



City of San Antonio
Department of Planning & Community Development
Division of Grants Monitoring and Administration

APPLICATION

for

CHDO Operating Expense Funding

Release Date: Monday, August 22, 2016
Applications Due: Friday, September 09, 2016

SUBMISSION CHECKLIST

Please ensure that all yellow highlighted areas have been selected and responses to the narrative portions have been attached. Incomplete applications will not be considered.

Project Name:

<input type="checkbox"/>	Section 1 - General Information
<input type="checkbox"/>	Organizational Eligibility
<input type="checkbox"/>	Section 2 - CHDO Certification Checklist
<input type="checkbox"/>	Attachment A Charter
<input type="checkbox"/>	Attachment B Articles of Incorporation
<input type="checkbox"/>	Attachment C 501 (c)(3) or (4)
<input type="checkbox"/>	Attachment D Group Exemption Letter under Section 905 from the IRS that includes the CHDO
<input type="checkbox"/>	Attachment E By-Laws
<input type="checkbox"/>	Attachment F Resolutions
<input type="checkbox"/>	Attachment G Action Plan for Housing Development
<input type="checkbox"/>	Attachment H Board Minutes from the past six (6) months
<input type="checkbox"/>	Attachment I Memorandum of Understanding
<input type="checkbox"/>	Attachment J Narrative on Committee Structure for Oversight
<input type="checkbox"/>	Attachment K Written Statement by Board President
<input type="checkbox"/>	Attachment L Written Statement of Operating Procedures Approved by the Governing Body
<input type="checkbox"/>	Attachment M Current Plan Narrative Statement
<input type="checkbox"/>	Attachment N Community Reputation Evidence
<input type="checkbox"/>	Attachment O Statement of Revenues & Functional Expenses (P&L)
<input type="checkbox"/>	Attachment P Statement of Net Assets (Balance Sheet)
<input type="checkbox"/>	Attachment Q Statement of Cash Flows
<input type="checkbox"/>	Attachment R Resumes
<input type="checkbox"/>	Attachment S Consultant Contracts
<input type="checkbox"/>	Attachment T Current Fiscal Year Operational Budget
<input type="checkbox"/>	Attachment U Statement of Current and Planned Affordable Housing Activities
<input type="checkbox"/>	Attachment V Board Member Certification
<input type="checkbox"/>	Attachment W Board Status Certification
<input type="checkbox"/>	Attachment X Certification of Signatures

SUBMISSION CHECKLIST

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Project Name:

SELECT	Section 3 - Experience
SELECT	Experience Self Score
SELECT	Experience Supplement
SELECT	Exhibit 1 - Organizational Chart
SELECT	Exhibit 2 - Development Team Resumes
SELECT	Exhibit 3 - Independent Audit Finding Narrative
SELECT	Exhibit 4 - Last Two (2) Years of Independent Audits
SELECT	Exhibit 5 - Homebuyer Education Curriculum
SELECT	Section 4 - Proposed Plan
SELECT	Proposed Plan Self Score
SELECT	Exhibit 6 - HUD Form 935.2B
SELECT	Exhibit 7 - Target Area Map(s)
SELECT	Exhibit 8 - Site Characteristics/Amenities Maps
SELECT	Section 5 - Proposed Timeline
SELECT	Section 6 - Financial Need
SELECT	Exhibit 9 - Financial Need Narrative
SELECT	Section 7 - Operating Budget Matrix
SELECT	Exhibit 10 - CHDO Operating Expense Narrative
SELECT	Section 8 - Financial Indicators
SELECT	Section 9 - Narrative Responses
SELECT	Exhibit 11 - Executive Summary
SELECT	Exhibit 11a - Executive Summary for Previous Project
SELECT	Section 10 - DUNs Verification
SELECT	Section 11 - System for Award Management (Debarment)
SELECT	Exhibit 12 - Proof of Debarment Verification
SELECT	Section 12 - Contract Disclosure
SELECT	Exhibit 13 - Discretionary Contract Disclosure Form
SELECT	Section 13 - Conflict of Interest
SELECT	Exhibit 14 - Conflict of Interest Form
SELECT	Section 14 - Signature Page

GENERAL INFORMATION

Name of Organization
Address: City, State, Postal Code
Fax Number
Office Phone Number
Federal Tax I.D. Number
DUNS Number

Name of Authorized Signer
Title
Direct Phone Number
Email Address

Name of Point of Contact
Title
Direct Phone Number
Email Address

REFERENCES

REFERENCE 1

Company Name/Firm
Contact Name & Title
Address: City, State, Zip Code
Telephone Number
Email Address
Type of Service

REFERENCE 2

Company Name/Firm
Contact Name & Title
Address: City, State, Zip Code
Telephone Number
Email Address
Type of Service

REFERENCE 3

Company Name/Firm
Contact Name & Title
Address: City, State, Zip Code
Telephone Number
Email Address
Type of Service

ORGANIZATIONAL ELIGIBILITY

1. Did the organization receive CHDO Operating Funds from the City of San Antonio under the RFA issued *November 25, 2014*
2. Did the organization receive CHDO Operating Funds from the City of San Antonio under the RFA issued *June 19, 2015*
3. Was the organization awarded CHDO set-aside funds from the City of San Antonio under the RFA issued *June 18, 2015*

Please complete each section above.

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Eligibility Status:

CHDO CERTIFICATION CHECKLIST

Please complete the yellow highlighted areas on the checklist. Include the requested information in the attachments indicated. Articles of Incorporations, By-Laws, Charters, Memorandums of Understanding, Contracts, Certifications and Resolutions must be signed and dated by the Board President or other authorized signer. In addition, please highlight the relevant sections of each document when responding to the questions on this checklist. Incomplete applications will not be considered.

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Checklist Organizational Status and Mission	Criteria Met																		
<p>1. The nonprofit is organized under state or local laws, as evidenced by Attachment A or B:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> <td>A Charter, OR</td> <td style="width: 20%; text-align: right;">Page Number(s):</td> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>Articles of Incorporation</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> </table> </td> <td style="width: 40%;"></td> </tr> </table>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> <td>A Charter, OR</td> <td style="width: 20%; text-align: right;">Page Number(s):</td> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>Articles of Incorporation</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> </table>		A Charter, OR	Page Number(s):			Articles of Incorporation	Page Number(s):			SELECT								
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<p>2. The nonprofit has a tax exemption ruling from the Internal Revenue Service (IRS) under Section 501(c), as evidenced by Attachment C or D:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> <td>A 501 (c)(3) or (4) Certificate from the IRS, OR</td> <td style="width: 20%; text-align: right;">Page Number(s):</td> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>A group exemption letter under Section 905 from the IRS that includes the CHDO.</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> </table> </td> <td style="width: 40%;"></td> </tr> </table>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> <td>A 501 (c)(3) or (4) Certificate from the IRS, OR</td> <td style="width: 20%; text-align: right;">Page Number(s):</td> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>A group exemption letter under Section 905 from the IRS that includes the CHDO.</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> </table>		A 501 (c)(3) or (4) Certificate from the IRS, OR	Page Number(s):			A group exemption letter under Section 905 from the IRS that includes the CHDO.	Page Number(s):			SELECT								
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<p>3. The nonprofit's primary purpose is the provision of low-and moderate income housing.</p> <p>As Attachment A, B, E, or F, provide and highlight the appropriate area in your:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> <td>A Charter, OR</td> <td style="width: 20%; text-align: right;">Page Number(s):</td> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>Articles of Incorporation, OR</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>By-laws, OR</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>Resolutions</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> </table> </td> <td style="width: 40%;"></td> </tr> </table>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> <td>A Charter, OR</td> <td style="width: 20%; text-align: right;">Page Number(s):</td> <td style="width: 15%; background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>Articles of Incorporation, OR</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>By-laws, OR</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> <tr> <td style="background-color: #ffff00; height: 15px;"></td> <td>Resolutions</td> <td style="text-align: right;">Page Number(s):</td> <td style="background-color: #ffff00; height: 15px;"></td> </tr> </table>		A Charter, OR	Page Number(s):			Articles of Incorporation, OR	Page Number(s):			By-laws, OR	Page Number(s):			Resolutions	Page Number(s):			SELECT
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<p>4. The organization has produced a strategic plan that specifies an action plan for housing development, as provided in Attachment G.</p>	SELECT																		

CHDO CERTIFICATION CHECKLIST

Board Composition	Criteria Met									
<p>5. At least 1/3 of board membership consists of residents of low-income neighborhoods, other low-income community residents, or elected representatives of low-income neighborhood organizations, as evidenced by:</p> <p><input style="width: 50px; height: 15px;" type="text"/> Completion of Board Status Certification as Attachment W</p> <p>AND</p> <p>Highlight the relevant text as Attachment E, A, or B, in one of the following:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><input style="width: 50px; height: 15px;" type="text"/> By-laws, OR</td> <td style="width: 20%;">Page Number(s):</td> <td style="width: 20%;"><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> A Charter, OR</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> </table>	<input style="width: 50px; height: 15px;" type="text"/> By-laws, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> A Charter, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	SELECT
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<p>6. An organization may be chartered by a State or local government, however, the State or local government may not appoint:</p> <p>(1) more than one-third of the membership of the organization's governing body;</p> <p>(2) the board members appointed by the State or local government may not, in turn, appoint the remaining two-thirds of the board members; and</p> <p>(3) no more than one-third of the governing board members may be public officials.</p> <p>As Attachment E, A, or B highlight the relevant text in one of the following which describes the process for selecting the remaining 2/3 members:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><input style="width: 50px; height: 15px;" type="text"/> By-laws, OR</td> <td style="width: 20%;">Page Number(s):</td> <td style="width: 20%;"><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> A Charter, OR</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> </table>	<input style="width: 50px; height: 15px;" type="text"/> By-laws, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> A Charter, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	SELECT
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<p>7. No more than one-third of the governing board members may be public officials (including any employees of the PJ) or appointed by public officials, and government-appointed board members may not, in turn, appoint any of the remaining board members. Provide as Attachment E, A, or B and highlight relevant areas in your organization's:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><input style="width: 50px; height: 15px;" type="text"/> By-laws, OR</td> <td style="width: 20%;">Page Number(s):</td> <td style="width: 20%;"><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> A Charter, OR</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> </table>	<input style="width: 50px; height: 15px;" type="text"/> By-laws, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> A Charter, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	SELECT
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<p>8. If the CHDO is sponsored or created by a for-profit entity, the for-profit entity may not appoint more than one-third of the membership of the CHDO's governing body, and the board members appointed by the for-profit entity may not, in turn, appoint the remaining two-thirds of the board members. As Attachment A or B, highlight the relevant text in one of the following which describes the process for selecting the remaining 2/3 members:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><input style="width: 50px; height: 15px;" type="text"/> A Charter, OR</td> <td style="width: 20%;">Page Number(s):</td> <td style="width: 20%;"><input style="width: 100%; height: 15px;" type="text"/></td> </tr> <tr> <td><input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation</td> <td>Page Number(s):</td> <td><input style="width: 100%; height: 15px;" type="text"/></td> </tr> </table>	<input style="width: 50px; height: 15px;" type="text"/> A Charter, OR	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	<input style="width: 50px; height: 15px;" type="text"/> Articles of Incorporation	Page Number(s):	<input style="width: 100%; height: 15px;" type="text"/>	SELECT			
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CHDO CERTIFICATION CHECKLIST

9. Board Representation

SELECT

There is at least one Board member that resides in each of the organization's proposed CHDO geographic service area(s), as evidenced by **Attachment W**:

Completion of Certification of Board Status Form

10. Stability

SELECT

There has been stability/continuity of board members over the last several years, as evidenced by **Attachment W**:

Completion of Certification of Board Status Form

11. Development Oversight

SELECT

The board has a committee structure or other means of overseeing planning and development, as evidenced by **Attachment J**:

Documentation of committee structures or other means of development oversight

12. Board Skills

SELECT

Board members have professional skills directly relevant to housing development (e.g., real estate, legal, architecture, finance, management), as evidenced by **Attachment W**:

Completion of Certification of Board Status Certification

13. Decision-making

SELECT

The board has the ability to make timely decisions, as evidenced by **Attachment H**:

Board minutes from the past six (6) months

CHDO CERTIFICATION CHECKLIST

Sponsorship/Independence	Criteria Met									
14. The organization is not controlled, nor receives directions from individuals or entities seeking profit from the organization, as evidenced by Attachment E or I:	SELECT									
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><input type="text"/> The organization's By-laws, OR</td> <td style="width: 20%; border: none;">Page Number(s):</td> <td style="width: 20%; border: 1px solid black; background-color: #ffffcc;"></td> </tr> <tr> <td style="border: none;"><input type="text"/> A Memorandum of Understanding</td> <td style="border: none;">Page Number(s):</td> <td style="border: 1px solid black; background-color: #ffffcc;"></td> </tr> </table>	<input type="text"/> The organization's By-laws, OR	Page Number(s):		<input type="text"/> A Memorandum of Understanding	Page Number(s):					
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15. Is the organization sponsored or created by a for-profit entity?	SELECT									
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%; border: none;"><input type="text"/> Yes</td> <td style="width: 40%; border: none;"><input type="text"/> No</td> </tr> </table>	<input type="text"/> Yes	<input type="text"/> No								
<input type="text"/> Yes	<input type="text"/> No									
If yes, an organization may be sponsored or created by a for-profit entity, however the for-profit entity's primary purpose may not include the development or management of housing, as evidenced by Attachment E:	SELECT									
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><input type="text"/> For-profit organization's By-laws</td> <td style="width: 20%; border: none;">Page Number(s):</td> <td style="width: 20%; border: 1px solid black; background-color: #ffffcc;"></td> </tr> </table>	<input type="text"/> For-profit organization's By-laws	Page Number(s):								
<input type="text"/> For-profit organization's By-laws	Page Number(s):									
AND										
If sponsored or created by a for-profit entity, the organization is free to contract for goods and services from vendor(s) of its own choosing, as evidenced by Attachment E, A, or B:	SELECT									
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<input type="text"/> Articles of Incorporation	Page Number(s):									
16. If sponsored by a religious organization, the organization is a separate secular entity from the religious organization, with membership available to all persons regardless of religion or membership criteria, as evidenced by Attachment E, A, or B:	SELECT									
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><input type="text"/> By-laws, OR</td> <td style="width: 20%; border: none;">Page Number(s):</td> <td style="width: 20%; border: 1px solid black; background-color: #ffffcc;"></td> </tr> <tr> <td style="border: none;"><input type="text"/> A Charter, OR</td> <td style="border: none;">Page Number(s):</td> <td style="border: 1px solid black; background-color: #ffffcc;"></td> </tr> <tr> <td style="border: none;"><input type="text"/> Articles of Incorporation</td> <td style="border: none;">Page Number(s):</td> <td style="border: 1px solid black; background-color: #ffffcc;"></td> </tr> </table>	<input type="text"/> By-laws, OR	Page Number(s):		<input type="text"/> A Charter, OR	Page Number(s):		<input type="text"/> Articles of Incorporation	Page Number(s):		
<input type="text"/> By-laws, OR	Page Number(s):									
<input type="text"/> A Charter, OR	Page Number(s):									
<input type="text"/> Articles of Incorporation	Page Number(s):									
Relationship and Service to the Community	Criteria Met									
17. The organization has a history of serving the community within which housing to be assisted with HOME funds is to be located, as evidenced by Attachment K:	SELECT									
<table style="width: 100%; border: none;"> <tr> <td style="width: 100%; border: none;"><input type="text"/> Statement signed by the Board President that details at least one year of experience in serving each community, OR</td> </tr> <tr> <td style="border: none;"><input type="text"/> For newly created organizations formed by local churches, service or community organizations, a statement signed by the Board President that details that its parent organization has at least one year of experience in serving each community for which Certification is sought.</td> </tr> </table>	<input type="text"/> Statement signed by the Board President that details at least one year of experience in serving each community, OR	<input type="text"/> For newly created organizations formed by local churches, service or community organizations, a statement signed by the Board President that details that its parent organization has at least one year of experience in serving each community for which Certification is sought.								
<input type="text"/> Statement signed by the Board President that details at least one year of experience in serving each community, OR										
<input type="text"/> For newly created organizations formed by local churches, service or community organizations, a statement signed by the Board President that details that its parent organization has at least one year of experience in serving each community for which Certification is sought.										
18. The organization provides a formal process for low-income, program beneficiaries to advise the organization in decisions regarding design, siting, development, & management of all HOME-assisted affordable housing projects. As Attachment E, F, or L highlight the relevant text in one of the following:	SELECT									

CHDO CERTIFICATION CHECKLIST

	The organization's By-laws, OR	Page Number(s):	
	Resolutions, OR	Page Number(s):	
	A written statement of operating procedures approved by the governing body.		

CHDO CERTIFICATION CHECKLIST

19. Needs

SELECT

Current plans are well grounded in an understanding of current housing conditions, housing needs, and need for supportive services, as evidenced by **Attachment M**:

Narrative statement of any current plans with supporting analysis of the local housing market and housing needs of low-income households.

20. Relations

SELECT

The organization has a positive reputation and a strong relationship with its community, as evidenced by **Attachment N**:

Supporting documentation

Financial Management and Capacity

Criteria Met

21. Please submit your organization's most recent year-to-date interim financial statement **Attachment O, P, and Q** providing at a minimum:

SELECT

- 1) Statement of Revenues & Functional Expenses (P&L),
- 2) Statement of Net Assets (Balance Sheet), AND
- 3) Statement of Cash Flows

22. The Division of Grants Monitoring and Administration requires a reconciled interim financial statement for a period ending within 75 days of the submittal date to conform to the financial accountability standards of 24 CFR 84.21, "Standards for Financial Management Systems". No part of its net earning inure to the benefit of any member, founder, contributor, or individual, as evidenced by **Attachment A or B**:

SELECT

A Charter, OR

Page Number(s):

Articles of Incorporation

Page Number(s):

Development Capacity

Criteria Met

23. The organization has a demonstrated capacity for carrying out activities assisted with HOME funds, as evidenced by **Attachment R and S**:

SELECT

Resumes and/or statements that describe the experience of key staff members who have successfully completed projects similar to those to be assisted with HOME funds. Please use the attached Experience Certification Form, OR

*Contract(s) with individuals who have housing experience similar to projects to be assisted with HOME funds to train appropriate key staff of the organization. The contract shall include the training plan and activities to be accomplished. Please include attached Experience Certification Form and a copy of the executed contract.

****The qualifications and experience of consultants is no longer relevant unless the organization is in its first year of operation and it is using a consultant to train its staff.***

CHDO CERTIFICATION CHECKLIST

Housing as Primary Purpose

Criteria Met

24. Certification is available only to organizations whose primary purpose is to provide and develop affordable housing. Please provide as **Attachment T and U**, a copy of the following:

SELECT

Copy of current fiscal year's full operating budget categorized by program

AND

Description of current and planned affordable housing activity

BOARD MEMBER CERTIFICATION

Each board member representing the interests of low-income families in the Applicant's target community must complete this certification. Please maintain a copy of this in your files and send in a copy to GMA. These certifications will be reviewed with your application.

Board Member Name: _____

I certify that I am a current member in good standing of the governing board for: _____ (name of the Applicant organization) and that I represent the interests of low-income families in the Applicant's target community.

BOARD MEMBER SIGNATURE: _____ Date: _____

Please Check and Complete One of the Following:

<p>_____ I am a low-income resident of _____, the Applicant's target community.</p> <p><i>In order to qualify under this criteria, the board member must be a low-income resident of a community that the CHDO is certified to serve. Low-income is defined as 80% or less of area median family income.</i></p>
<p>_____ I am a resident of a low-income neighborhood in _____, the Applicant's target community.</p> <p><i>In order to qualify under this criterion, the board member must live in a low-income neighborhood where 51% or more of the residents are low-income. The board member does not have to be low-income. Neighborhood means a geographic location designated in comprehensive plans, ordinances, or other local documents as a neighborhood, village, or similar geographical designation that is within the boundary but does not encompass neighborhood, village, or similar geographical designation that is within the boundary but does not encompass the entire area of a unit of general local government.</i></p>
<p>_____ I am an elected representative of _____ (insert name of neighborhood organization), a low-income neighborhood organization within _____, the Applicant's target community.</p> <p><i>In order to qualify under this criterion, the board member must be elected by a low-income neighborhood organization to serve on the CHDO Board. The organization must be composed primarily of resident of the low-income neighborhood and its primary purpose must be to serve the interests of the neighborhood residents. Such organizations might include block groups, neighborhood associations, and neighborhood watch groups.</i></p> <p>The group must be a neighborhood organization and IT MAY NOT BE THE CHDO ITSELF. If the board member is qualifying under this criterion, please attach a copy of signed resolution from the neighborhood organization naming the individual as their representative on the CHDO.</p>

Under penalty of perjury, I certify, to the best of my knowledge, that the information presented in this certification is true and accurate. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination this application and funding.

BOARD MEMBER SIGNATURE: _____ Date: _____

Under penalty of perjury, I certify, to the best of my knowledge, that the information presented in this certification is true and accurate. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination this application and funding.

BOARD PRESIDENT SIGNATURE: _____ Date: _____

BOARD STATUS CERTIFICATION

Applicants must complete the following Certification of Board Status and submit it along with their application for CHDO certification. Please list each board member by name, then place an "X" indicating the representation that member brings to the Board.

Please list only current or approved board members. Do not list prospective board members who have not been approved to join the board.

USE ADDITIONAL PAGES AS NECESSARY

Board Member's name and residential address (City, State Zip Code)	Affiliation(s)				Number of months as a Board Member	Board Member's occupation and place of employment	Board Member's areas of expertise or experience
	Low Income Community	Public Institution	Religious Organization	For Profit Organization			

Under penalty of perjury, I certify, to the best of my knowledge, that the information presented in this certification is true and accurate. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination this application and funding.

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	Low Income Community	Public Institution	Religious Organization	For Profit Organization			

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BOARD PRESIDENT SIGNATURE

DATE

CERTIFICATION OF SIGNATURES AND ADDRESSES

The Board of Directors of _____ met on the _____ day of _____, _____ and authorized the below named individuals to sign contracts, amendments, disbursement requests and other documents requiring such signatures as a part of the CHDO certification program:

Name & Title	Signature
Name & Title	Signature
Name & Title	Signature

In addition, the following individuals have been authorized to serve as the primary and secondary contacts for the organization for matters relating to the CHDO Certification Program. Additionally, include the corresponding address to which all correspondence and payments to the organization shall be sent.

Category	Primary Contact	Secondary Contact
Name:		
Title:		
Address:		
Phone:		
Email:		

Changes to authorized signatures, contact persons or address shall be made in writing to the City's Department of Planning and Community Development.

Under penalty of perjury, I certify, to the best of my knowledge, that the information presented in this certification is true and accurate. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination this application and funding.

BOARD PRESIDENT SIGNATURE

DATE

EXPERIENCE SELF-SCORE

Please complete this section by selecting the appropriate options that pertain to your project within the **yellow shaded** areas. Please ensure appropriate documentation and/or attachments are included with your submission. Incomplete applications will not be considered. **This section has a scoring potential of 110 points.**

1. Experience of the Organization

- A No experience in affordable single-family housing
- B 1-2 years experience in affordable single-family housing
- C 3-6 years experience in affordable single-family housing
- D 7-10 years experience in affordable single-family housing
- E 10+ years experience in affordable single-family

Total	0
SELECT	

2.

Development Team Experience - How many critical Development Team positions are filled with a permanent full-time employee? Development Team critical positions include the President/CEO, Chief Financial Officer, Development Director, Construction Manager, Housing Counselor, and Lending Specialist. Consultants are not considered permanent full time employees.

- A All six Development Team positions are filled.
- B Five Development Team positions are filled.
- C Four Development Team positions are filled.
- D Three Development Team positions are filled.
- E Two Development Team positions are filled.
- F One Development Team positions are filled.
- G No Development Team positions are filled.

**Attach organizational chart as Exhibit 1.*

**Attach resumes of Development Team as Exhibit 2.*

Total	0
SELECT	

3. Development Team Experience - Does the development team have at least five years of experience in their current capacity?

- A All six Development Team members have five or more years experience in affordable single-family housing development.
- B Five Development Team members have five or more years experience in affordable single-family housing development.
- C Four Development Team members have five or more years experience in affordable single-family housing development.
- D Three Development Team members have five or more years experience in affordable single-family housing development.
- E Two Development Team members have five or more years experience in affordable single-family housing development.
- F One Development Team member has five or more years experience in affordable single-family housing development.
- G No Development Team members have five or more years experience in affordable single-family housing development.

Total	0
SELECT	

4. Has your organization been issued any findings or concerns by an independent auditing firm in the last two years? If yes, please describe how your organization has resolved these findings? All respondents must submit their financial audits for the last two fiscal years.

Total	0
-------	---

Select

** Attach audit finding narrative as Exhibit 3.*

**Attach independent audit for the last two years as Exhibit 4.*

5. Has the organization received HOME funding within 24 months of a CHDO Operating Funds award from the City of San Antonio in the past?

Total	0
-------	---

Select

6. Provide the number of single-family housing units developed by your organization within the past five years.

Total	0
-------	---

SELECT

A 100 + Units

B 80 to 99 Units

C 60 to 79 Units

D 59 or less Units

E None

7. If your organization has received HOME-funding from any source, how much has the organization been awarded in the past four years?

Total	0
-------	---

SELECT

A \$1,000,000+

B \$750,000 to \$999,999

C \$500,000 to \$749,999

D Less than \$499,999

E Organization has not received HOME funding in the past 5 years.

8. If your organization was awarded HOME-funding from any source in the past four years, what percentage of funds awarded have been reimbursed to the CHDO?

Total	0
-------	---

SELECT

A 100%

B 80-99%

C 60-79%

D 59% or below

E No funds were reimbursed or contract was cancelled.

F Organization has not received HOME funding in the past five years.

9. Will your housing counselor provide the following services?

Total	0
-------	---

SELECT

A No Counseling

B Pre - Purchase Counseling Only

C Pre and Post Purchase Counseling

**Attach homebuyer education curriculum and materials as Exhibit 5.*

Total Score:	0
--------------	---

EXPERIENCE SUPPLEMENT

Provide the Number of Single-Family Housing Units Developed in the Past Four Years.

Year	Development Name	Total Development Cost	Unit Count
Total			0

Prior Funding

Provide Requested Information for any HOME Funds Received Through the City of San Antonio, State of Texas or any Other Entity for the Last Four Years.

Year	Project Name	Awarding Entity	Award	Expended	%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
					0%
Total			\$0	\$0	0%

PROPOSED PLAN SELF-SCORING

Please complete this section by selecting the appropriate options that pertain to this project within the yellow shaded areas. Please ensure appropriate documentation and/or attachments are included with this submission. Incomplete applications will not be considered. This section has a total of 95 points.

0

Grand Total 0

1. Accessible Housing Design Standards

Total 0

A Will this project have at least one 36-inch door entrance with an accessible route?

SELECT

B Will this project include interior doors that are no less than 32-inches wide; except for a door that provides access to a closet of fewer than 15 sq ft in area?

SELECT

C Will this project include hallways with a width of at least 36-inches wide and leveled with ramp or beveled changes at each door threshold?

SELECT

D Will the bathrooms have walls reinforced around the toilet, bathtub and shower, for future grab bar installation?

SELECT

E Will each electrical panel, light switch or thermostat be mounted no higher than 48-inches above the floor?

SELECT

F Will each electrical plug or other receptacle be at least 15 inches from the finished floor?

SELECT

G Will an electrical panel be located outside the dwelling unit, between 18 inches and 42 inches above the ground and served by an accessible route?

SELECT

H Will all hardware installed to open/close doors and operate plumbing fixtures be equipped with lever handles?

SELECT

2. Will this project meet one of the following BuildSAGreen Level standards?

Total 0

A Project does not meet one of these standards

SELECT

B BSAG New Construction Level 1 – High Performance.

C BSAG New Construction Level 2 – Solar Ready.

D BSAG New Construction Level 3 – Solar Home.

Please see link to Build SA Green website.

<http://buildsagreen.org/old-pages/options-for-builders/family-of-programs/new-construction/>

3. Affirmative Marketing Plan

Total 0

A Does the marketing material display the Equal Housing Opportunity logo or the phrase "Equal Housing Opportunity" along with the accessibility logo?

SELECT

B Does CHDO staff have relevant training in regards to Fair Housing regulations?

SELECT

C Is CHDO staff required to participate in a training program that includes marketing, outreach, data collection, reporting, and record keeping as it pertains to Affirmative Fair Housing?

SELECT

D Has HUD Form HUD-935.2A been completed and attached?

SELECT

**Complete HUD Form 935.2B and attach as Exhibit 6*

<http://portal.hud.gov/hudportal/documents/huddoc?id=935-2b.pdf>

4. Is this development in one of the following target areas?

Total 0

A ReNewSA target areas:

<http://www.sanantonio.gov/Portals/0/Files/GMA/Guidance/REnewSA-MAPS.pdf>

SELECT

B Inner City Reinvestment/Infill Policy (ICR/IP) area:

<http://www.sanantonio.gov/Portals/0/Files/CCDO/ICRIP%20Map.pdf>

SELECT

C Eastside CHOICE Neighborhood Transformation Plan:

<https://webapps1.sanantonio.gov/agendabuilder/RFCAMemo.aspx?RID=10468>

SELECT

D Additional strategic plans:

<http://www.sanantonio.gov/planning/npud/library.aspx>

SELECT

**Attach target area map(s) and mark project location as Exhibit 7.*

5. Housing Policy Requirements

Total 0

A Does the proposed plan require the homebuyer's income not to exceed 80% or below of area median income?

SELECT

B Does CHDO program policy require homebuyers to be US Citizen or legal residents?

SELECT

C Does the CHDO's program policy require homebuyers to occupy their home as a primary residence?

SELECT

D Will this housing development be within San Antonio City Limits?

SELECT

E Are homebuyers required to complete a certified homebuyer counseling class?

SELECT

F Will an initial cash investment of no less than \$500.00 will be collected from applicant to go toward purchase of home?

SELECT

G Are all new homes properly permitted and inspected per City Code?

SELECT

H Applicant meets requirement of not owning a home during the three year period prior to application?

SELECT

6. Project Readiness

Total 0

A All entitlements have been secured per COSA requirements.

SELECT

<http://www.sanantonio.gov/DSD/Constructing/Land.aspx#146501290-land-entitlements>

B CHDO has site control of the property.

SELECT

C Other sources of financing committed.

SELECT

D Phase I (and Phase II if required) Environmental Report (1) completed.

SELECT

E CHDO has an existing loan underwriting regimen.

SELECT

8. Project Site Characteristics and Transit Amenities

Total 0

- A Project meets land use density requirements at time of application. SELECT
- B Project meets zoning requirements at time of application. SELECT
- C Project is consistent with target area, neighborhood and/or sector plan at time of application. SELECT
- D Project is located within one quarter (1/4) mile of bus station or stop. SELECT
- E Project is located within a 20 minute bus commute of a major employment center. SELECT
- F Project is located within one quarter (1/4) mile of a public park. SELECT
- G Project is located within one quarter (1/4) mile of a book-lending library. SELECT
- H Project is located within one quarter (1/4) mile of a full scale grocery store of 25,000 sq ft or more where staple foods, fresh produce and fresh meats are sold. SELECT
- I Project is located within one quarter (1/4) mile of a community, senior or other similar facility that serves populations similar to those residing in the project. SELECT
- J Project is located within one-half (1/2) mile of a hospital or a qualifying medical clinic (*a qualifying medical clinic must have a physician, physician's assistant, or nurse practitioner onsite for a minimum of 40 hours each week and accepts Medicare and Medicaid payments*). SELECT

**Attach map(s) with project location and amenities clearly marked, as Exhibit 8.*

9. HUD's Section 3

Total 0

Is the CHDO Section 3 Certified? SELECT

ANTICIPATED ACCOMPLISHMENT TIMELINE

Accomplishment	Anticipated completion date
Identify Development Team	
Identify Target Location	
Conduct Market Feasibility or Provide Applicant List	
Project Design and Specifications Complete	
Create Development Budget and Proforma	
Demonstrate Site Control	
Apply for COSA CHDO New Construction Set-aside Funding	
Show successful expenditure and draw down of CHDO Operating Expense funds for administrative costs	

FINANCIAL NEED

1. As **Exhibit 9**, Respondents must provide the following information about the need for operating expense support for the coming year:
 - a. A description of the activities the applicant will support with CHDO Operating Support funding.
 - b. An explanation of why fund balances and other sources are not available or are insufficient to support the activities described.

OPERATING BUDGET

Complete the Operating Budget Matrix below. The line items are eligible for reimbursement as CHDO Operating Expenses while employees are working towards developing, owning, and/or sponsoring eligible housing development projects. CHDOs that are acting only as a subrecipient or a contractor are not eligible for CHDO Operating Expense funding.

Revenues

	All Other Funding	CHDO Operating Request	Total
			\$0.00

Expenses

Salaries and Benefits*			\$0.00
Office Supplies			\$0.00
Insurance			\$0.00
Legal Fees			\$0.00
Equipment Rentals			\$0.00
Training			\$0.00
Travel			\$0.00
Professional Services			\$0.00
			\$0.00
			\$0.00
			\$0.00
			\$0.00
Total Expenses	\$0.00	\$0.00	\$0.00

% of Costs allocated to CHDO Operating: 0%

*Salaries and Benefits: Complete the breakdown of Salaries and Benefits for each position to be funded by CHDO Operating Expense Funding.

Position Title	Annual Salary & Benefits	CHDO Portion
Total Salaries and Benefits	\$0.00	\$0.00

0

EXHIBIT 10:

Provide narrative describing how requested CHDO Operating funds will further the CHDO's ability to develop, own, and/or sponsor an eligible housing development project.

FINANCIAL INDICATORS

Current Assets:		Current Liabilities:	
Cash:		Annual Operating Expense:	
Cash Equivalents:		Annual Salaries:	
Annual Net Oper. Income:			
1	No	Current (Quick) Ratio 1.5 or higher	0.00
2	No	Cash Ratio 1.0 or higher	0.00
3	No	Cash and Cash Equivalents Exceed Three Months Operating Expenses - Greater Than 1.0	0.00
4	No	Cash and Cash Equivalents Exceed Six Months Salary Expenses - Greater Than 1.0	0.00

Note: Utilize your most recent board approved financial statements to complete this section.

NARRATIVE RESPONSES AND INSTRUCTIONS

This portion of the application should be completed in a word processing format and included in the application as Exhibit 11.

- 1 Provide an executive summary describing the project mission and objectives to include:
 - a Provide narrative detailing the timeline and landmark dates from the beginning of the housing development process to project completion.
 - b Provide adequate evidence of market demand for the type of affordable housing product proposed in the neighborhood, such as a market study.
 - c Discuss in detail the strategy and a plan to promote the selling or renting of the developed affordable homes.
 - d Describe how sales prices are determined for the new affordable homes.
 - e Describe your homebuyer selection process.

- 2 For CHDO's who have received previous CHDO Set-Aside funding for a project resulting from a prior CHDO Operating grant, provide a separate executive summary describing the project objectives and outcome as Exhibit 11a.

DUN AND BRADSTREET VERIFICATION

Every application must contain a D-U-N-S Number. If you do not have a DUNS number, you can register with Dun and Bradstreet at the web address below and you will be issued a number.

Dun & Bradstreet (D&B) provides a D-U-N-S Number, a unique nine digit identification number, for each physical location of your business.

D-U-N-S Number assignment is FREE for all businesses required to register with the US Federal government for contracts or grants.

If one does not exist for your business location, it can be created within 1 business day.

To obtain a D-U-N-S Number click the link below:

<http://fedgov.dnb.com/webform>

SYSTEM FOR AWARD MANAGEMENT

Respondents must be registered with the System for Award Management which has replaced the federal “Excluded Parties List System” and not be either suspended and/or debarred.

The System for Award Management (SAM) is the Official U.S. Government system that consolidated the capabilities of CCR/FedReg, ORCA, and EPLS. Entities may register at no cost. User guides and webinars are available.

For more information please go to: www.sam.gov

[Sam Registration Instructions](#)

[SAM Registration and Debarment Search](#)

Note: Respondents please attach proof of debarment verification to application as Exhibit 12. Screen shot of the SAM webpage is sufficient to document compliance.

DISCRETIONARY CONTRACTS DISCLOSURE FORM

Discretionary Contracts Disclosure Form may be downloaded at:

<https://www.sanantonio.gov/eforms/atty/ContractsDisclosureForm.pdf>

Instructions for completing the Discretionary Contracts Disclosure form are listed below:

- 1** Download form and complete all fields. Note: All fields must be completed prior to submitting the form.
- 2** Click on the “Print” button and place the copy in application response as indicated in the Application Checklist as Exhibit 13.

CONFLICTS OF INTEREST

Respondent acknowledges that it is informed that the Charter of the City of San Antonio and its Ethics Code prohibit a City officer or employee, as those terms are defined in the Ethics Code, from having a financial interest in any contract with City or any City agency such as City-owned utilities. An officer or employee has a “prohibited financial interest” in a contract with City or in the sale to City of land materials, supplies or service, if any of the following individual(s) or entities is a party to the contract or sale: the City officer or employee; his parent, child or spouse; a business entity in which he or his parent, child or spouse owns ten (10) percent or more of the voting stock or shares of the business entity, or ten (10) percent or more of the fair market value of the business entity; or a business entity in which any individual or entity above listed is a subcontractor on a City contract, a partner or a parent or subsidiary business entity.

Respondent is required to warrant and certify that it, its officers, employees and agents are neither officials nor employees of the City, as defined in Section 2-42 of the City’s Ethics Code.

Please ensure this documentation is attached with your application submission as Exhibit 14. Incomplete applications will not be considered.

<https://www.ethics.state.tx.us/forms/CIQ.pdf>

