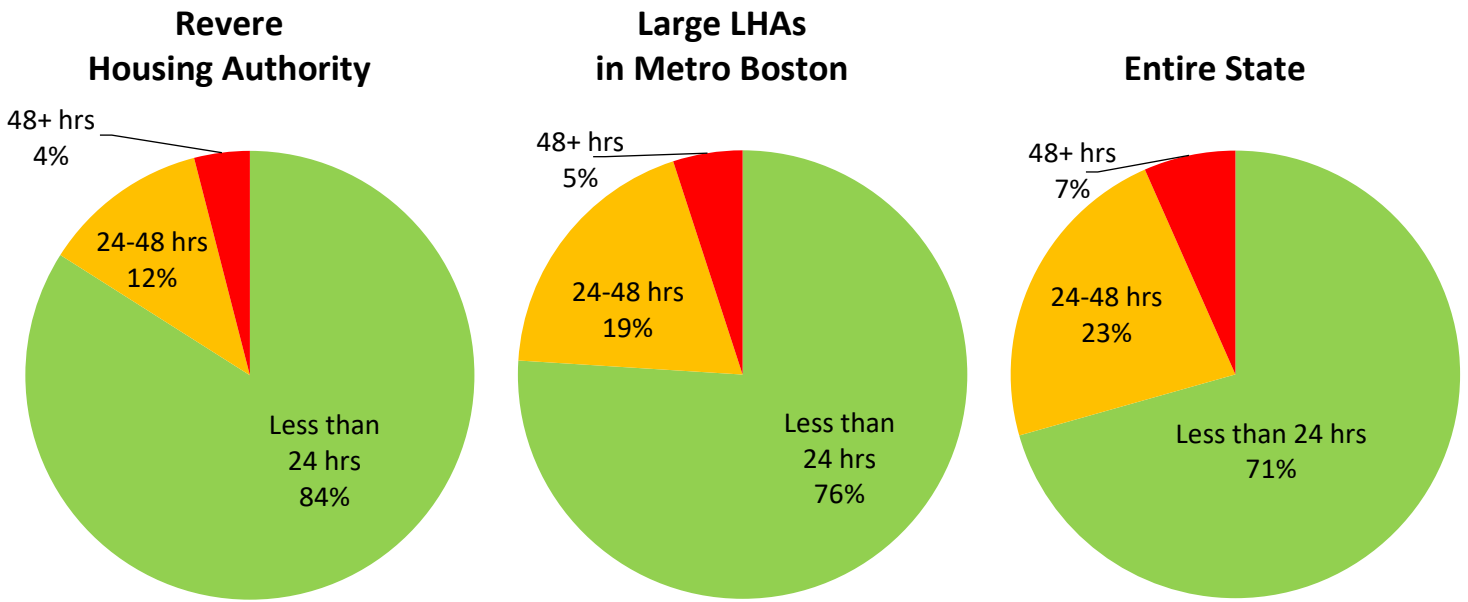
- **Water or Plumbing Problems**

**How many times did residents have no hot water in their apartment?**

The chart below shows how many times respondents did not have hot water in their apartment in the last 12 months. The green part of the bars shows what percentage of residents never had this problem. The yellow shows who lost hot water one time. The orange shows those who lost hot water 2-3 times. And the red shows those who lost hot water 4 or more times in the last 12 months.



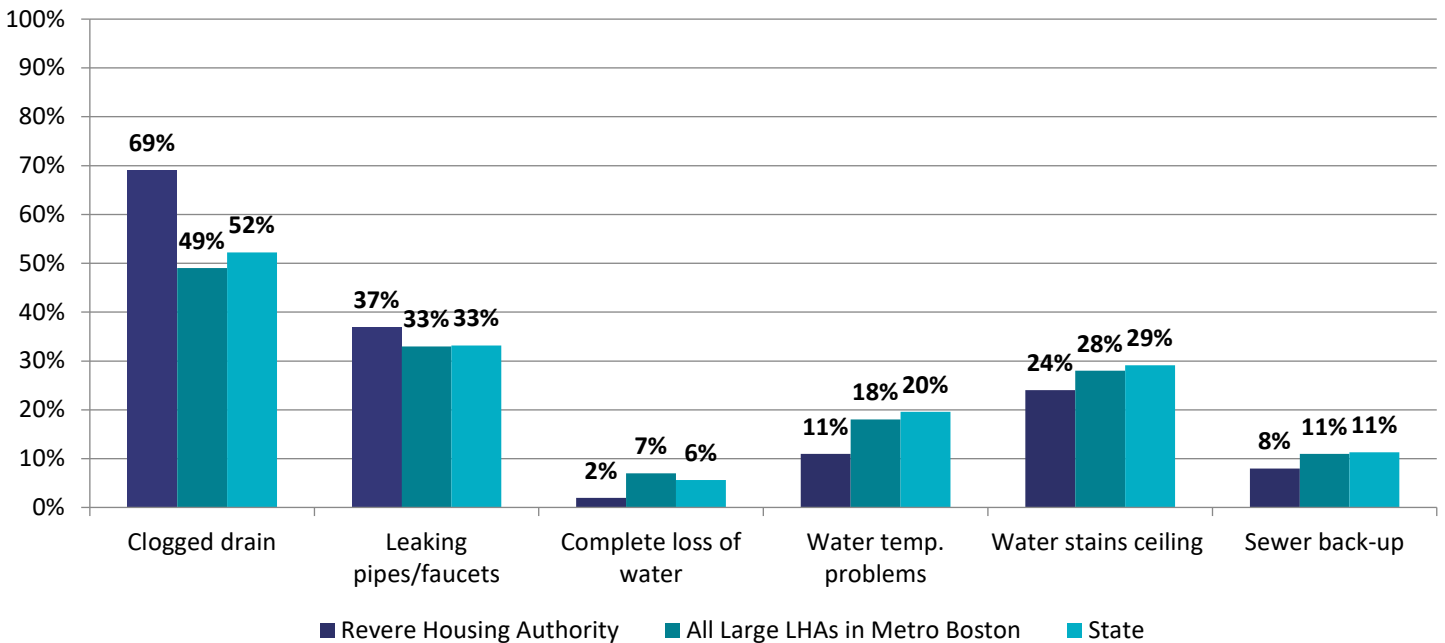
**How long did it usually take for hot water to come back on?** For those respondents who reported not having hot water in their apartment, we asked how long it usually took for hot water to come back on – less than 24 hours, 24 - 48 hours, or more than 48 hours.



• **Other Water or Plumbing Problems**

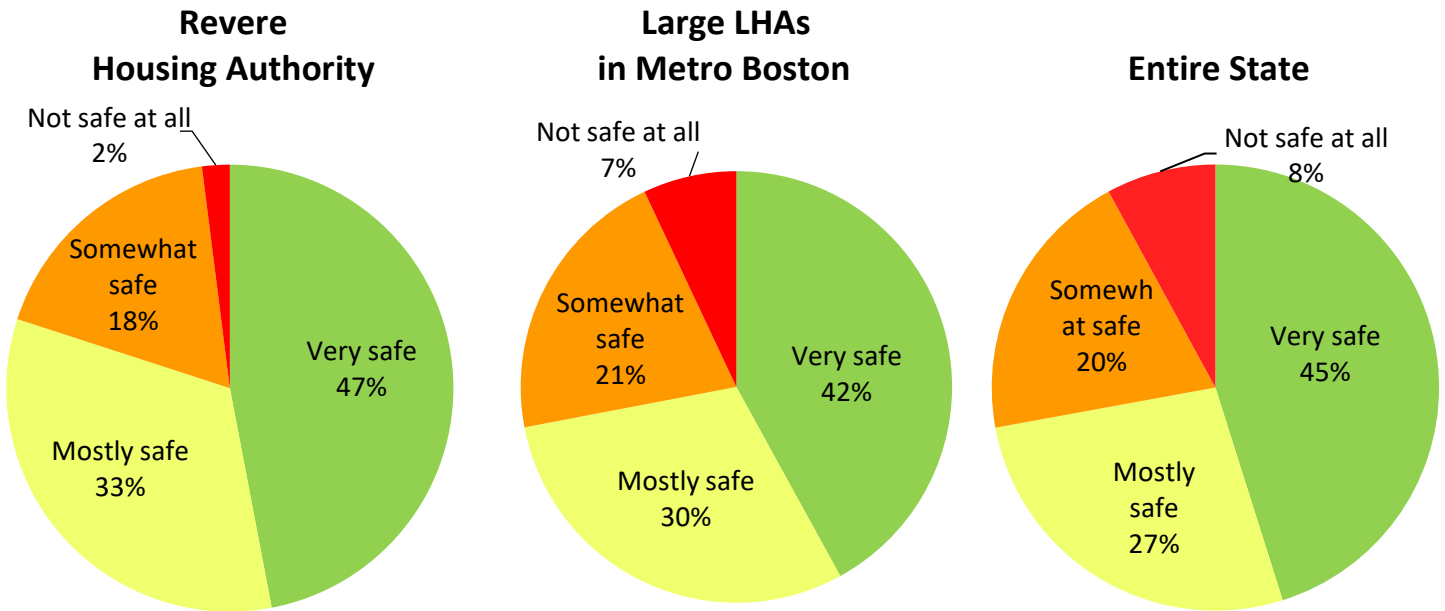
**In the last 12 months did residents have other water or plumbing problems?**

The chart below shows what percentage of residents experienced other water or plumbing problems in the last 12 months.

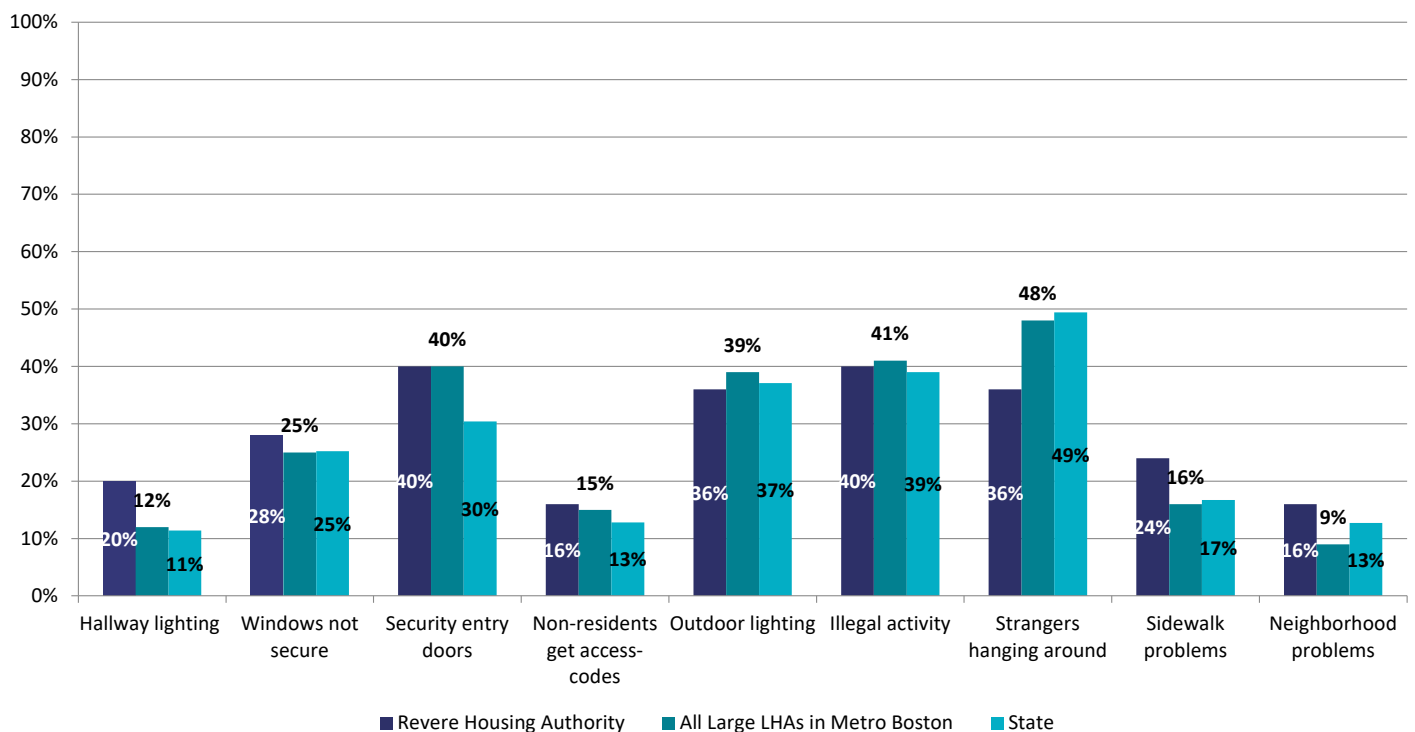


# Safety

**Respondents were asked how safe they felt in their development.** The charts below show what percentage of residents said they felt *very safe*, *mostly safe*, *somewhat safe*, or *not safe at all* in their development in the last 12 months.



**Reasons why respondents felt unsafe in their development:** Respondents were asked why they felt unsafe in their development. This chart shows what specific concerns respondents mentioned.



# Overall Satisfaction

Respondents were asked about their overall satisfaction living in their development. The chart below shows what percentage of people said they were *very satisfied*, *mostly satisfied*, *mostly dissatisfied*, or *very dissatisfied*.

