



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

APPLICATION

for

CHDO Single-Family New Construction Program

Release Date: June 16, 2016

Applications Due: July 15, 2016

This solicitation has been identified as High Profile.

Notice Regarding Prohibition on Campaign or Officeholder Contributions for Individuals and Entities Seeking High-Profile Contracts. Under Section 2-309 of the Municipal Campaign Finance Code, the following are prohibited from making a campaign or officeholder contribution to any member of City Council, candidate for City Council or political action committee that contributes to City Council elections from the 10th business day after a contract solicitation had been released until 30 calendar days after the contract has been awarded (“black out” period):

1. legal signatory of a high-profile contract;
2. any individual seeking a high-profile contract;
3. any owner or officer of an entity seeking a high-profile contract;
4. the spouse of any of these individuals;
5. any attorney, lobbyist, or consultant retained to assist in seeking contract.

A high-profile contract cannot be awarded to the individual or entity if a prohibited contribution has been made by any of these individuals during the “black out” period.

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:

Enter Name

<input type="checkbox"/>	Section 1 - General Information	Self-score	0
<input type="checkbox"/>	Section 2 - CHDO Certification Checklist		
<input type="checkbox"/>	Attachment A		
<input type="checkbox"/>	Attachment B		
<input type="checkbox"/>	Attachment C		
<input type="checkbox"/>	Attachment D		
<input type="checkbox"/>	Attachment E		
<input type="checkbox"/>	Attachment F		
<input type="checkbox"/>	Attachment G		
<input type="checkbox"/>	Attachment H		
<input type="checkbox"/>	Attachment I		
<input type="checkbox"/>	Attachment J		
<input type="checkbox"/>	Attachment K		
<input type="checkbox"/>	Attachment L		
<input type="checkbox"/>	Attachment M		
<input type="checkbox"/>	Attachment N		
<input type="checkbox"/>	Attachment O		
<input type="checkbox"/>	Attachment P		
<input type="checkbox"/>	Attachment Q		
<input type="checkbox"/>	Attachment R		
<input type="checkbox"/>	Attachment S		
<input type="checkbox"/>	Attachment T		
<input type="checkbox"/>	Section 3 - Experience Self-Score		
<input type="checkbox"/>	Exhibit 1 - Organizational Chart and Resumes		
<input type="checkbox"/>	Exhibit 2 - Independent Audits for Last Two years and Response		
<input type="checkbox"/>	Exhibit 3 - Homebuyer Education Curriculum and Materials		
<input type="checkbox"/>	Section 4 - Experience Supplement		
<input type="checkbox"/>	Section 5 - Narrative Responses		
<input type="checkbox"/>	Section 6 - Proposed Plan Self-Scoring		
<input type="checkbox"/>	Exhibit 1 - HUD Form 935.2B (Affirmative Fair Housing Marketing Plan) for Single-Family I		
<input type="checkbox"/>	Exhibit 2 - Target Area Maps		
<input type="checkbox"/>	Exhibit 3 - Project site characteristics and Transit Amenities Maps		
<input type="checkbox"/>	Section 7 - Site Information		
<input type="checkbox"/>	Section 8 - Financial Indicators		
<input type="checkbox"/>	Section 9 - Development Budget		
<input type="checkbox"/>	Section 10 - Pro Forma		

Forms for CHDO Certification

<input type="checkbox"/>	Board Member Certification
<input type="checkbox"/>	Board Status Certification
<input type="checkbox"/>	Certification of Signatures

SELECT	Section 11 - Environmental
SELECT	Section 12 - Section 3 Utilization Plan
SELECT	Section 13 - DUNs Verification
SELECT	Section 14 - System for Award Management (Debarment)
SELECT	Section 15 - Contract Disclosure
SELECT	Section 16 - Conflict of Interest
SELECT	Section 17 - Affirmative Marketing Plan
SELECT	Section 17 - Signature Page

GENERAL INFORMATION

Project Name	Enter Name
Project Location (<i>Including Zip Code</i>)	Insert Data Here
Council District	Insert Data Here
Proposed Unit Count	Insert Data Here
Name of Organization	Insert Data Here
Address: City, State, Postal Code	Insert Data Here
Fax Number	(XXX) XXX-XXXX
Office Phone Number	(XXX) XXX-XXXX
Federal Tax I.D. Number	Insert Data Here
DUNS Number	Insert Data Here
Name of Authorized Signer	Insert Data Here
Title	Insert Data Here
Direct Phone Number	Insert Data Here
Email Address	Insert Data Here
Name of Point of Contact	Insert Data Here
Title	Insert Data Here
Direct Phone Number	(XXX) XXX-XXXX ext.
Email Address	Insert Data Here

REFERENCES

REFERENCE 1

Company Name/Firm	Insert Data Here
Contact Name & Title	Insert Data Here
Address: City, State, Zip Code	Insert Data Here
Telephone Number	(XXX) XXX-XXXX ext.
Email Address	Insert Data Here
Type of Service	Insert Data Here

REFERENCE 2

Company Name/Firm	Insert Data Here
Contact Name & Title	Insert Data Here
Address: City, State, Zip Code	Insert Data Here
Telephone Number	(XXX) XXX-XXXX ext.
Email Address	Insert Data Here
Type of Service	Insert Data Here

REFERENCE 3

Company Name/Firm	Insert Data Here
--------------------------	------------------

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

Insert Data Here
Insert Data Here
(XXX) XXX-XXXX ext.
Insert Data Here
Insert Data Here

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. Incomplete applications will not be considered.

Checklist Organizational Status and Mission

Criteria Met

1. The nonprofit is organized under state or local laws, as evidenced by **Attachment A**:

SELECT

A charter, OR

Articles of Incorporation

2. The nonprofit has a tax exemption ruling from the Internal Revenue Service (IRS) under Section 501(c), as evidenced by **Attachment B**:

SELECT

A 501 (c)(3) or (4) Certificate from the IRS, OR

A group exemption letter under Section 905 from the IRS that includes the CHDO.

3. The nonprofit's primary purpose is the provision of low-and moderate income housing.

SELECT

As **Attachment C**, provide and highlight the appropriate area in your:

Charter, OR

Articles of Incorporation, OR

By-laws, OR

Resolutions

4. The organization has produced a strategic plan that specifies an action plan for housing development, as provided in **Attachment D**.

SELECT

Board Composition

Criteria Met

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:

SELECT

Completion of the Certification of Low Income Representation as **Attachment E**

AND

Highlight the relevant text as **Attachment E**, in one of the following:

By-laws, OR

Charter, OR

Articles of Incorporation

6. An organization may be chartered by a State or local government, however, the

SELECT

CHDO CERTIFICATION CHECKLIST

State or local government may not appoint:

- (1) more than one-third of the membership of the organization's governing body;
- (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
- (3) no more than one-third of the governing board members may be public officials.

As **Attachment F** highlight the relevant text in one of the following which describes the process for selecting the remaining 2/3 members:

- By-laws, OR
- Charter, OR
- Articles of Incorporation

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 G** and highlight relevant areas in your organization's:

SELECT

- By-laws,
- Charter, OR
- Articles of Incorporation

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 H**, highlight the relevant text in one of the following which describes the process for selecting the remaining 2/3 members:

SELECT

- Charter, OR
- Articles of Incorporation

Please place all supporting documents for the following in **Attachment I**

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:

- 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:

- 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.

- Documentation of committee structures or other means of development

CHDO CERTIFICATION CHECKLIST

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:

Completion of Certification of Board Status Form

13. Decision-making

SELECT

The board has the ability to make timely decisions.

Board minutes from the past six months

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 J**:

SELECT

The organization's By-laws, OR

A Memorandum of Understanding

15. Is the organization sponsored or created by a for-profit entity?

SELECT

Yes 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 K**:

SELECT

For-profit organization's By-laws

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 K**:

SELECT

By-laws,

Charter, OR

Articles of Incorporation

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 L**:

SELECT

By-laws, OR

Charter, OR

Articles of Incorporation

Relationship and Service to the Community

Criteria Met

CHDO CERTIFICATION CHECKLIST

<p>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 M:</p> <p><input type="checkbox"/> Statement signed by the Board President that details at least one year of experience in serving each community, OR</p> <p><input type="checkbox"/> 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.</p>	SELECT
<p>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 N, highlight the relevant text in one of the following:</p> <p><input type="checkbox"/> The organization's By-laws, OR</p> <p><input type="checkbox"/> Resolutions, AND</p> <p><input type="checkbox"/> A written statement of operating procedures approved by the governing body.</p>	SELECT
<p>19. Needs</p> <p>Current plans are well grounded in an understanding of current housing conditions, housing needs, and need for supportive services, as evidenced by Attachment O:</p> <p><input type="checkbox"/> Narrative statement of any current plans with supporting analysis of the local housing market and housing needs of low-income households.</p>	SELECT
<p>20. Relations</p> <p>The organization has a positive reputation and a strong relationship with its community, as evidenced by Attachment P:</p> <p><input type="checkbox"/> Supporting documentation</p>	SELECT
Financial Management and Capacity	
<p>21. Please submit your organization's most recent year-to-date interim financial statement Attachment Q providing at a minimum:</p> <ol style="list-style-type: none">1) Statement of Revenues & Functional Expenses (P&L),2) Statement of Net Assets (balance sheet), and3) Statement of Cash Flows	Criteria Met SELECT
<p>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 R:</p> <p><input type="checkbox"/> A Charter, OR</p> <p><input type="checkbox"/> Articles of Incorporation</p>	SELECT

CHDO CERTIFICATION CHECKLIST

Development Capacity

Criteria Met

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

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**, 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:

_____ I am a low-income resident of _____, the Applicant's target community.
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 am a resident of a low-income neighborhood in _____, the Applicant's target community.
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 am an elected representative of _____ (insert name of neighborhood organization), a low-income neighborhood organization within _____, the Applicant's target community.
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.

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.

I certify that the above listing of a current, participating board members is accurate.

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 a check 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.

Board Member Name and Residential Address	Select One Representation Type (if applicable)				# of Years on Board	Occupation and Place of Employment	Areas of Expertise/ Experience
	Low-Income	Public Institution	Religious Organization	For Profit			

I certify that the above listing of current, participating board members is accurate.

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, 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.

I certify that the above listing of current, participating board members is accurate.

BOARD PRESIDENT SIGNATURE _____
DATE

Enter Name

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 total of 95 points.**

1. Experience of the Organization

- A No experience in affordable single-family housing development.
- 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 development.

Total	0
SELECT	

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

- A All six Development Team positions are filled.
- B Four Development Team positions are filled.
- C Three or less of the Development Team positions are filled.
- D One or more employee(s) hold more than one Development Team Position

**Attach organizational chart and resumes of development team as Exhibit 1.*

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 Four Development Team members have five or more years experience in affordable single-family housing development.
- C Three 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 below how your organization has resolved these findings? All respondents must submit their financial audits for the last two fiscal years.

- A No
- B Yes

**Attach independent audit for the last two years and response as Exhibit 2.*

Total	0
SELECT	

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

- A 100 + Units
- B 80 to 99 Units
- C 60 to 79 Units

Total	0
SELECT	

EXPERIENCE SELF-SCORE

- D 59 or less Units
- E None

6. If your organization has received HOME-funding, how much has the organization expended in the past five years?

- 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.

Total	0
SELECT	

7. If your organization was awarded HOME-funding in the past five years, what percentage of funds awarded were invoiced?

- A 100%
- B 80-99%
- C 60-79%
- D 59% or below
- E No funds were expended or contract was cancelled.
- F Organization has not received HOME funding in the past five years.

Total	0
SELECT	

8. Will your housing counselor provide the following services?

- A No Counseling
- B Pre - Purchase Counseling Only
- C Post - Purchase Counseling Only
- D Pre and Post Counseling

Total	0
SELECT	

**Attach homebuyer education curriculum and materials as Exhibit 3.*

Enter Name

EXPERIENCE SUPPLEMENT

Provide the Number of Single-Family Housing Units Developed in the Past Five Years.		
Year	Development Name	Unit Count
		0
		0
		0
		0
		0
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 Five Years.				
Year	Project Name	Award	Expended	%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
		\$0.00	\$0.00	0%
Total		\$0.00	\$0.00	0%

Enter Name

NARRATIVE RESPONSES AND INSTRUCTIONS

This portion of the application should be completed in a word processing format and included in the application as Section 5.

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

PROPOSED PLAN SELF-SCORING

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 total of 95 points.**

1. Housing Design Standards

	Total	0
A Will your project have at least one 36-inch door entrance, with an accessible route?	SELECT	
B Will your 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 square feet in area?	SELECT	
C Will your 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 your project meet one of the following BuildSAGreen Level standards?

	Total	0
A Project does not meet 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 your marketing material display the Equal Housing Opportunity logo or the phrase "Equal Housing Opportunity" along with the accessibility logo when appropriate?	SELECT	
B Does your staff have relevant training in regards to Fair Housing regulations?	SELECT	

C Is your 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 HUD Form HUD-935.2A has been completed and attached?

SELECT

**Complete HUD Form 935.2B and attach as Exhibit 1*

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

Instructions for Downloading Nuance Reader

<http://portal.hud.gov/hudportal/documents/huddoc?id=nuancereaderinstall.pdf>

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

Total 0

A ReNewSA target areas:

SELECT

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

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

SELECT

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

C Eastside CHOICE Neighborhood Transformation Plan:

SELECT

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

D Additional strategic plans:

SELECT

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

**Attach target area maps and mark an "X" on project location as Exhibit 2.*

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 your 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 your 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 Were 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.

SELECT

B CHDO has site control of the property

SELECT

C Other sources of financing committed

SELECT

D Phase I (and Phase II if recommended by Phase I) Environmental Report (1) completed

SELECT

E Organization has an existing loan underwriting regimen

SELECT

7. The HOME Program requires at least a 25% match.

Note: Response to this question is linked from Development Budget Worksheet and points are assessed as a result of the completion of the Development Budget Worksheet.

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

8. Project Site Characteristics and Transit Amenities

- A Project meets land use density requirements at time of application
- B Project meets zoning requirements at time of application
- C Project is consistent with target area, neighborhood and/or sector plan at time of application
- D Project is located within one quarter (1/4) mile of bus station or stop
- E Project is located within a 20 minute bus commute of a major employment
- F Project is located within one quarter (1/4) mile of a public park
- G Project is located within one quarter (1/4) mile of a book-lending library
- H Project is located within one quarter (1/4) mile of a full scale grocery store of 25,000 square feet or more where staple foods, fresh produce and fresh meats are sold
- I Project is located within one quarter (1/4) mile of a community, senior or other similar center or facility that serves populations similar to those residing in the project.
- 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*)

Total	0
SELECT	

**Attach maps and mark an "X" on project location and feature as Exhibit 3.*

9. Will this project meet Section 3 preferences by meeting one of the following?

- Yes - 30% of the aggregate number of new hires are Section 3 Residents; OR
10% of all covered contracts will be awarded to Section 3 Businesses; OR
3% of all covered non-construction contracts will be awarded to Section 3
- No - This project will not meet Section 3 requirement.

Total	0
SELECT	

Enter Name

SITE INFORMATION

Select the appropriate option that pertains to your project. Please ensure the appropriate documentation and/or attachments are included with your submission for this Section.

Scattered New Construction: If sites have Already Been Purchased

1. Provide market value appraisal information
2. Provide evidence of zoning conformance
3. Provide evidence of ownership

Scattered New Construction: If Sites Have Been Identified but Not Yet Been Purchased

1. Obtain and submit at least one appraisal to substantiate the estimated acquisition costs.
2. Provide evidence of zoning conformance
3. Provide evidence of site control
4. Market value land appraisal reports must be obtained at the time of purchase and submitted to the City. Any award of grant funds is contingent on the land appraising at or above the purchase price.
5. A certification from the developer/contractor that the subsoil conditions have been adequately explored with test borings and any costs associated with the subsoil conditions has been included in the Project development budget. If test borings have not been performed or are not planned, explain why, and provide a signed statement that the respondent or the developer/contractor will accept responsibility for any delays or damages incurred as a result of unforeseen subsoil conditions.

Subdivision New Construction

1. Provide an assessment current market demand in the neighborhood in which the project will be located
 - a. May include a market analysis completed by a third party, independent of the Grantee, that includes a detailed study including, but not limited to, definitive absorption rates, demand, comparable prices, current and projected demographic information, and marketability or
 - b. May include providing a verifiable waiting list
2. Provide an appraisal that uses a comprehensive sales comparison approach. The appraised value should reflect the actual conditions (raw land, approved subdivision but unimproved site, or approved and improved site) of the land at the time of purchase.
3. Submit a title report for the property
4. Provide evidence of zoning conformance
5. Provide evidence of site control

DEVELOPMENT BUDGET

PROJECT NAME		Unit	
<i>Enter Name</i>		0	
SOURCES OF FUNDS			
<i>HOME Funds</i>		\$0.00	\$0.00
<i>Enter Data Here</i>		\$0.00	\$0.00
<i>Enter Data Here</i>		\$0.00	\$0.00
<i>Enter Data Here</i>		\$0.00	\$0.00
<i>Enter Data Here</i>		\$0.00	\$0.00
TOTAL SOURCES OF FUNDS		\$0.00	\$0.00
USES OF FUNDS			
ENVIRONMENTAL COSTS		\$0.00	\$0.00
ARCHITECTURE/ENGINEERING COSTS		\$0.00	\$0.00
INFRASTRUCTURE COSTS		\$0.00	\$0.00
SITE ACQUISITIONS COSTS		\$0.00	\$0.00
CONSTRUCTION COSTS		\$0.00	\$0.00
OTHER COST	<i>Enter Data Here</i>	\$0.00	\$0.00
OTHER COST	<i>Enter Data Here</i>	\$0.00	\$0.00
OTHER COST	<i>Enter Data Here</i>	\$0.00	\$0.00
TOTAL USES OF FUNDS		\$0.00	\$0.00
NET GAIN OR (LOSS)		\$0.00	\$0.00

HOME Match Calculation

HOME Funds Requested	_____	\$0.00
Other Public Funds	_____	\$0.00
HOME Match Requirement	_____	\$0.00
HOME Leveraging Ratio	_____	0 :1

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.

PRO FORMA

Insert Data Here

1 Municipality	City of San Antonio
2 Name of Organization	Insert Data Here
3 Project Name	Enter Name
4 Project Address	Insert Data Here
5 Year Built	NA
6 Census Tract	NA
7 Foreclosed, Abandoned, Vacant	NA
8 Annual Property Tax	

B Use of Funds for Project: Acquisition

1 Acquisition Cost	
2 Acquisition Closing Costs	
3 Other necessary costs for acquisition	
4 Total Acquisition	\$0

C Sources of Funds for Project

1 HOME	Dev Subsidy + 2nd Mortgage	
2 Other:	FHA Loan	
3 Other:	Borrower Down payment	
4 Other:	Buyer's Cost Paid By Seller	
5 Total Sources of Funds		\$0

Holding/Soft Costs (pre-completion)

5 Utilities (transfer and usage)	
6 Maintenance	
7 Security	
8 Insurance during rehab	
9 Property tax during rehab	
10 HOA fees	
11 Marketing/Advertising	
12 Legal Fees	
13 Other:	
14 Total	\$0

6 Total Use of Funds	
7 Sources minus Uses (should be zero)	\$0
8 Market value/sale price	

D Affordability Analysis

1 Buyer's income (est @ set-up, actual @ close)		
2 Buyer's HH size (est @ set-up, actual @ close)		
3 Buyer's monthly HH income	\$0	
4 Max total debt ratio; max total monthly pmt	41%	\$0
5 Monthly Consumer /installment debt pmt		
6 Monthly amt available for housing		\$0

Rehab/Construction Preparation

15 Environmental risk assessment	
16 Lead paint testing	
17 Energy audit	
18 Asbestos testing	
19 Fees and permits	
20 Architects/Engineering	
21 Termite testing/extermination	

Cash Required to Close

7 Buyer's closing costs/prepays @ closing		
8 Min. down payment required (FHA=3.5%)	3.00%	\$0
9 Total cost to close		\$0
10 Paid by buyer (e.g., down payment, etc.)		
11 Paid for buyer @ closing (non-HOME)		
12 Balance HOME paid for buyer toward DP and CC		\$0

22	Due Diligence/Feasibility	
23	On-Site Demolition	
24	Other:	
25	Total	\$0

Rehabilitation/Construction Costs

26	Trash-out and clean-up	
27	Rehabilitation exclusive of lead paint hazard reduction	
28	Lead paint hazard reduction costs	
29	Additional net cost for energy efficiency	
30	Appliances	
31	Landscaping	
32	Financing Costs	
33	Other	
34	Total Rehabilitation/construction cost	\$0
35	Basis for Developer Fee	\$0
36	Developer fee percentage and Amount of Fee	\$0
37	Construction contingency percentage and Amt	\$0
38	Total Development Cost (not including costs of sale)	\$0
39	HOME Development Subsidy (including contingency)	\$0

Housing Debt

13	Annual interest rate	
14	Term of mortgage in years	
15	Est property taxes per month	
16	Est homeowner's insurance per month	
17	Est mortgage insurance per month	
18	Homeowner association fees	

Estimate HB Subsidy

19	Target housing debt, P&I, mortgage, subsidy
20	Max housing debt ratio
21	HOME funds for principal reduction
22	Total HOME 2nd Mortgage

		Mortgage amt	Principal Red.
	\$0.00	\$0	\$0
	\$0.00	\$0	\$0

Affordability

23	Total Cash to Close
24	Cash from Buyer
25	Cash from other non-HOME sources
26	Total HOME 2nd Mortgage
27	First Mortgage from Buyer
28	Total Housing Debt

	\$0		
	\$0		
	\$0		
	\$0		
	\$0	P&I Pmt	Housing Debt
	\$0	#NUM!	#NUM!
	\$0		

F Reconciliation

1	Total Development Cost	\$0
3	Total HOME funds used	\$0
4	Program Income at sale	\$0
5	Net Cost of Project to HOME	\$0

E Sale to Eligible Buyer

1	Buyer's first mortgage	\$0
2	Down payment from buyer	\$0
3	Adjustments (if applicable)	
4	Total proceeds from buyer	\$0
5	Seller's Closing costs	
6	Sales commissions	
7	Sales tax	
8	Buyer's closing costs paid from HOME	\$0
9	Payoff of other (non-HOME) loans and interest	
10	Sales proceeds	\$0

ENVIRONMENTAL ACKNOWLEDGEMENT

Name of Organization Insert Data Here
Project Name Enter Name

The Respondent acknowledges that prior to release of funds for this project the Respondent must complete an environmental assessment, whichever is required. The Respondent also agrees to comply with all requirements and conditions resulting from, or identified by, the environmental review/assessment to complete the project. Contracts may not be executed until an environmental review/assessment is complete and the Release of Funds has been received from the U.S. Department of Housing and Urban Development (HUD).

This Acknowledgement is Submitted Under the Authority of:


Signature of Chairperson or Executive Director


Typed Name of Certifying Official


Date Signed

Section 3 Program Requirements

The City's Office of Grants Monitoring and Administration is committed to compliance with the HUD Section 3 regulations 24 CFR Part 135. It is our desire to ensure compliance with the City's Section 3 goals, to the greatest extent feasible, through the awarding of contracts to Section 3 business concerns and through the employment and training of Section 3 residents. In general, Section 3 requires outreach, prior to awarding contracts and subcontracts to construct a project under the program. Respondents must conduct outreach to low-income individuals living in the area where the project is located and to certain businesses located in the area in which the project is located. The intent of the Section 3 requirements is to encourage employment of such individuals and businesses in connection with the construction of the project. These requirements apply to any construction/rehab contract or subcontract in excess of \$100,000.

Respondents are required to complete and submit a Section 3 Utilization Plan.

Section 3 Goals:

- 1 30% of the aggregate number of new hires shall be Section 3 Residents
- 2 10% of all covered contracts shall be awarded to Section 3 Businesses
- 3 3% of all covered non-construction contracts shall be awarded to Section 3 Business

The Section 3 Utilization Plan can be found in the "SECTION 3 PROGRAM POLICY". The policy can be downloaded for completion at:

[Section 3 Program Policy](#)

[Section 3 Utilization Plan Submission Form ONLY](#)

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>

Enter Name

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.

Enter Name

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.

Enter Name

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. Incomplete applications will not be considered.

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

Affirmative Fair Housing Marketing Plan

The AFHMP guides efforts to ensure that prospective funding recipients will follow the Affirmative Fair Housing Marketing Regulations found in the Code of Federal Regulations (section 24 CFR 200.600, Subpart M). This requires each applicant to develop, and put in place affirmative marketing procedures that specifically describe the steps that must be taken to advertise to those tenants who are not likely to apply for the housing without special outreach. Affirmative marketing may be part of a larger, more general marketing strategy focused on reaching all potential tenants.

Each applicant is to pursue affirmative fair housing marketing policies by seeking out possible buyers and tenants, and advertising available housing properties. **Examples** of such action include:

- 1 Advertising the availability of housing to the population that is less likely to apply, both minority and non-minority groups, through various forms of media (i.e. radio stations, posters, newspapers) within the marketing area;
- 2 Use of the Equal Housing Opportunity Logo and the equal housing opportunity statement
- 3 Educate persons within an organization about fair housing and their obligations to follow nondiscrimination laws; and
- 4 Conduct outreach to advocacy groups (i.e. disability rights groups) on the availability of housing.

Following the link below, please download, complete, print, sign and date the form.

[Affirmative Fair Housing Marketing Plan](#)

