

CITY OF ASHEVILLE
ASHEVILLE REGIONAL HOUSING CONSORTIUM
Application for Funding for a
CONSTRUCTION PROJECT
2012 - 2013

CHECKLIST OF DOCUMENTATION INCLUDED WITH THIS APPLICATION:
(Check each box)

Your application must include following sections in the order listed:

- Section I: Applicant Information
- Section II: Project Description
- Section III. Financial Information
- Section IV. Agency Management
- Section V. Disclosure of Potential Conflicts of Interest

REQUIRED ATTACHMENTS

Please provide one electronic copy of each of the following documents:

- An **organizational chart**. Highlight staff who will be responsible for this project
- By-Laws, Articles of Incorporation, and 501c(3) determination letter**.
- A copy of your most recent financial statements and audited financial statements, including the management letter, if an audit was performed in the past year.
- A complete list of the members of your current **Board of Directors**. Include addresses, phone numbers, and relevant affiliation.

**CITY OF ASHEVILLE
ASHEVILLE REGIONAL HOUSING CONSORTIUM
Application for Funding for a
CONSTRUCTION PROJECT
2012 - 2013**

This is an application for: **CDBG** **HOME**
(Check only one box)

**SECTION I
APPLICANT INFORMATION**

Full Legal Name of Applicant Agency:

Name of Project:

Contact Person:

Title:

Telephone Number: - - **ext:**

E-Mail:

Agency Address:

City:

State:

Zip:

Total Funds Requested: \$

Applying For:

CDBG (Asheville only)

HOME

Buncombe

Asheville

Henderson

Madison

Transylvania

CHDO Activity

CHDO Predevelopment Loan

By typing in below the name of the authorized signatory and date of submittal, you acknowledge that your governing body has authorized this application, that it is true and current to your knowledge, and that you have retained a copy of this application.

Name:

Date: / /

Authorized Signatory

SECTION II PROJECT DESCRIPTION

II.A. Project Title:

II.B. Project Location(s) (be as specific as possible):

II.C. Type of Activity (check one):

- | | |
|---|--|
| <input type="checkbox"/> New Construction for Homeownership | <input type="checkbox"/> Rental Housing Rehabilitation |
| <input type="checkbox"/> New Construction for Rental | <input type="checkbox"/> Owner Occupied Housing Rehabilitation |
| <input type="checkbox"/> Predevelopment Loan (HOME Only) | <input type="checkbox"/> Public Facility or Infrastructure (CDBG Only) |
| <input type="checkbox"/> Acquisition/Rehab/Sale | <input type="checkbox"/> Commercial Property Improvement (CDBG Only) |
| <input type="checkbox"/> Other (Specify) | |

II.D. Project Overview

1. Please provide a short description of your project proposal. (600 characters)

2. What is the purpose of your project? (400 characters)

3. Has your project been funded by the State or the City of Asheville (non CDBG or HOME) in the past 12 months?

Yes No

II.E. Project Justification

1. Describe how your program fits into the 2010-2015 Consolidated Plan. Click [here](#) for link to the plan. (1000 characters)

2. What unmet need or market does the program address? (400 characters)

3. How do you know that the need or market exists? How will your program meet this need? Provide objective data that documents your. (1000 characters)

II.F Project Site Details

1. What is the size of the development site? (400 characters)

2. Please give a site description. (1000 characters)

3. What is the current site zoning and the status of any required planning reviews? (1000 characters)

(II.F Project Site Details Continued)

4. What is the status of your assessment of environmental conditions at the site? Will there need to be mitigation of any existing environmental conditions before the project proceeds? (400 characters)

Please attach the following:

- Site plan showing lot boundaries, street access, location of structure(s), and other site features**
- General location map showing development site in relation to streets, points of interest in the surrounding neighborhood, neighborhood facilities and services (at least 1/2 mile radius). Interstates (within 1000 feet), airports (within 5 miles), railroads (within 3000 feet), waterways, and flood zones must be shown (show all streams or waterways on or adjacent to the property).**
- If you already own the site of property, submit a copy of the deed and describe all existing liens or deeds of trust on the property. If the site is currently under an option agreement, submit a copy of the option and purchase agreement.**
- Any environmental studies that have been completed for the property.**

II.G. Property Acquisition

1. Describe the real property the agency has acquired or plans to acquire in order to carry out the project. Has the property already been acquired, or is property acquisition planned? When did closing occur, or when is closing planned? (400 characters)

2. Has property owner been notified of your intention to use federal funds for this project? If so, please attach copy of the letter. (100 characters)

(II.G Property Acquisition Continued)

3. Is the property currently occupied? If so, indicate the status and number of tenants or owners and describe in detail how you will determine relocation needs and help occupants relocate in accordance with Uniform Relocation Act. Include the cost of this in your budget. If you have issued a General Information Notice to tenants informing them of their rights to relocation assistance, attach a copy of notice. (400 characters)

II.H. Construction Detail

1. Provide in detail the proposed construction; information such as the total square footage or lineal feet of the proposed completed project; the number of stories; the materials to be used, infrastructure in place or needed and other details to help us understand the project. (2000 characters)

(II.H Construction Detail Continued)

2. How many housing units will be newly constructed? (50 characters)

3. How many housing units will be rehabilitated? (50 characters)

4. What is the square footage of each housing unit? (200 characters)

5. What is the number of bedrooms/baths for each housing unit? (200 characters)

6. How many units will be available to people with special needs (Elderly, Disabled, Homeless, or People with HIV)? (200 characters)

7. Describe how the project will be designed and built to provide accessibility to persons with disabilities. Include information about “visitability” on non-accessible units. (400 characters)

8. Describe in detail the green building, energy conservation and use attributes of the proposed project. What fuel sources will be used for heating and cooling? What, if any, alternative energy sources will be employed? Will the project participate in an externally monitored energy efficiency program (e.g. Energy Star)? Please provide details. (1000 characters)

9. If the project is a rehabilitation project, please describe historic features of the property. How will the project comply with the requirements of the National Historic Preservation Act? Does the project include property that is in or eligible for the National Register of Historic Places? (400 characters)

Please attach the following:

- Floor Plan(s)
- Site Plan
- Elevation drawings of finished building(s), and annotated sketches to emphasize design features that you consider particularly attractive.
- Photos of current street views to demonstrate neighborhood compatibility.

II.I. Lead-Based Paint (Repair/Rehab projects only)

1. Describe in detail how you plan to address lead-based paint testing and abatement or hazard control on any property built before 1978. (200 characters)

II.J. Housing Affordability, Marketing and Supportive Services

1. What are the proposed rents or sales prices for completed housing units per unit by number of bedrooms? Estimate utility costs. (400 characters)

2. Explain in detail your process for marketing to ensure an adequate pool of income-eligible renters or buyers. (400 characters)

3. Explain in detail your process for marketing to ensure an adequate pool of special-needs (Elderly, Disabled, Homeless, Persons with HIV/AIDS) rents or buyers. (400 characters)

4. For how long will the housing remain affordable to persons of low and moderate income? Describe in detail how you will ensure long-term affordability of housing units, including subsidy recapture, equity sharing, buy-back options, etc. (400 characters)

(II.J. Housing Affordability, Marketing, and Supportive Services Continued)

5. What, if any services will be coordinated with the project that will help ensure occupants' long-term housing success? Please describe. (400 characters)

6. What services will be coordinated with the project that will help ensure the long-term housing success for special needs occupants (Elderly, Disabled, Homeless, or People with HIV/AIDS)? Please describe. (400 characters)

II.K. Infrastructure and Public Facilities (this information not required for housing development and rehab projects). Attach maps to illustrate information below.

1. How many persons will have direct access to improved infrastructure or transportation accessibility? (100 characters)

2. What quantity of infrastructure will be added/improved (e.g. LF of waterline, sewer line, etc.) (400 characters)

II.L. Outcomes

Outcomes are measurable results or achievements that show improvement for a targeted beneficiary based on the actions of the program/project.

1. What outcomes do you expect to obtain from this program? (up to 3)

Outcome A:

Outcome B:

Outcome C:

2. How many people/households will achieve each outcome? See Tables 2a & 2b for guidance on counting households or people.

Number achieving Outcome A:

People: **OR** Households:

Number achieving Outcome B:

People: **OR** Households:

Number achieving Outcome C:

People: **OR** Households:

3. How will you measure these outcomes? (600 characters)

II.L. Targets

1. **Client Demographics.** Please show numbers of clients, **not percentages**, in each category. Current income limits are on page VIII of the general instructions. For CDBG Applications, numbers should reflect Asheville residents only.

NOTE:

1. Totals must match people/households listed in II L.
2. For existing programs, the total must be consistent with data you submitted for the CAPER.

Table 2a: Client Demographics – PERSONS

Use if applying for:

- Public Facilities or Infrastructure

Number of <u>Persons</u> by Income Group					
Year	<30% of median	31-50% of median	51-80% of median	>80% of median	Total
2010/2011 (actual)					
2011/2012 (as now projected)					
2012/2013 (target)					

Table 2b: Client Demographics – HOUSEHOLDS

Use if applying for:

- Emergency Repair
- Rental or Owner Occupied Rehabilitation
- New Construction for Homeownership or Rental

Number of <u>Households</u> Served, by Income Group					
<i>(To be completed for Emergency Repair, Rehab, New Construction projects only.)</i>					
Year	<30% of median	31-50% of median	51-80% of median	>80% of median	Total
2010/2011 (actual)					
2011/2012 (as now projected)					
2012/2013 (target)					

Table 2c: CBDG Area Benefit Activities only (Public Infrastructure, Public Facilities)*

Street	Census Tract	Block Group	Total Persons`	#LMI Persons

*If assistance is needed, please call CD staff

Table 2d: HOME-Eligible Production Underway or Planned

Project Name	Expected Number of HOME-eligible units in City of Asheville ONLY			Unit type: S/F or M/F	Expected completion date	Amount project receives in CDBG project delivery or HOME-funded developer fees
	New Constr.	Rehab	Down-payment assistance			
						\$
						\$
						\$
						\$
Unduplicated Total:						\$

II.M. Project Design and Timetables

<p>1. Who is eligible for this program? How will you determine client eligibility? (400 characters)</p>
<p>2. How will potential clients learn about your program? (400 characters)</p>
<p>3. What is the application process for clients? (400 characters)</p>

II.N. Capacity

1. What qualifies your agency to undertake the proposed project? (1000 characters)

2. What other agencies in the community develop complementary or similar projects or provide complementary or similar services? (600 characters)

3. How will you ensure collaboration and minimize duplication of services? (600 characters)

4. What other programs in your agency will support the intended beneficiaries of this project? (400 characters)

5. What are your plans to staff the program? Please describe the function and qualifications for each staff person having responsibility for program planning and delivery. (1000 characters)

Section III
Financial Information

III.A. Financial Information for Proposed Program

1. Have you been funded with CDBG or HOME grants in the past?

Yes No

2. How do you specifically intend to use these grant funds? (600 characters)

3. What is your operational and funding plan of the next 3 to 5 years? How would you operate this program without CDBG or HOME funds? (400 characters)

III.B. Operating Budget

1. What is your agency's fiscal year? / / through / /
2. Does this program budget cover significant activities outside Asheville? Yes
 No

If YES:

- Please indicate where activities will be provided:
(list all cities and/or counties this program will serve)
- Please estimate the percentage of program activities provided **in** Asheville:
 %

3. What is your estimated total agency budget for FY2011? \$
4. What is the total estimated budget for this program? \$

Please complete Attachment A:

Tab Agency Budget

Tab Sources and Uses

Tab Staff Table

Tab Program Income

If you do not use our fiscal year (July 1-June 30) for your budgeting, please amend the column heading

**SECTION IV
AGENCY MANAGEMENT**

(Consortium Member Governments do not need to complete this section)

IV.A Organization

1. What is your organization mission statement?
2. Incorporation date (Month and Year)? / /
3. Number of staff employed (full time equivalents)

Note: If funded, your agency must submit your most recent personnel policy, purchasing policy, code of conduct, indirect cost allocation plan, and ADA policy.

IV.B. Board of Directors

1. How many board members should you have according to your by-laws?
2. How many do you actually have at this date?
3. How often does your board meet?
4. What was the actual attendance at each of the last three regular Board meetings?
 - a. Date: / / # attended
 - b. Date: / / # attended
 - c. Date: / / # attended
5. Have you failed to reach a quorum at any Board meetings in the last 12 months? Yes No
IF YES: how many times?
6. Do any of your organization's staff members serve on your board? Yes No
IF YES: What is the job title of the staff member(s) on the board?
7. What efforts do you make to ensure that your board represents the community it serves?

SECTION V
DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST

Are any Board Members or employees, or members of their immediate families, or their business associates;

1. Employees of or closely related to employees of the City's Planning and Development Department?
 YES NO
2. Members of or closely related to Members of City Council? YES NO
3. Current beneficiaries of the program for which funds are requested? YES
 NO
4. Paid providers of goods or services to the program or having other financial interest in the program?
 YES NO
5. Creditors (i.e. persons who have made loans to the agency or provided loan collateral)?
 YES NO

If you have answered YES to any question, **please attach a full explanation**. The existence of a potential conflict of interest does not necessarily make your agency ineligible for funding, but the existence of an **undisclosed** conflict may result in the termination of any grant awarded.