2015-2017

CITY OF YORK, PENNSYLVANIA

HOME APPLICATION PROCESS

GENERAL PROGRAM INFORMATION

The City of York Bureau of Housing Services administers the HOME Program funded by the United States Department of Housing and Urban Development. The intent of this program is to assure an adequate supply of decent housing that is affordable to low-moderate income individuals and families. The City has established HOME program objectives in its 5-year Consolidated Plan, which the U.S. Department of Housing and Urban Development (HUD) approves. An Annual Action Plan, which updates the Consolidated Plan, describes how the City will meet the HOME program goals and objectives. The City is implementing a 3-year HOME funding plan to determine activities that will meet the HOME program goals and objectives.

Because the HOME Program is intended to serve a targeted population, all projects and programs subsidized using HOME funding must result in housing units benefiting individuals and families meeting the low-to-moderate income eligibility criteria. Deed restrictions will highlight the appropriate affordability period when necessary. Upon completion, annual inspections may be made to assure that HOME funded units remain in standard condition and income eligible individuals occupy the units. In 2015, the City expects to receive approximately \$350,000.00 in Home Investment Partnership Program Funds and \$5,,000 in HOME Program Income.

The City utilizes its HOME funds for such activities as: the First Time Homebuyers Down payment and Closing Costs Assistance Program and rental housing development. A minimum of Fifteen percent (15%) of the funds will be set-aside for projects developed by Community Housing Development Organizations (CHDO's). A small portion is also designated for Program Administration.

The activities selected for 2015–2017 HOME Three Year Project Plan will form the framework for the Annual Action Plans for those years. However, the number of HOME activities actually carried out will depend upon availability of the funds for the specific program year.

GENERAL PROGRAM CRITERIA

When developing project proposals, all respondents are urged to become familiar with the CITY's Community Vision Objectives, the city's 5-year Consolidated Plan and other long-range goals relating to affordable housing for income eligible York City residents.

All projects to be funded through the HOME program shall comply with the following general conditions:

- a. All rental units developed with HOME funding may not be converted to condominium ownership, owner occupancy or commercial usage during the affordability period.
- b. Owners/developers of projects rehabilitated or constructed through this Program may not discriminate against a tenant, prospective tenant or homebuyer under any federal, state or local housing assistance program.
- c. Owners/developers of projects must develop Affirmative Marketing Procedures.
- d. Owners/developers must comply with all requirements of the Federal Fund (s) for which they are applying and they receive.

- e. The incidental omission of any federal program requirement from this document does not excuse anyone from complying with the requirements.
- f. All HOME program fund recipients shall comply with the regulations and issuances promulgated pursuant to he HOME Investment Partnership Act of 1990 or the Housing and Community Development Act of 1974, as amended or revised.
- g. Recipients must also comply with the U.S. Department of Housing and Urban Development regulations within title 24 of the Code of Federal Regulations as part 35 (24 CFR 35), "Requirements for Notification, Evaluation and Reduction of Lead Based Paint Hazards in Federally Owned Residential Property and Housing Receiving Federal Assistance".

Available Funding

1. Minimum Funding

The minimum funding permitted through the Program is \$1000.00 per assisted unit.

2. Maximum Funding

The maximum per assisted unit limit in York City will be established based on HOME 221 (d)(3) limits. However, on a case by case basis, the City may exceed the maximum per unit cost, when provided satisfactory documentation, that without additional funding, the project will proceed.

It is important to note that the actual amount of subsidy provided will be based upon the minimum amount deemed necessary to create a viable project. This information will be determined from the project application.

3. Source of Funding

At its discretion, the City may use HOME or CDBG funds or a combination of both to fund project activities.

4. Measure of Liability

In consideration of full and satisfactory performance of services hereunder by the Sub-recipient/Contractor/ Developer, the City shall make payments based on the budget, subject to contract limitation and provisions.

It is expressly understood and agreed by the parties hereto that the City's obligations for disbursement of HOME funds are contingent upon the actual receipt of adequate Federal HOME funds to meet the City's liabilities. If adequate funds are not available to make payments, the City shall notify the Contractor in writing within a reasonable period of time after such fact has been determined. The City may, at its option, either reduce the amount of liability, or terminate the Contract. If federal funds are not granted to the City or are reduced, the City shall not be liable for further payments due the owner/sub recipient/developer.

It is also expressly understood that a funding commitment in no way obligates the General Fund of the City or any other monies or credits of the City, other than the funding applied for in this application.

Eligible Costs

It is the City's policy to limit assistance to construction or rehabilitation costs only.

Development Hard Costs: Actual Costs of constructing or rehabilitating housing.

- Costs to meet applicable new construction standards and energy efficiency standards.
- Cost to meet applicable rehabilitation standards or correct substandard conditions, including energy related repairs, handicapped improvements, lead based paint abatement and major systems.
- Cost to demolish existing structures and site improvements.

Development Soft Costs:

- Architectural, engineering or related professional services required to prepare plans, designs, specifications or work write-ups.
- Processing and settlement costs, such as loan acquisition fees, credit reports, title
 Insurance, recording and billing fees, building permits, attorney fees, appraisal fees
 and cost estimate fees.
- Information service costs such as affirmative marketing and fair housing information to prospective homeowners and tenants.
- Project audit costs.
- Acquisition of real property.
- Relocation costs

Eligible Projects

General:

This application is for HOME eligible projects requesting funding for the 2015-2017 program years. Projects must be located in the City of York. The County of York has its own program and funding, therefore no projects will be funded that are located in the County of York. Eligible projects can include new construction, demolition, or rehabilitation of homeownership or rental units for use by income eligible City residents. There is no restriction on the size or type of unit to be rehabilitated. Public, private or non-profit developers may own projects.

Applications from CHDO's (Community Housing Development Organizations) will receive more consideration than other applications, due to the HOME program requirement of the 15% set-aside for CHDO's. However, complete applications from other organizations will still be considered.

Please note only complete applications will be considered for funding.

Processing of Proposals

Only complete applications will be accepted.

During the proposal development period, CITY staff will be available to provide technical assistance in preparing the proposal. City staff will not prepare an application on your behalf.

Proposal Evaluation

The demand for annual HOME funds always exceeds the amount of funds available. Therefore, the Bureau of Housing Services has developed a rating system. Projects that best meet the local and federal program objectives will be recommended for funding.

The eligibility criteria for applications will go as follow:

If applicable, to qualify for funding, all real estate owned by the applicant must be current in sewer and real estate taxes.

Completeness

The City of York /Bureau of Housing Services (BHS) staff will be reviewing application completeness including all supporting documentation required. Applications that are not complete will not be considered for funding.

Eligibility

BHS staff will review each proposed activity to see if it's eligible under HUD requirements for the HOME funding. When developing project proposals, applicants are urged to become familiar with the City's Community Vision Objectives, and all proposed projects must create permanent HOME units for income eligible clients.

The City will consider the following factors when reviewing applications:

- Activities that provide permanent HOME units and principally benefit low-moderate income persons
- Activities with leveraged funds
- Activities that collaborated with other organizations
- Activities that promote cost efficiency
- Activities that strengthen York's economy
- Activities that are sustainable, making York a cleaner, greener and safer city

In order to assure equitable and efficient use of HOME Investment partnership Program funds, a ranking form has been developed; past performance of sub-recipients will be evaluated, as well as the capacity of agencies to carry out the proposed activity. For sub-recipients currently or previously under contract, the performance assessment will also include an evaluation of compliance with terms and conditions of these contracts.

Funds may not be obligated, committed or expended prior to the expressed authorization of the City - which will be granted only after the City has received the allocation for the specific year and the release of funds authorization from HUD.

Right of Refusal

The City of York reserves the right to reject any or all proposals, to waive technical or legal deficiencies, and to accept any proposal that it may deem to be in the best interest of the City. By submitting a proposal, the recipient hereby authorizes the City to contact references and make such further investigations as may be in the best interest of the City.

Contract Award

All proposals received shall be subject to evaluation by the Staff Review Committee, Citizen's Advisory Committee and York City Council. Services will be secured through a contract approved by City of York based on the content of the accepted proposal.

Please keep in mind that funding is being requested for the 36-month period beginning January 1, 2015 through December 2017. Funds may not be obligated, committed or expended prior to the expressed authorization of the City - which will be granted only after that date.

By the year 2019, The City of York would like to be, once again, a vibrant urbanized community in which people live, work, play and visit. This can be accomplished by:

- □ Providing housing opportunities for an economically and culturally diverse community,
- □ Providing safe and efficient access to and within the city for all modes of transportation,
- □ Creating healthy, safe and attractive neighborhoods,
- □ Enhancing the quality of life by providing quality public services, and

- □ Creating a healthy local and regional economy.
- ☐ Investing opportunities in the downtown for a variety of uses such as entertainment, shopping, business services, cultural facilities, tourism, and
- ☐ Investing incentives and the necessary infrastructure improvements in the Rail Corridor for light and heavy manufacturing facilities, incubators and business expansions,
- □ Adequate public services, facilities and infrastructure to stabilize, preserve, redevelop, and enhance special districts such as the George Street and College special Planning Districts,
- □ A competitive labor force, and
- □ Cooperation within the region.
- □ Strengthening and connecting residential neighborhoods by providing cleaner, greener, safer streets, pathways/greenways and parks,
- □ Developing aesthetic gateways at city borders,
- □ Promoting and expanding historic preservation efforts and quality architectural design,
- □ Upgrading and maintaining public spaces, recreation and park facilities,
- □ Providing expanded and alternative educational opportunities,
- □ Providing a variety of desirable housing types and styles,
- □ Protecting the investment of those who own property,
- □ Providing employment and services within the city, and
- □ Providing quality and affordable public services.

APPLICATION FORMAT

- Please submit one (1) original and five (5) copies of each application.
- Please do not submit applications in folders or binders.
- ♦ You may include attachments to your applications (i.e. agency brochures, maps, photographs, newspaper articles, etc.).
- ◆ DEADLINE FOR SUBMISSION IS JULY 28, 2014 at 4:00 PM at the BUREAU OF HOUSING SERVICES, 101 SOUTH GEORGE STREET, P.O. BOX 509, YORK, PA 17405.

Withdrawal of Proposal

Proposals may be withdrawn with written notice prior to the awarding of any contract. Notice must be in writing and addressed to the attention of the Director of Community Development.

Recipient Responsibilities

The recipient selected will be required to assume responsibility for all services offered in the proposal regardless of who produces them. The recipient shall be the sole point of contact, including payment of any charges arising as a result of the contract.



FISCAL YEAR 2015, 2016 and 2017 APPLICATION CITY OF YORK HOME INVESTMENT PARTNERSHIP PROGRAM PROJECT APPLICATION

SECTION I – AGENCY INFORMATION

Please read and review this application closely and note the various sections. Please be as specific as possible in answering those questions, which apply to your program. Complete all sections. **Limit your answers to the space provided. Please type.**

۸.	GEN]	ERAL INFORMATION			
	1.	Project Name:			
		Project address:			
		Census Tract No:	Census B	Block No:	
		Funding HOME Funds Requested :	2016 \$		_
	2.	Agency Name:			
	3.	Agency Address:			
	4.	Agency Director:			
	5.	Staff Contact:			
	6.	Phone Number:		Fax Number:	
	7.	E-Mail Address:		IRS ID Numbe	er:
	8.		_ Public Agency _ Private For-Profit _ Faith-based/religious		Private Non-Profit (501(c)(3) (Attach supporting document) Other CHDO
	9.	Estimated Start Date No. of Dwellings Gross Building Sq. Ft		Union Shop Davis Bacon _ Reside	ntialercial

State Prevailing Wage _____

DATI	E RECEIVED:	TIME:	SIGNATURE:	APPLICATION COMPLETED:
		lied for City HOME fundived City HOME fundin	ling in previous years? YI g in the past? YES	ES □ NO □ NO
			E funding within the past 3 ye HOME award and the proje	years, list each project, the name ct's current status.
	Increase Du	ration	ncrease AmountD	
	Describe your organ	nization's experience in t	he provision of housing and	services to low-income persons.
felony	-		or directors, partners or mem	bers ever been convicted of a
	The mere conviction	n of a crime, standing alo	ne, does not disqualify the ap	oplicant.
			artners currently debarred or	
federa				tigation by any local, state or
	* *		ll be involved in developing, ability, as well as their contra	
C.			n for which funding is being cription and any relevant broad	ng requested) overall mission and chures or flyers.
	on II: Activity Des	scription (Please answ	ver all questions): Indica	te the specific activity you are
	Homeowner Reha	abilitation	Homeowne	r Rehabilitation & Acquisition
	Homeowner New	Construction	CHDO Set	Aside
			CHDO Pro	oject Pre-Development
	Rental Rehabilita	tion	Rental Reh	abilitation & Acquisition
	Rental New Cons	truction	СНОО Оре	erating

FOR FUNDERS USE ONLY

HOME funds will be used only to support specific activities, which result in the City's expanded supply of decent, safe, sanitary, and affordable housing. See attached HOME technical bulletin for a list of eligible cost.

1. **PROPOSED DESCRIPTION OF PROJECT:** Please provide a written narrative to describe your project. At a minimum, the narrative should include a detailed description of the type of housing proposed, the proposed use(s) of the requested funding, and anticipated environmental issues (e.g. contamination, flood plain, historical and archaeological impacts, etc.). Please state whether you propose that an entity other than the applicant will execute the loan documents for the funds requested in this application.

If the project will use a tax credit limited partnership to finance the project, please indicate when the requested Commission funding will be assigned to the limited partnership. (Note: The eligible applicant must record the HOME loan and expend the funds before the assignment of the HOME loan to the limited partnership.) Also describe the proposed structure of the limited partnership (must comply with applicable HOME regulations), the proposed schedule for the investment of the limited partner's equity contributions into the project, and the status of the tax credit application.

Indicate how the need was determined and how this ACTIVITY addresses one or more of the City's Vision 2015 Goals. (attach brochures or other information that might be helpful) *LIMIT ONE PAGE*

 GOALS AND OBJECTIVES OF PROPOSED ACTIVITY: Please be as specific as possible in your description. *Outcome* based goals and objectives, stated numerically must be used. These will be used in your contract and you will monitor beneficiaries and performance accordingly. Identify how goals and objective accomplishments will be measured. *LIMIT ONE PAGE*

(i.e.: **Goal:** Homeownership opportunity for households. **Objective:** Renovation of 6 semi-detached properties.)

3. SOURCES OF FUNDS

List all sources of <u>other</u> funding obtained/committed/sought for this activity in the following table (e.g. state funds, local funds, etc):

Source of Funds	Amount	Work/Item to be Accomplished	Interest Rate/ Term	Status* (Circle)	Contingent Upon
		With Funds			HOME
					Funding?
1.	\$			Secured	YES
				Pending	NO
				Denied	
2.	\$			Secured	YES
				Pending	NO
				Denied	
3.	\$			Secured	YES
				Pending	NO
				Denied	
4.	\$			Secured	YES
				Pending	NO
				Denied	

TOTAL	\$
IOIM	Ψ

If no other funding sources are involved in this activity, please explain why:

*If secured, attach confirmation letter. If denied, attached denial letter stating the name of the source, the

ORGANIZATIONAL CAPACITY

date funds were sought, and the reason for the denial.

An applicant who has identified a partnership must attach a copy of an executed Memorandum of Understanding/Agreement, Contract, Sub-grant, or Letter with this party. At a minimum, the document must include the (A) name of each entity, (B) purpose of the partnership, (C) roles of each entity, and (E) signatures of authorized representatives.

Qualifications and Experience

- 1) Provide evidence of administrative capability of both your organization and cooperating Entities to develop and carry out the proposed project within the term of the written agreement. Include the past experience in Owner/Rental occupied rehabilitation, reconstruction, and/or managing affordable housing programs, Lead testing, training, educational outreach, relocation, specification writing, etc as it applies to each participant's role in the proposed program.
- 2) Provide proof of the organizations capability to handle financial resources, including any prior relevant financial management experience.
- 3) Describe any unresolved serious problems or any outstanding audit findings of both your organization and/or the Cooperative Entity. If applicable, describe how these findings were or are being resolved. A letter must provide this information form the applicant's auditor.
- 4) If your organization and/or the Cooperating Entity were recipients of the City of York HOME funds, describe the extent of progress that has been made in carrying out the program(s). Included the following:
 - a) The percentage of HOME funds expended as of the submission date of this application (for each year of funding);
 - b) The percentage of HOME Units completed as of the submission date of this application (for each year of funding);
 - c) An explanation of any problems encountered, how they were (are) being dealt with, and how the problems can be expected to affect the program being proposed in this application;
 - d) If the applicant has ever had funds de-obligated please explain the circumstances;
 - e) If the applicant has received a time extension or amended a HOME contract from funding year 2000 to the present, please explain the circumstances.
- 5) If the Applicant and/or Cooperating Entity have been awarded HOME funds by another Participating Jurisdiction (included the name of the party), describe the extent of progress that has been made in carrying out the project(s). In addition, provide the name of the awarding Participating Jurisdiction and list any current applications for HOME funds submitted to them.

6) List of all board members (including names and titles) identifying those members who are private individuals acting in a private capacity. An individual is considered to be acting in a private capacity if the individual is not an employee of a public body and is not being paid by a public body while performing functions is connection with the nonprofit organization. A public body is the State, any City, County, Town, Township, Village, or other general-purpose political subdivision of the State.

SECTION III – Project Site Information

a.	Tax parcel number (s):
b.	Are all property taxes current? Yes No
c.	Check all required planning/zoning approvals. Include copies of completed approvals as Attachments:
	Date approval received or anticipated Use/Area Variance Parking Variance Special permit Rezoning Site plan approval
	Building permit
	List any necessary infrastructure improvements (road, sidewalks, lighting)? Indicate the number of units targeted for HOME assistance. If several categories to be served, write the number of units to serve each category next to the category.
	Number of HOME units % of Total Units

f.	List any special populations specifically assist.	(i.e.	senior	citizens,	handicapped,	homeless,	etc.)	that	the	project	will
	Elderly Person (62+)										

Are HOME units fixed or floating: _____floating _____fixed (If fixed, identify which

Persons with disabilities
Persons with HIV/AIDS
Other:______

Incomes below 60% of the Area Median Income Incomes below 50% of the Area Median Income Incomes below 30% of the Area Median Income

units will be)

Purcha Price		alue Post ehab	Fund Type	Assist Method	Annual Int. Rate	Amort. Amount Period
i				_	ales price for eac	
BDR	Rent			_	_	
BDR SIZE	Rent	t include utiliti	es Yes UTILITY ALLOW	NET MONTHLY	NoACTUAL AMOUNT PAID INC.	LOW OR MOD INC

g. HOME Activity Location/Address

m.	Existing	Improvements

	Со	mmercial		Residential		Industrial
Number of Structure				regraential		maastrar
Year Built						
	acant					
Structures	deant					
	cupied					
Structures	apica					
Number of Structur	res to					
be Demolished						
Estimated cost	of					
Relocation						
	•					
n. Existing		Improvements	T			
	SRO	Studio	1 BR	2 BR	3 BI	R 4 BR
Number of						
Existing Units						
Number of						
Occupied Units						
Number of						
Vacant Units						
Number of						
Substandard						
Units						
Number of Units						
to be Demolished						
Estimated Cost of						
Relocation						
o. Check b	elow the pe	ersonnel required	d to compl	ete this project.	If you have l	begun to secure specific
		names in the sp			11 / 00/110/0	segum to seeme speeme
person	101 1150 011011	names in the sp	acc provid			
☐ Architect	:					
☐ Construct	tion Manag	er:				
☐ Builder: _						
☐ Other:						
p. If applic	able, List tl	ne property man	ager and o	other properties t	hey manage.	
Drono	arty Monocc	ar.				
rrope Adda	acces of Dro	nerties Managa				
Addit	23523 OI FIO					

based on project planning years 2015-2017. Co	•	lowing project	schedule:
Durania and an ariffication to the Cita	Date	/	
Drawings/specification to the City Drawings/specification Approved	/	/	
Bidding begins		/	
Bidding ends		/	
Construction begins	/	/	
Construction ends	/	/	
	/	/	
	/_	/	
	/	/	
Include all major milestones such as land and Rezoning, Density Bonus/Housing Schematic design, design development, co occupancy. In addition, specify tentative Please provide realistic dates for complet Agreement.	g Element Honstruction do e dates for lo	ousing Oppo cuments, const an closing and	rtunity Area approva truction phase and initial I first request for fund
Applicants receiving HOME funds will be Department, which will include a term for by the time indicated may result in de-obline. Complete the attached schedule A, Developm Schedule C, Rental Housing Pro-forma; and pros. Is site control in place for the entire project or control.	r project compigation of HO ment Budget; so	oletion. Failur ME funds. Schedule B, E action Costs bra	re to complete the project xisting Financing Budge ake down)
Type of control in place for the entire project or Lease Agreement Expiration Da	development:		
Deed Option Expiration Date _			
Provide documentation evidencing site control.			
Does the site/building have an historic or archeo	logical signific	ance?Yes	No If yes, Explain
Does the building qualify for Historic Tax Credi	ts? Yes _	No	
Is the property located in a 100 year flood plain?	? Yes	_ No	
Was the structure built before January 1, 1978? If yes, has structure been rehabilitated after Janu Is the structure certified lead free? Yes	ary 1, 1978? _		No
Does the project involve relocation?Yes			

q. TIMETABLE FOR PROJECT IMPLEMENTATION: Please provide a 36-month timeline of tasks

	(Indicate number of families and/or business)
		Vill the proposed activity result in temporary or permanent displacement or relocation? 'emporary relocation Permanent relocation
	Н	lave residents been given relocation notices or benefits? Yes No
	D -	Describe any and all services that will be provided to tenants being relocated
SECT	- TION I	IV – FUNDING STRATEGY
using	these f	nt for your organization to help offset the demand for the limited amount of City dollars available by funds to leverage other funding. If your project relies on a renewal of funds every year, the City cannot at renewal. In the space provided below:
1.	If	f you did not receive 100% of funding requested in this application, what would be the impact?
	N N	Number of existing units: Number of units at completion: Number of HOME- assisted units:
2.	of E pa	f this is a homeownership program, please provide a copy of your fair housing marketing plan, a copy of your program cligibility criteria, a copy of your home buyer training materials (if available), a copy of any third arty housing counseling Program that you intend to use and discuss what role if any a professional eal estate firm will have in your program.
3.	St	tructure of subsidy: Loan @% for years Deferred payment loan
SECT	TION V	V – BUDGET
Provid	de the f	financial data requested below by completing each Schedule.
1.		TAL AMOUNT OF CITY FUNDING REQUESTED IN THIS APPLICATION (For agencies esting more than one activity - total of all activities requested)
	City:	\$(HOME as leveraged funds)
	a.	Amount for Direct Services: \$
	b.	Amount for Overhead/Indirect Costs: \$

2. BUDGET DETAIL

- **a.** Complete Schedule A, a listing of all sources of revenue used by the agency FOR ALL ACTIVITIES or attach agency budget providing comparable information.
- b. Complete Schedule B, providing a program budget, by source to operate only the proposed program for a thirty-six (36) month period beginning January 2015 and ending December 2017. The last column on Schedule B requests % of the AGENCY Budget for each activity for each Program year beginning January 2015 and ending December 2017.
- **c.** Complete Schedule C, narrative presenting support for individual line items in Schedule B for this **EACH Activity.** Explanations for budget increases from the previous fiscal year, which exceeds 10%, must be provided.

Date of last financial audit:	Were there any findings?	Yes No
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If findings were issued, summarize the findings and provide a brief explanation of the agency's response to the findings. You must attach a copy of the agency's most recent audit, a copy of the management letter and the agency's response to the letter, unless you have submitted an audit as a result of funds received from the City during the past 24 months.

Schedule A: DEVELOPMENT BUDGET (please provide a copy for each funding year, e.g. 2015-2017)

	BANK	EQUITY	HOME	OTHER	TOTAL
ACQUISITION/REFINANCING					
ACQUISITION/REFINANCING	\$	\$	\$	\$	\$
OTHER	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	\$
CONSTRUCTION COST					
Contractor Price	\$	\$	\$	\$	\$
Contingency @%	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	\$
PROFESSIONAL FEES					
Legal	\$	\$	\$	\$	\$
Eng/Architect Fees	\$	\$	\$	\$	\$
Bank Eng/Arch Fees	\$	\$	\$	\$	\$
Environmental Review	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$
CLOSING AND OTHER FEES	\$	\$	\$	\$	\$
Bank Commitment Fee	\$	\$	\$	\$	\$
Appraisal	\$	\$	\$	\$	\$
Bank Legal	\$	\$	\$	\$	\$
Title	\$	\$	\$	\$	\$
Mortgage Tax	\$	\$	\$	\$	\$
Mortgage Insurance	\$	\$	\$	\$	\$
Survey	\$	\$	\$	\$	\$
other	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	\$

CARRYING COSTS	\$ \$	\$ \$	\$
Construction Interest	\$ \$	\$ \$	\$
Real Estate/Water/Sewer Taxes	\$ \$	\$ \$	\$
Insurance	\$ \$	\$ \$	\$
Utilities	\$ \$	\$ \$	\$
Marketing	\$ \$	\$ \$	\$
other	\$ \$	\$ \$	\$
Total	\$ \$	\$ \$	\$
TOTAL DEVELOPMENT COST	\$ \$	\$ \$	\$

Schedule B: Projected Expenditures by Funding Source for EACH Proposed ACTIVITY Only - Use additional copies for additional activities and program years (Please provide a copy for each funding year, e.g. 2015-2017)

Agency	Program
Name:	Name:

Item	Description of Expenditures	City CDBG	City HOME	Other City Funds	County CDBG	Other County Funds	United Way	Agency Funds/ Client Fees	All Other Funds	PROGRAM INCOME	TOTAL
A	PERSONNEL (DIRECT LABOR)	\$	\$	\$	\$	\$	\$	\$	\$	\$	
В	FRINGE BENEFITS										
С	TRAVEL										
D	EQUIPMENT (Only Items > \$5,000 Depreciated Value)										
Е	SUPPLIES (Only Items with Depreciated Value < \$5,000)										
F	CONTRACTUAL										
G	CONSTRUCTION										
	Administrative and legal expenses										
	Land, structures, rights-of way, appraisals, etc.										
	Relocation exp. and payments										
	Architectural and										

	engineering fees					
	Other architectural & engineering fees					
	Project inspection fees					
	Site Work					
	Demolition and Removal					
	Construction					
	Equipment					
	Contingencies					
	Miscellaneous					
Н	OTHER (DIRECT COST)					
I	INDIRECT COST					
	TOTAL COST	\$ \$	\$ \$	\$ \$	\$ \$	\$ \$

Schedule C: Post – Rehabilitation Rental Housing Pro-Forma (If Applicable)

SOURCE OF INCOME	MONTHLY	ANNUALLY
Residential Income		
Gross Monthly Income (GMI)		
Vacancy (% of GMI)		
Net Monthly Income (GMI -Vacancy)		
Commercial Income		
Gross Monthly Income (GMI)		
Vacancy (% of GMI)		
Net Monthly Income (GMI -Vacancy)		
Total Sources of Income		
USES OF INCOME		
Taxes		
Water and Sewer		
Insurance		
Payroll		
Cleaning/Exterminating		
Utilities (leave blank if paid by tenant)		
Utilities common areas		
Management		
Painting		
Repairs/Replacement		
Landscaping/Garbage		
Legal/Accounting		
Building Reserve		
Other		
Total Uses of Income		
NET OPERATING INCOME (SOURCES -USES)		
(SOURCES -USES)		
Less Debt Service Payments		
Net Cash Flow		
Distributions		
Debt Coverage Ratio		

Attach a 30 year operating budget and cash flow projection that shows estimated project income, Operating expenses, reserves, debt service and distributions.

SECTION XII - CERTIFICATIONS

The Applicant hereby assures and certifies that it will comply with the regulations, policies, guidelines, and requirements with respect to the acceptance and use of City funds for this program, if approved for funding. Also the Applicant gives assurances and certifies with respect to the grant that:

- a. It possesses the legal authority to make a grant submission and execute a Grant Contract to undertake the proposed program;
- b. Its governing body has adopted or passed as an official act a resolution, motion, or similar action authorizing the submission of the Funding Request Application;
- c. The Applicant will administer the grant, if provided, in accordance with the HOME Investment Partnership Program regulations as defined in 24 CFR Part 92, and other Federal regulations, policies, guidelines, and requirements, including those outlined in OMB Circular Nos. A-87, A-110, A-122, and A-133 as they relate to the acceptance and use of federal funds under this federally assisted program; and the Uniform Administrative and Program Management Standards and Cost Principles contained in 24 CFR Part 84 and Part 85.
- d. No member, officer, or employee of the Applicant, or its designees or agents, and no other public official who exercises any functions or responsibilities with respect to the program during his/her tenure in office or employment for one year thereafter, shall have any interest, direct or indirect, in any contract or subcontract, or the proceeds thereof, for work to be performed in connection with the program assisted under this grant, if approved;
- e. It will give HUD, the City of York, or any other authorized representatives access to and the right to examine all records, books, papers, or documents related to the grant, if approved.

To the best of my knowledge and belief, the data and statements presented in this application are true and correct, the document has been duly authorized by the governing body of the applicant, and the Applicant will comply with the certifications listed above if the application is approved.

ertifying Representative(s)		
NAME (TYPE)	SIGNATURE	DATE
NAME (TYPE)	SIGNATURE	DATE

City of York 2015-2017 HOME Application Checklist

Narrative Section

Complete application, all documents included

Detailed project description

Adequacy of project documentation

Project fits into the community priorities set out by the Consolidated Plan

Project can be completed within a reasonable time frame

Performance in carrying out previously awarded federal funds

Prior experience with Home related activities and/or

Prior experience with other grants programs and proven record carrying out similar projects in the community

Financial capacity as indicated by audited financial statements and banking/credit references

3-year Project Budget with annual break downs

Additional project funding sources (match documentation)

Adequate staffing

Organizational strength

Organizational Information

Demonstration of site control (if applicable)

Federal IRS 501(c) (3) designation

Article of incorporation/Bylaws

Non-profit determinations (tax exempt letter form IRS and/or state)

List of Board of Directors

Board of Director's authorization to Request Funds

Organizational Chart

Resume of Chief Program Administrator

Resume of chief fiscal officer

Financial statement and audit

Banking reference

Insurance/Bonds/ Worker's Compensation

Conflict of Interest Statement

MANDATORY ATTACHMENTS. ALL ATTACHMENTS APPLICABLE TO YOUR PROJECT MUST BE SUBMITTED FOR APPLICATION TO BE ELIGIBLE FOR FUNDING CONSIDERATION.