



City of Milford, Connecticut

- Founded in 1639 -

Benjamin G. Blake
Mayor

City Hall
110 River Street
Milford, CT 06460

December 24, 2019

Mrs. Alana Kabel, Director
U.S. Department of Housing & Urban Development
Office of Community Planning & Development
20 Church Street, 10th Floor
Hartford, CT 06103-3220

Dear Mrs. Kabel:

In accordance with the annual performance report requirements, the city of Milford has submitted a Consolidated Annual Performance and Evaluation Report (CAPER) for Program Year 44, October 1, 2018 to September 30, 2019 in the eCon Planning Suite via the Integrated Disbursement and Information System (IDIS). For your record please find the attached HUD-4949.1.

Should you have any questions or comments pertaining to the report, please contact Sheila Dravis at (203) 783-3230.

Sincerely,

Benjamin G. Blake
Mayor

encs.

cc: Julie Nash, Director, ECD
Sheila Dravis, CDBG Administrator

Cover Page
Grantee Performance Report
 Community Development Block Grant Program

**U.S. Department of Housing and
 Urban Development**
 Office of Community Planning
 and Development

OMB Approval No. 2506-0077 (exp.5/31/97)

Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Paperwork Reduction Project (2506-0077), Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Do not send this form to the above address.

See HUD Handbook 6510.2, "Entitlement Grantee Performance Report Instructions" for guidance on completing this report		1. Report for the Program Year ending (date): /9/30/19	2. Grant Number: B18-MC-09-0003
3. Name & Address of Grantee: City of Milford Department of Economic & Community Dev 70 W River Street, 2nd Fl Parsons Government Complex Milford CT 06460		4. Name & Address of Community Development Director: Julie Nash, Director	
5. Name & Telephone Number of person most familiar with information in this report: Sheila Dravis, CDBG Administrator		6. Name & Telephone Number of person to contact about disclosures required by the HUD Reform Act of 1989: Same	

7. Have these Community Development Block Grant (CDBG) funds been used:

- a. to meet the community development program objectives specified in the final statement for this program year? If no, explain, in a narrative attachment, how: (1) the uses did not relate to program objectives; and (2) future activities or program objectives might change as a result of this year's experiences. Yes No
- b. exclusively to either benefit low-and-moderate (low/mod) income persons, aid in the prevention or elimination of slums or blight, or meet community development needs having a particular urgency? If no, explain in a narrative attachment. Yes No
- c. such that the grantee has complied with, or will comply with, its certification to expend not less than 70% of its CDBG funds, during the specified period, on activities which benefit low/mod income persons? If no, explain in a narrative attachment. Yes No

8. Were citizen comments about this report and/or the CDBG program received? If yes, attach a narrative summary. Yes No

9. Indicate how the Grantee Performance Report was made available to the public:


a. By printed notice: (name & date of publication) Milford Mirror Newspaper City ECD webpage, Milford Public Library	b. By public hearing: (place & date) Parsons Government Complex December 19, 2019
c. Other: (explain) see above	

10. The following forms must be completed and attached:

- a. Activity Summary, form HUD-4949.2
- b. Activity Summary, form HUD-4949.2A
- c. Financial Summary, form HUD-4949.3
- d. One-For-One Replacement Summary, form HUD-4949.4
- e. Rehabilitation Activities, form HUD-4949.5
- f. Displacement Summary, form HUD -4949.6

I hereby certify that: This report contains all required items identified above; Federal assistance made available under the Community Development Block Grant Program (CDBG) has not been utilized to reduce substantially the amount of local financial support for community development activities below the level of such support prior to the start of the most recently completed CDBG program year; all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Typed Name & Title of Authorized Official Representative: Benjamin G. Blake, Mayor	Signature: 	Date: 12/23/19
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