

City of Montgomery, Alabama
Department of Planning
Community Development Division



HOME Investment Partnerships Act (HOME)
Program Application

Program Year 2014-2015



25 Washington Avenue
4th Floor
Montgomery, AL 36104
334-625-2997

September 10, 2013

Dear Prospective Applicant(s):

The City of Montgomery is requesting proposals for services and projects qualifying under the following program(s):

PY 2014-2015) HOME Investment Partnerships Program

Background

The City of Montgomery is an entitlement city in its twenty-third year of participation in the HOME Investment Partnerships Program, and others, established and provided by the U.S. Department of Housing and Urban Development (HUD). During this time, approximately \$63 million has been awarded to the City. The grant funds have assisted extremely low, very low, and low-income persons/households by providing much needed public services, housing, and public facilities.

AVAILABLE FUNDING

The 2014-2015 HOME program year runs from May 1, 2014 through April 30, 2015. The City of Montgomery anticipates receiving approximately \$688,773 in HOME funds during the upcoming year, assuming level funding from the previous program year. Of that amount, 15% (\$103,315) must be reserved for funding affordable housing activities implemented by Community Housing Development Organizations (CHDOs). Up to 10% (\$68,877) of the total HOME allocation may be used for costs incurred by the City in administering the program. The remaining anticipated \$516,581 will be allocated to eligible HOME project activities.

FUNDING LIMITATIONS

The City of Montgomery must use HOME funds to own, develop and/or sponsor affordable housing. Currently, the Community Development Division accomplishes this through homebuyer and rental programs involving new construction, rehabilitation and down payment assistance to first-time homebuyers.

Prior to developing a project proposal, each potential applicant must carefully consider whether or not their program meets a critical need as outlined in "Section 5" of the Program Guidelines. Organizations with questions about the eligibility of a project are strongly encouraged to contact city staff for technical assistance and guidance.

Sincerely,

City of Montgomery Community Development Staff

APPLICATION SUBMISSION INSTRUCTIONS

An original, plus two (2) copies of the proposal must be received by the City of Montgomery's Community Development Division NO LATER THAN 2:00 P.M. ON MONDAY, October 7, 2013. Proposals received after this deadline will be accepted but WILL NOT be reviewed or considered for funding. No exceptions will be granted. Please DO NOT staple, hole punch or attach a cover sheet. The copies may be separated by a binder clip.

Please mail or deliver your proposal to:

**City of Montgomery
Community Development Division
25 Washington Avenue, 4th Floor
Montgomery, Alabama 36104**

Funding levels, project categories and recipients will be determined by the Community Development Staff, Planning Director, Mayor and City Council and submitted to HUD no later than March 15, 2014. Decisions are conditional upon the successful completion of the project's environmental review by city staff and final approval from HUD.

If you have any questions, please contact the Community Development Division directly at (334) 625-2997.

PROGRAM GUIDELINES

The Program Guidelines to follow are divided into the following sections:

- Section 1: Introduction and Facts Page
- Section 2: 2014-Action Plan Development Schedule for the HOME Program
- Section 3: Income Guidelines
- Section 4: Affordability Periods for the HOME Program
- Section 5: Fair Market Rent Guidelines and Utility Allowances (Rental Projects Only)
- Section 6: Consolidated Plan Priorities
- Section 7: Insurance and Bonding Requirements
- Section 8: Application and Instructions
- Section 9: Application Signature Page, Certifications, and Assurances
- Section 10: Other Attachments
- Section 11: Helpful Links

SECTION 1

INTRODUCTION

The "Program Guidelines" packet is designed to aid your organization in applying for HOME Investment Partnership Program (HOME) funds. A complete copy of the HOME Regulations (24 CFR, Part 92 – December 2004 Update) is available online at www.hud.gov. Organizations with questions about the eligibility of a project are strongly encouraged to contact Community Development staff for technical assistance and guidance.

Summary:

The Home Investment Partnerships Program (HOME) grants federal funds through the Department of Housing and Urban Development (HUD) to cities to implement projects that address affordable housing needs. The City of Montgomery, Alabama has been granted over \$23 million in HOME funds to non-profit organizations, faith-based entities and for-profit affordable housing developers.

Who can use HOME funds? HUD allows the City several options: it may grant all or a portion of the funds to projects implemented and administered by City staff. The City can also grant all or a portion of the funds to non-profit, faith-based and/or for-profit affordable housing developers. At least fifteen percent (15%) of the funds must be used to assist Community Housing Development Organization (CHDO) activities.

What types of activities are HOME funded?

There are many options for using HOME funds. Ultimately, the use of HOME funds must result in additional occupied affordable housing units. For Program Year 2014-2015, the City of Montgomery will consider homeowner or rental projects that involve new construction or that involve redevelopment of existing housing through rehabilitation and conversion or reconstruction activities. The City is committed to conducting all such activities with an emphasis on "Green Building" materials, methods, and technology.

Who benefits from HOME Projects?

The primary beneficiaries of Montgomery's HOME funded projects are low-income residents of the City of Montgomery. HOME funded activities must assist this population in gaining access to safe, decent, and healthy affordable housing. Depending on the program chosen, they may receive HOME assistance indirectly through affordable rental housing from the City's HOME Program partners such as nonprofit or for-profit property owners, developers, and CHDOs. They also may receive direct HOME assistance through purchase of affordable housing which was purchased and/or constructed with HOME funds.

Who decides how HOME funds are distributed?

The Community Development Division requests and reviews proposals from the community and makes funding recommendations to the Mayor, Planning Director, and City Council, whose final funding decisions are based upon these recommendations.

HUD reviews and considers the City's funding decisions in the process of approving the City of Montgomery's Annual Action Plan.

How can I find out more about the HOME Program?

The program is managed through the City of Montgomery's Community Development Division. Applications are available online and may be accessed/printed by visiting the City's website at www.montgomeryal.gov.

We will **not** accept applications via email. They may be mailed to the City of Montgomery, Community Development Division, P.O. Box 1111, Montgomery, AL 36101-1111

OR

They may be dropped off at 25 Washington Avenue, 4th Floor, Montgomery, AL 36104. You must bring them to the 4th floor to be stamped as received. For additional information, please contact our office at (334) 625-2997.

SECTION 2

2014-2015 Action Plan Development Schedule (Dates Subject to Change)

September 10, 2013	Public Hearing and Grant Application Release
October 7, 2013	Application Due Date (2:00 P.M.)
November 2013	Completion of Application Reviews
December 2013	Submission of Preliminary Project Recommendations and Funding
January 2014	Completion of Draft Action Plan and Submission to Mayor and City Council
February 2014	Advertise Public Notice for 30-Day Comment Period of Action Plan
March 2014	Submission of Final Action Plan for Approval by Mayor and City Council by Resolution
March 15, 2014	Submit Action Plan to HUD Office for Review
April 2014	Send Out Official Award and Decline Letters
April 2014	New Subrecipient Workshop
May 1, 2014	New Program Year Calendar Starts**†

May, 2014 – Date TBA: Funding Award Letter and Environmental Clearance
HOME Subgrantees must receive the above in writing *PRIOR TO* conducting *ANY* project activities, such as:
closing on property acquisition; hiring consultants or professional services; accepting formal construction bids; committing to, or signing legal documents for purchases / contracts / subcontracts, etc.; carrying out any general activities of the project.

****MUST NOT START ACTIVITIES PRIOR TO RECEIPT OF AWARD LETTER AND ENVIRONMENTAL CLEARANCE NOTICE**

† MAY SIGN CONDITIONAL OPTION TO PURCHASE PRIOR TO ENVIRONMENTAL CLEARANCE. SEE COMMUNITY DEVELOPMENT STAFF.

SECTION 3

INCOME GUIDELINES

**Levels Of Income For Eligibility
Extremely Low, Very Low, And Low-Income Residents**

FY 2013 Income Limits Montgomery County, Alabama										
FY 2013 Income Limit Area	<u>Median Income</u>	FY 2013 Income Limit Category	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
Montgomery County	\$61,500	<u>Very Low (50%) Income Limits</u>	\$21,550	\$24,600	\$27,700	\$30,750	\$33,250	\$35,700	\$38,150	\$40,600
		<u>Extremely Low (30%) Income Limits</u>	\$12,950	\$14,800	\$16,650	\$18,450	\$19,950	\$21,450	\$22,900	\$24,400
		<u>Low (80%) Income Limits</u>	\$34,450	\$39,400	\$44,300	\$49,200	\$53,150	\$57,100	\$61,050	\$64,950

SUBJECT TO CHANGE BY PROGRAM YEAR START DATE

The 2013 Median Family Income for Montgomery, AL (MSA) is \$61,500. These income guidelines became effective December 11, 2012 and may change within the first quarter of each year.

SECTION 4

AFFORDABILITY PERIODS for HOME ASSISTANCE

Homebuyer

Reference: HOME Regulations 92.254

Homeownership assistance HOME amount per-unit	Minimum period of affordability in years
Under \$15,000	5
\$15,000 to \$40,000	10
Over \$40,000	15

Rental

Reference: HOME Regulations 24CFR 92.252

Rental Housing Activity	Minimum period of affordability in years
Rehabilitation or acquisition of existing housing per unit amount of HOME funds: Under \$15,000	5
\$15,000 to \$40,000	10
Over \$40,000 or rehabilitation involving refinancing	15
New Construction or acquisition of newly constructed housing	20

SECTION 5

FAIR MARKET RENT GUIDELINES (Rental Projects Only)

The following table shows the Final FY 2011 FMRs by unit bedrooms.

U.S. DEPARTMENT of HUD	06/28/2011							
STATE:ALABAMA	----- 2011HOMEPROGRAMRENTS -----							
MONTGOMERY, AL P.S.A.		PROGRAM EFFICIENCY	1BR	2BR	3BR	4BR	5BR	6BR
	LOW HOME RENT LIMIT	538	576	692	800	892	984	1076
	HIGH HOME RENT LIMIT	629	665	790	1006	1103	1198	1294
	For information only:							
	FAIR MARKET RENT	629	665	790	1086	1291	1485	4678
	50% RENT	538	576	692	800	892	984	1076
	65% RENT	680	730	878	1006	1103	1198	1294

Source: <http://www.hud.gov/offices/cpd/affordablehousing/programs/home/limits/rent/2013/al.pdf>

***How to Calculate:**

$$\begin{aligned}
 & \text{The Fair Market Rent} \\
 - & \text{Utility Allowances (HUD Section 8 Data @www.hud.gov)} \\
 = & \text{Maximum Rent Allowed}
 \end{aligned}$$

Example: FMR for a one-bedroom apartment: \$ 665
 Utility Allowances - 125 (Project-specific)
 Maximum Rent Allowed: \$ 540

COMPLETE THE PRO FORMA OPERATING STATEMENT BELOW

**PRO FORMA OPERATING STATEMENT
(Rental Projects Only)**

Effective Gross Income

GROSS RENTAL INCOME:	_____
Other Income:	
Laundry & Vending:	_____
Late Fees:	_____
Interest Income:	_____
Other:	_____
GROSS ANNUAL INCOME:	_____
Less: Vacancy ())	_____
EFFECTIVE GROSS INCOME:	_____

Operating Expenses

Annual operating expenses should be estimated as of the end of the first full year of operation.

Property Taxes:	_____	
Building and Liability Insurance:	_____	
Utilities:	_____	
Advertising:	_____	
Management Fees:	_____	<i>of effective gross income</i>
<i>(7%-9% of effective gross income):</i>		
Legal/Accounting and Professional:	_____	
Site Manager Salary:	_____	
Maintenance Salary:	_____	
Maintenance/Repairs:	_____	
Grounds	_____	
Maintenance:	_____	
Payroll Taxes:	_____	
Office Expenses:	_____	
Telephone:	_____	
Services:	_____	
Replacement Reserves:	_____	
Compliance fees:	_____	
Miscellaneous:	_____	
TOTAL		
EXPENSES:	_____	_____ per unit

Net Operating Income: \$ _____ _____ **per unit**
(Effective Gross Income Less Expenses)

**Detailed Expense Assumptions
(Rental Projects Only)**

Property Taxes:
Building and Liability Insurance:
Utilities:
Advertising:
Management Fees:
Legal/Accounting and Professional:
Site Manager Salary:
Maintenance Salary:
Maintenance/Repairs:
Ground Maintenance:
Payroll Taxes:
Office Expense:
Telephone:
Services:
Replacement Reserves:
Miscellaneous:

**Distribution of Cash Flow
(Rental Projects Only)**

Net Operating Income (from previous page): _____

Debt Service:	Loan Amount	Loan Term	Loan Rate	
Loan 1	_____	_____ mos.	_____	_____ annually
Loan 2	_____	_____ mos.	_____	_____ annually
Loan 3	_____	_____ mos.	_____	_____ annually

Projected Cash Flow (net operating income less debt service): _____

Partnership Distributions (specify distribution):

To:	_____	_____
To:	_____	_____
To:	_____	_____
To:	_____	_____

Total Distributions: _____

Cash Flow Returning to Property: _____

SECTION 6

CONSOLIDATED PLAN PRIORITIES

The Consolidated Plan

The City of Montgomery has developed its five-year Consolidated Plan whereby all objectives and the level of priority for each objective has been assigned. This plan is now available to the public. Applications submitted for this program year must be in accordance with the Community Priorities outlined in the City of Montgomery's 2010-2014 Consolidated Plan. Provided below is the Category Need table on which you must base your application.

Category	Average
1. Homeless Services	
Employment Training	3.26
Life Skills Training	3.23
Emergency Shelters	3.18
Substance Abuse Training	3.15
Counseling & Referrals	3.13
Homeless Feeding Program	3.08
Mental Health Services	3.05
2. Housing & Homelessness	
Elderly Housing	3.05
Affordable Housing – Homeownership	3.01
Homeownership Assistance – Down-payment	2.94
Energy Efficient – Single Family Residential Construction	2.84
Minor Single Family Residential Rehab - Homeowner	2.72
Homeless Transitional Housing Rehab	2.63
Improvement for Handicapped Accessibility	2.61
Rental Housing Subsidies	2.48
Asbestos/Lead-Based Paint Removal	2.42
Multi-Family Rehab	2.42
Residential Historic Preservation	2.41
Multi-Family New Construction	2.30
Category	Average
3. Public Facilities	
Job Training/GED Centers	3.16
Youth Centers	3.03
Community Facilities	2.83
Parks/Recreational Facilities	2.70
Healthcare Facilities	2.67
Centers for Disabled	2.66
Women/Children Shelter	2.62
Abused Children Services	2.56
Homeless Shelters	2.49

Facilities for AIDS Patients	2.45
Childcare/Daycare	2.44
Historic Preservation	2.31
Parking Facilities	2.14
Category	Average
4. Public Services	
Employment Training	3.21
Crime Awareness Program	3.21
Senior Citizens Program	3.05
People With Disabilities Services	2.98
Youth Services	2.92
Domestic Violence Services	2.90
Legal Assistance	2.90
Health Services	2.85
Fair Housing Services	2.78
Substance Abuse Treatment	2.78
Credit Counseling	2.74
Mental Health Services	2.73
Abused Children Services	2.68
Child Care Services	2.68
Homelessness Prevention	2.63
Transportation Services	2.61
Tenant/Landlord Services	2.58
Lead-Based Pain Screening	2.47
5. Economic Development	
Job Creation	3.21
Job Training	3.13
Neighborhood Small Business Development	2.85
Legal Services/Counseling for Businesses	2.63
Financial Assistance – For-Profit Business (Loans)	2.59
Technical Assistance – For-Profit Business	2.42
Downtown Commercial Industrial Development	2.33
Non-Residential Historic Preservation	2.13
Land Acquisition – Commercial Industrial Development	2.13
Category	Average
6. Infrastructure	
Street Improvements/Beautification	3.22
Flood/Drainage Improvements	2.93
Sewer Improvements	2.92
Sidewalks	2.78
Handicapped Accessibility	2.68
Water Improvement System	2.51
Traffic Signals/Signs	2.48
Tree Planting	2.39
Fire Stations/Equipment	2.30
Parking Facilities	2.30

SECTION 7

INSURANCE and BONDING REQUIREMENTS

HOME sub-grantees must comply with the following insurance and bonding requirements. Prior to acceptance of the first invoice and processing of reimbursement, each HOME funded agency (sub-grantee) must provide the city with copies of the following for approval:

1. Proof of Worker's Compensation Insurance coverage as required under Alabama law for agency and all contractors and subcontractors.

Policies shall state that no cancellation, major change or expiration shall become effective until at least ten (10) days after receipt by the City of written notice.

2. Proof of Contractors General Liability and Property Damage Insurance coverage.

Policies shall be for the period covered by the contract, in the amount of \$1,000,000 (construction contracts) per occurrence, combined single limit coverage.

Policies shall state that coverage includes (but is not limited to) protection against claims arising from bodily and personal injury, including death, damage to property resulting from activities contemplated under the contract, and/or use of owned and non-owned automobiles.

Policies shall provide that notice be given to the City at least 30 days prior to cancellation or material change. The Cancellation clause on Certificate of Insurance shall include text to read as follows: "Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will mail 30 days' prior written notice to the certificate holder named herein."

Required endorsements: policy must cover personal injuries as well as bodily injuries (exclusion of contractual liability must be eliminated from the personal injury endorsement); policy must cover contractual liability by amending the definition of incidental contract to include any written contract.

3. Fidelity Bond

Bonds shall cover any officers, employees or agents of sub-grantees handling, or having access to funds, or authorization to sign or countersign checks.

Bonds shall cover full amount of CDBG/HOME award.

Bond shall not be canceled or modified except upon 30 days written notice to the City.

Construction Bonding and Insurance Per OMB Circular A-110

1. Any Contractor, Developer, Subrecipient, CHDO, Sponsor or other Entity conducting construction activities using City of Montgomery HOME funds shall follow its own requirements relating to bid guarantees, performance bonds, and payment bonds unless the construction contract or subcontract exceeds \$100,000.
2. For those contracts or subcontracts exceeding \$100,000, the CITY shall make a determination as to whether the interests of the City of Montgomery and HUD are adequately protected under the Entity's own requirements. Such determination, when made, shall be included in the project HOME Agreement, if funded, and the CITY will accept the bid and bonding policy and requirements of the Entity.
3. If such a determination has not been made, the minimum requirements shall be as follows:
 - (a) A bid guarantee from each bidder equivalent to five percent of the bid price. The "bid guarantee" shall consist of a firm commitment such as a bid bond, certified check, or other negotiable instrument accompanying a bid as assurance that the bidder shall, upon acceptance of the bid, execute such contractual documents as may be required within the time specified.
 - (b) A performance bond on the part of the contractor for 100 percent of the contract price.
 - (c) A payment bond on the part of the contractor for 100 percent of the contract price.
 - (d) Where bonds are required in the situations described herein, the bonds shall be obtained from companies holding certificates of authority as acceptable sureties pursuant to 31 CFR Part 223, "Surety Companies Doing Business with the United States."

SECTION 8

HOME PROGRAM APPLICATION AND INSTRUCTIONS

SECTION A, PART 1: GENERAL APPLICATION INFORMATION

A. Organization’s Name:

B. Organization’s Start Date:

C. Organization’s CEO/ President:

D. Organization’s Address:

E. Organization’s Mailing Address:

F. Organization’s Area Code & Phone Number: _____ **Ext.** _____

G. Organization’s Area Code & Fax Number:

H. Email Address: _____ **Website Address:** _____

I. Type of Organization (Place an “X” after appropriate selection):

501(c)(3) Nonprofit __ For-Profit Developer __ For-Profit Builder__ CHDO __
 Institution of Higher Education __ Government Entity __ Faith-Based __ Other (Explain): _____

J. Fed. Tax ID: _____ **DUNS#** _____ **Organization’s Fiscal Year:** _____

K. Proposal Contact Person:

L. Proposal Contact Area Code & Phone Number: _____ **Ext.** _____

M. Proposal Contact Person’s Email Address:

N. Name of Project:

O. Project Status (Place an “X” after appropriate selection): New __ Continuation __

P. Project Address:

Q. Project Census Tract(s): _____ **Block Group(s):** _____

R. Amount of HOME Funds Requested:

S. Previous Year(s) of HOME Funding (COMPLETE TABLE BELOW)

Year							
\$Amount							

SECTION A, PART 2. ORGANIZATION FINANCIAL INFORMATION

Using the tables below, itemize income and expenses			
(a). Income	Most Audited Recent Fiscal Year (Fill in Below)	Current Fiscal Year	Proposed Organizational Budget
PRIVATE SUPPORT			
	2011-2012	2012-2013	2013-2014
Contributions			
Grants			
Fundraising			
Other			
Subtotal			
GOVERNMENT			
	2011-2012	2012-2013	2013-2014
Federal			
State			
Local			
Subtotal			
OTHER REVENUE			
Describe	2011-2012	2012-2013	2013-2014
Subtotal			
TOTAL REVENUE			

Expenses	2011-2012	2012-2013	2013-2014
Personnel (Salaries, Benefits, Taxes, etc.)			
Capital (Equipment, Supplies, Services, Utilities, etc.)			
Other (Insurance, Audits, etc.)			
TOTAL EXPENSES			
SURPLUS/DEFICIT			

A COPY OF YOUR ORGANIZATION’S CURRENT AUDIT REPORT IS REQUIRED FOR THIS APPLICATION. FAILURE TO SUBMIT ALL PAGES OF AUDIT INCLUDING, BUT NOT LIMITED TO, ITS AUTHORSHIP AND FINDINGS AND CONCERNS PORTION WILL BE CONSIDERED INCOMPLETE AND AUTOMATICALLY BE DISQUALIFIED.

(b). Organization’s Board of Directors

Board of Directors			
Name	Occupation	Years on Board	Contact No.
(Extend Rows as Needed)			

SECTION B: PROPOSAL INFORMATION

1. NAME OF PROPOSED DEVELOPMENT:

2. FULL ADDRESS OF PROPOSED DEVELOPMENT:

3. (Place "X" After Choice):

NEW PROJECT

CONTINUATION

4. AMOUNT OF HOME FUNDS REQUESTED: \$

5. (Place "X" After Choice):

GRANT

LOAN

6. IF LOAN, % INTEREST:

7. TYPE OF ACTIVITY (Place "X" After Choice): DEMOLITION __
ACQUISITION __ REHAB__ NEW CONSTRUCTION __ RELOCATION __

8. UNITS - PLEASE PROVIDE THE NUMBER OF:

CURRENT UNITS __ PROPOSED UNITS __ PROPOSED HOME UNITS __

9. AUDIT/FINDINGS CONCERNS

Briefly in the space provided below, (if applicable), please indicate any findings and concerns that may be listed in your organization's audit report. Please provide the page number of the finding/concern and give explanation of such including your organization's response for corrective action(s). Include the entire audit report. Please do not leave out any pages or sections of the report.

SECTION C: IMPLEMENTATION SCHED. & AFFORDABILITY PERIOD

PART 1. PLEASE COMPLETE THE FOLLOWING SCHEDULE FOR DEVELOPMENT.

ACTIVITY	EXPECTED DATE
Commitment of all funding	
Acquisition of property	
Completion of design/engineering	
Bid opening	
Start Construction	
Construction completion	
Full Occupancy	

PART 2. THE MINIMUM AFFORDABILITY PERIOD IS FROM 5 TO 20 YEARS, DEPENDING ON THE TOTAL AMOUNT OF HOME ASSISTANCE TO THE PROJECT, ACCORDING TO THE TABLES SHOWN ON PAGE 13 OF THIS APPLICATION FORM. If you propose extending affordability beyond the scheduled minimum, please indicate the entire length of the affordability period proposed for this project: _____ years. Also in the space below please explain the reason.

PART 3. COMPLETE A PROJECT TIMETABLE for all major tasks foreseen as applicable to the completion of the proposed project, using the format below. You may add as many tasks/activities as needed, per the requirements of the proposed project.

Project Timeline: List all project milestones and their anticipated work period. There may be an opportunity to update the project timeline after award notification and before executing a grant agreement with the City. Any proposed changes, including extensions and early completion, must be requested in writing and approved in advance by the City of Montgomery's Community Development Office. Note: Applicant assumes all financial risks if work on the proposed project begins before grant notification and could result in forfeit of award. **YOU MUST USE THIS FORMAT.** Use additional pages if necessary.

Task/Activity	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR

SECTION D: PERFORMANCE MEASUREMENTS)

DESCRIBE KEY BENCHMARKS AND PERFORMANCE MEASURES FOR YOUR PROJECT. On a separate page, please create a "performance measurement table" using the example and required format below. List major activities, the direct product/service numbers for each activity and the direct outcome/benefit of each activity listed. Place behind corresponding pages in the narrative section. Use as many sheets as necessary and place behind this page.

PERFORMANCE MEASUREMENT TABLE		
ACTIVITY (What completing the project will do to fulfill the HOME Program objectives)	INDICATOR (The direct products of program activities) Service numbers	OUTCOME (Benefits that result from the program)
Example Answer: Expand the number of affordable single family housing units in the City of Montgomery	Example: Acquire and rehabilitate ("XX") single-family units for affordable sale to income-eligible (HOME-eligible) home buyers. Market and sell/resell units.	Example: Increase by ("XX") units the number of available single-family affordable housing units renovated and occupied in the City of Montgomery
Example: Operate a Community Housing Development Organization (CHDO) to Own, Develop and/or Sponsor affordable housing in the City of Montgomery	Example: Apply for and receive CHDO certification by the City of Montgomery. Acceptance and execution of at least one HOME project/activity Agreement	Example: Increase by one (1) the number of CHDOs working in collaboration with the City of Montgomery to support affordable housing.

SECTION E: PROJECT NARRATIVES & DESCRIPTIONS

PART 1. WRITE A CONCISE NARRATIVE DESCRIPTION of your proposal describing in the space provided below:

(a) Objectives and beneficiaries of the proposal:

(b) Current ownership, condition and zoning status of property/properties:

(c) Current occupancy of property/properties:

(d) Location and impact on surrounding neighborhood:

PART 2. DESCRIBE EXPERIENCE OF ORGANIZATION AND STAFF in implementing similar proposals:

(a) Housing developments or programs completed and those underway:

(b) Staff and/or development team: describe their qualifications and experience (include architects, engineers, consultants, property manager, etc.). Use more paper if necessary and place behind this page.

(c) IF YOU HAVE ENTERED INTO A CONTRACT OR HAVE A PROPOSED CONTRACT FOR PROFESSIONAL SERVICES (i.e., CONSULTING, ARCHITECTURAL/ ENGINEERING): Please attach a copy of the contract(s) behind this page otherwise address this section in the space provided below.

RENTAL PROPOSALS: COMPLETE PAGES 34-41 (BLUE)

HOMEOWNERSHIP PROPOSALS: COMPLETE PAGES 42-49 (GOLD)

**RENTAL AND HOMEOWNERSHIP PROPOSALS WITH 5 OR MORE UNITS
MUST COMPLETE THE HUD AFFIRMATIVE FAIR HOUSING MARKETING
PLAN.**

RENTAL HOUSING PROPOSAL

Answer all the questions in the appropriate space on this page. If there is more than one property, copy and complete this page for each assisted property.

1. PROPERTY INFORMATION

Property Address:

Number and Size of Units:

TOTAL # OF UNITS:

# of Units	# of Bedrooms
	0
	1
	2
	3
	4

2. PLAT & LOT INFORMATION

PLAT #:

LOT #

BLOCK #

CENSUS TRACT NO:

3. PROJECT STATUS- Please respond to every item in the table listed below.

Item	Obtained	Needed	Not Needed	In Progress	Expected Date
Zoning Approval					
HUD Flood Zone *					
Historic Review (SHPO)					
Tribal Review					
Planning/Subdivision					
Final Comprehensive Permit					
Phase I ESA					
Phase II ESA					
Market Study					

*Submit evidence of all approvals obtained and a FEMA Flood Map (F.I.R.M.) for every project address and place behind this page.

4. SITE CONTROL

SITE CONTROL

Attach evidence of site control and place behind this page. Please place an “X” after the appropriate category:

APPLICANT OWNED

OPTION

PROPERTY LEASED

NO SITE CONTROL

OTHER

If “OTHER” was selected, please briefly explain:

5. ACQUISITION

a) ESTIMATED COST OF PROPERTY (IF PURCHASING): \$

b) PLEASE PROVIDE NAME, ADDRESS, AND PHONE NUMBER OF CURRENT OWNER IN THE SPACE PROVIDED FOR BELOW.

c) CURRENT APPRAISED VALUE (IF AVAILABLE): \$

d) DATE OF APPRAISAL:

PLEASE SUBMIT APPRAISAL IF CONDUCTED WITHIN PAST SIX MONTHS AND ATTACH TO THE BACK OF THIS PAGE.

UPON AWARDING OF HOME FUNDS FOR ACQUISITION, AN APPRAISAL AND REVIEW APPRAISAL WILL BE REQUIRED.

6. INCOME TARGETING

Proposed number of HOME-assisted units by area median income. Place a number next to each income category.

Number of HOME Units for households at 0% - 30% of area median income:

Number of HOME Units for households at 31% - 50% of area median income:

Number of HOME Units for households at 51% - 60% of area median income:

Total HOME Units:

7. RELOCATION**

PLEASE ANSWER THE FOLLOWING QUESTIONS OR CHECK WITH "X" WHERE APPROPRIATE.

a) DOES PROJECT INVOLVE RELOCATION OF TENANTS? ___ YES ___ NO

IF YES, PLEASE ATTACH YOUR RELOCATION PLAN AND ATTACH TO THE BACK OF THIS PAGE

b) HOW MANY EXISTING UNITS ARE CURRENTLY OCCUPIED? #

c) WILL CURRENT TENANTS BE PERMANENTLY DISPLACED? ___ YES ___ NO

d) HOW MANY HOUSEHOLDS WILL BE PERMANENTLY DISPLACED? _____

e) ESTIMATED RELOCATION COSTS:

\$ _____ x _____ HOUSEHOLDS = \$ _____

f) WILL CURRENT TENANTS BE TEMPORARILY RELOCATED? ___ YES ___ NO

g) HOW MANY HOUSEHOLDS WILL BE TEMPORARILY RELOCATED? _____

h) ESTIMATED TEMPORARY RELOCATION COSTS:

\$ 3,000 x _____ HOUSEHOLDS = \$ _____

ON A SEPARATE PIECE OF PAPER, PROVIDE A LIST OF ALL EXISTING TENANTS AND THEIR CURRENT GROSS RENTS AND PLACE BEHIND THIS PAGE

7. BUDGET & BUDGET NARRATIVE

(a) **BUDGET** - Please provide a **DETAILED** line-item budget for all costs that are likely *and* all those that are presumable for the project. **NOTE: YOU MUST USE THIS FORMAT**, but line items may be added/removed as applicable.

	Activity	HOME Funds	Other Funds	Total Cost
1.	ACQUISITION			
2.	Purchase of Land			
3.	Purchase of Units			
4.	Other Expenses (List)			
5.	HARD COSTS			
6.	Site Work			
7.	Demolition			
8.	Construction			
9.	Appliances			
10.	Accessory Buildings			
11.	General Requirements			
12.	Contractor Overhead*			
13.	Contractor Profit*			
14.	Construction Contingency			
15.	Other (List on separate sheet)			
16.	SOFT COSTS			
17.	Architect Fee- Design			
18.	Architect Fee- Supervision			
19.	Legal Fees			
20.	Engineering Fees			
21.	Other Professional Fees (List)			
22.	Appraisal			
23.	Market Study			
24.	Environmental Report			
25.	Title & Recording Expenses			
26.	Relocation Expenses			
27.	Consultants			
28.	Other Soft Costs (List)			
29.	INTERIM COSTS			
30.	Construction Insurance			
31.	Construction Interest			
32.	Credit Enhancement			
33.	Real Estate Taxes			
34.	FINANCING COSTS			
35.	Bond Premium			
36.	Permanent Loan Origination			
37.	Perm. Loan Credit Enhance			
38.	Other Financing Costs (List)			
39.				
40.	DEVELOPER'S FEE			
41.	TOTAL DEVELOPMENT COST			
	<i>*Contractor Overhead + Profit Must not exceed 8% of total est. project costs.</i>			

(b) BUDGET NARRATIVE - Please provide a detailed justification narrative for the budget, explaining the methods used to determine the amount of each line-item listed in the budget. Be sure to match line item numbers in the narrative that match those of the budget. You may use additional sheets as necessary. Attach the narrative to the back of the budget page.

(c) OTHER SOURCES OF FUNDING

Using the sample format below, please provide information on “Other Sources of Funding” for the proposed project for your organization. Please provide proof of other funding sources (Letter of commitment, etc.) and place behind “Other Sources of Funding Page”.

Other Sources of Funding			
Funding Sources	Award Date	Date Available	Amount
TOTAL OTHER SOURCES			

PLEASE PLACE ALL BUDGETS DOCUMENTS IN THE APPROPRIATE ORDER IN THE APPLICATION.

HOMEOWNERSHIP PROPOSAL

ANSWER ALL THE QUESTIONS IN THE APPROPRIATE SPACE ON THIS PAGE. IF MORE THAN ONE PROPERTY, COPY AND COMPLETE THIS PAGE FOR EACH ASSISTED PROPERTY.

1. PROPERTY INFORMATION

Property Address:

Number and Size of Units:

TOTAL # OF UNITS:

# of Units	# of Bedrooms
	0
	1
	2
	3
	4

2. PLAT & LOT INFORMATION

PLAT #:

LOT #:

BLOCK #:

CENSUS TRACT NO:

3. TYPE OF PROPERTY

PLEASE PLACE A "X" AFTER THE APPROPRIATE SELECTION FOR PROPERTY TYPE:

SINGLE FAMILY _____ 2 TO 4 FAMILY _____ CONDOMINIUM _____

MANUFACTURED HOME _____ MOBILE HOME _____ COOPERATIVE _____

4. PROJECT STATUS

Please respond to every item in the table listed below.

Item	Obtained	Needed	Not Needed	In Progress	Expected Date
Zoning Approval					
HUD Flood Zone *					
Historic Review (SHPO)					
Tribal Review					
Planning/Subdivision					
Final Comprehensive Permit					
Phase I ESA					
Phase II ESA					
Market Study					

*Submit evidence of all approvals obtained and a FEMA Flood Map (F.I.R.M.) for every project address and place behind this page.

5. SITE CONTROL

SITE CONTROL

Attach evidence of site control and place behind this page. Please place an "X" after the appropriate category:

APPLICANT OWNED _____ OPTION _____ PROPERTY LEASED _____
NO SITE CONTROL _____ OTHER _____

If "OTHER" was selected, please briefly explain:

6. ACQUISITION

(a) ESTIMATED COST OF PROPERTY: \$

(b) CURRENT OWNER'S NAME: _____
ADDRESS: _____
PHONE NUMBER: _____

(c) CURRENT APPRAISED VALUE (IF AVAILABLE): \$

(d) DATE OF APPRAISAL:

PLEASE SUBMIT APPRAISAL IF CONDUCTED WITHIN PAST SIX MONTHS AND ATTACH TO THE BACK OF THIS PAGE. (UPON AWARD OF HOME FUNDS FOR ACQUISITION, AN APPRAISAL AND REVIEW APPRAISAL WILL BE REQUIRED.)

(e) AFTER REHAB VALUE: \$
PROPOSED SALES PRICE: \$

(f) THIS PROPOSAL INVOLVES MARKETING AFFORDABLE HOUSING TO BUYERS WHOSE INCOME IS NOT TO EXCEED:

50% OF MEDIAN INCOME _____

60% OF MEDIAN INCOME _____

80% OF MEDIAN INCOME _____

(g) AVERAGE MONTHLY COSTS TO BUYER:

TOTAL ALL ESTIMATED COSTS IN THE TABLE BELOW

Mortgage Amount:		
Term:	Principal: \$	Taxes: \$
Interest Rate:	Interest: \$	Homeowner's Insurance: \$
Mortgage Insurance:	Condominium Fees: \$	Other: \$

7. AFFORDABILITY

(a) HOW WILL YOU ENFORCE AFFORDABILITY?

DEED RESTRICTIONS ___ GROUND LEASE ___

(b) IF GROUND LEASE, INDICATE AMOUNT OF GROUND LEASE FEE: \$

(c) HAVE BUYERS BEEN PRE-SELECTED? YES ___ NO ___

(d) IS THERE A WAITING LIST? YES ___ NO ___ NUMBER OF ENTRIES: ___

**8. HOMEOWNERSHIP that includes attached RENTAL UNITS
(2 TO 4-FAMILY PROPERTIES)**

COMPLETE THE FOLLOWING SECTION IF THE PROJECT IS A HOMEOWNERSHIP PROPOSAL WITH RENTAL UNITS (2 TO 4-FAMILY PROPERTIES).

(a) NUMBER OF RENTAL UNITS:

(b) THIS PROPOSAL INVOLVES MARKETING AFFORDABLE HOUSING TO TENANTS WHOSE INCOME IS NOT TO EXCEED:

50% OF MEDIAN INCOME ____

60% OF MEDIAN INCOME ____

80% OF MEDIAN INCOME ____

(c) INFORMATION ABOUT RENTAL UNITS. COMPLETE THE TABLE FOR RENTAL UNITS USING THE UTILITY ALLOWANCE SHEET INCLUDED IN THIS PACKET.

Unit No	# of Bedrooms	Proposed Rent (Excluding Utilities)	Monthly Utilities (Use Utility Allowance Sheet)	Will Tenants Pay Own Utilities? Yes/No	Gross Rents (Rents & Utilities) Note: HOME rents are gross rents and cannot be excluded
1					
2					
3					

9. BUDGET & BUDGET NARRATIVE

(a) **BUDGET** - Please provide a **DETAILED** line-item budget for all costs that are likely and all those that are presumable for the project. **NOTE: YOU MUST USE THIS FORMAT**, but line items may be added/removed as applicable.

	Activity	HOME Funds	Other Funds	Total Cost
42.	ACQUISITION			
43.	Purchase of Land			
44.	Purchase of Units			
45.	Other Expenses (List)			
46.	HARD COSTS			
47.	Site Work			
48.	Demolition			
49.	Construction			
50.	Appliances			
51.	Accessory Buildings			
52.	General Requirements			
53.	Contractor Overhead*			
54.	Contractor Profit*			
55.	Construction Contingency			
56.	Other (List on separate sheet)			
57.	SOFT COSTS			
58.	Architect Fee- Design			
59.	Architect Fee- Supervision			
60.	Legal Fees			
61.	Engineering Fees			
62.	Other Professional Fees (List)			
63.	Appraisal			
64.	Market Study			
65.	Environmental Report			
66.	Title & Recording Expenses			
67.	Relocation Expenses			
68.	Consultants			
69.	Other Soft Costs (List)			
70.	INTERIM COSTS			
71.	Construction Insurance			
72.	Construction Interest			
73.	Credit Enhancement			
74.	Real Estate Taxes			
75.	FINANCING COSTS			
76.	Bond Premium			
77.	Permanent Loan Origination			
78.	Perm. Loan Credit Enhance			
79.	Other Financing Costs (List)			
80.				
81.	DEVELOPER'S FEE			

82.	TOTAL DEVELOPMENT COST			
	<i>*Contractor Overhead + Profit Must not exceed 8% of total est. project costs.</i>			

(b) BUDGET NARRATIVE - Please provide a detailed justification narrative for the budget, explaining the methods used to determine the amount of each line-item listed in the budget. Be sure to match line item numbers in the narrative that match those of the budget. You may use additional sheets as necessary. Attach the narrative to the back of the budget page.

(c) OTHER SOURCES OF FUNDING - Using the sample format below, please provide information on “Other Sources of Funding” for the proposed project for your organization. Please provide proof of other funding sources (Letter of commitment, etc.) and place behind “Other Sources of Funding Page”.

Other Sources of Funding			
Funding Sources	Award Date	Date Available	Amount
TOTAL OTHER SOURCES			

PLEASE PLACE ALL BUDGETS DOCUMENTS IN THE APPROPRIATE ORDER IN THE APPLICATION.

SECTION 9

APPLICATION SIGNATURE

CERTIFICATIONS & ASSURANCES

E-VERIFY MEMORANDUM OF UNDERSTANDING & AFFIDAVIT

E-VERIFY MEMORANDUM OF UNDERSTANDING

Due to the new Immigration Law, the City of Montgomery is now required by the State to collect E-Verify forms on vendors that currently has a contract (or performs any services) with the City of Montgomery. This document basically is a Memorandum of Understanding (MOU) between Homeland Security and your organization regarding participation in the Employment Eligibility Verification Program (E-Verify). Please visit the Homeland Security website at **www.dhs.gov/E-Verify** to register your organization and print the 13-page MOU. Please note that the E-Verify form should have a registration number assigned and printed on the form. This registration process does not take long and is usually completed by the sole proprietor, a Director or a financial liaison.

If your organization advertises for bids (contractors – construction, etc.), it is recommended that language in the advertisement state the requirement to register with E-Verify. Before accepting a sealed bid from contractors, an E-Verify packet should accompany the bid. Before awards are made to the chosen bidder, these documents must be present. Soon, this information will be required by all organizations/vendors doing business with any Federal agency or local government.

E-VERIFY AFFIDAVIT

AFFIDAVIT FOR BUSINESS ENTITY/EMPLOYER /CONTRACTOR

This form with attachment is to be returned with the response to any RFP or other form of procurement and is to be completed as a condition for the award of any contract, grant, or incentive by the State of Alabama, any political subdivision thereof, or any state-funded entity to a business entity or employer that employs one or more employees.

State of _____

County of _____

Before me, a notary public, personally appeared _____ (print name) who, being duly sworn, says as follows:

"As a condition for the award of any contract, grant, or incentive by the State of Alabama, any political subdivision thereof, or any state-funded entity to a business entity or employer that employs one or more employees, I hereby attest that in my capacity as _____ (state position) for _____ (state business entity/employer/contractor name) that said business entity/employer/contractor shall not knowingly employ, hire for employment, or continue to employ an unauthorized alien."

I further attest that said business entity/employer/contractor is enrolled in the E-Verify program. **(ATTACH DOCUMENTATION ESTABLISHING THAT BUSINESS ENTITY/EMPLOYER/CONTRACTOR IS ENROLLED IN THE E-VERIFY PROGRAM)**

Signature of Affiant

Sworn to and subscribed before me this ____ day of _____, 2____.

I certify that the affiant is known (or made known) to me to be the identical party he or she claims to be.

Signature and Seal of Notary Public

ATTACHMENT: VERIFICATION OF E-VERIFY ENROLLMENT.

THIS FORM PROVIDED FOR COMPLIANCE WITH SECTIONS 9 (a) and (b) BEASON-HAMMON ALABAMA TAXPAYER AND CITIZEN PROTECTION ACT; CODE OF ALABAMA, SECTIONS 31-13-9 (a) and (b).

APPLICATION SIGNATURE PAGE

THIS PAGE MUST BE SIGNED BY THE AUTHORIZED CERTIFYING OFFICIAL OR THE APPLICATION WILL NOT BE ACCEPTED. PLEASE SIGN ORIGINAL APPLICATION IN BLUE INK.

The undersigned certifies that:

- (a) The information contained in this document is complete and accurate;
- (b) The proposed program described in this application meets at least one of the HUD National Objectives governing the use of HOME Investment Partnership Program (HOME) funds;
- (c) The applicant shall comply with all Federal and City policies and requirements affecting the HOME program;
- (d) Sufficient funds are available from non-HOME sources to complete the project as described, if applicable.

Signature of Authorized Certifying Official

Title

Printed Name of Authorizing Certifying Official

Applicant Organization

Date



**CITY OF MONTGOMERY
CERTIFICATION REGARDING DISBARMENT & SUSPENSION**

1. The Proposer certifies to the best of his/her knowledge and belief that the Proposer and/or any of its principles

ARE () ARE NOT ()

presently debarred, suspended, proposed for debarment, or declared ineligible for the award of contracts by the City of Montgomery, State of Alabama and/or any Federal agency.

2. Principles, for the purpose of this certification, mean officers, directors, owners, partners, and persons having primary management or supervisory responsibilities with a business entity (i.e., general manager, project manager, plant manager, supervisor, or head of subsidiary, division or business segment, and similar positions).

3. The Proposer shall provide immediate written notice to the City of Montgomery's Community Development Division if, at any time prior to the award of potential grant fund, the Proposer learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.

4. The certification in paragraph 1 is a material representation of fact upon which reliance will be placed when making an award of a grant/contract. If it is later determined that the Proposer knowingly rendered an erroneous certification, the City of Montgomery, in addition to other remedies, may terminate and/or withdraw the award resulting from this proposal for default.

Signature of Chief Executive Officer

Printed name of Chief Executive Officer

Title: _____

Date: _____

MUST SIGN ALL COPIES OF APPLICATION IN BLUE INK



CITY OF MONTGOMERY ASSURANCES

Note: Some of these assurances may not be applicable to your project. If you have questions, please contact the agency to which this proposal will be submitted. Further, the City of Montgomery may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management, and completion of the project described in this application.
2. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
3. Will give the City and the Comptroller General of the United States, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
4. Will comply with the conflict of interest provisions at 24 CFR 85.36 and 84.42, and 24 CFR Part 85 related to the establishment of safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

5. Will comply with the uniform administrative requirements in accordance with OMB Circular A-110 "Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals and Other Non-Profit Organizations" as implemented at 24 CFR Part 570 §570.502.
6. Will comply with the requirements and standards of OMB Circular A-122 "Cost Principles for Non-Profit Organizations."
7. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
8. Will comply with all Federal statutes, related amendments, and implementing regulations relating to nondiscrimination, fair housing and equal opportunity including, but not limited to: (a) Title VI of the Civil Rights Act of 1964, as amended; (b) Fair Housing Act; (c) Equal Opportunity in Housing (Executive Order 11063, as amended by Executive Order 12259); (d) Section 109 of Title I of the Housing and Community Development Act of 1974, as amended; (e) Age Discrimination Act of 1975, as amended; (f) any other nondiscrimination provisions in the specific statute under which application for Federal assistance is being made; and (g) the requirements of any other nondiscrimination statute which may apply.
9. Will comply with all Federal statutes, related amendments, and implementing regulations relating to handicapped accessibility including, but not limited to: (a) Architectural Barriers Act of 1968, as amended; and (b) Americans with Disabilities Act; Section 504 of the Rehabilitation Act of 1973.
10. Will comply with all Federal statutes, related amendments, and implementing regulations relating to employment and contracting including, but not limited to: (a) Equal Employment Opportunity, Executive Order 11246, as amended; and (b) Section 3 of the Housing and Urban Development Act of 1968.

11. Will comply, if applicable, with flood insurance requirements of Section 202 of the Flood Disaster Protection Act of 1973.

12. Will comply, as applicable, with the provisions of the: (a) Davis-Bacon Act; (b) the Contract Work Hours and Safety Standards Act; (c) the Copeland (Anti-Kickback) Act; and, (d) Fair Labor Standards Act of 1938, as amended regarding labor standards for federally assisted construction sub-agreements.

13. Will comply with the requirements found at 24 CFR Part 5 regarding debarred, suspended and ineligible contractors and sub-recipients.

14. Will comply, or has already complied, with the requirements of the Uniform Relocation Assistance Act, Section 104(d) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs.

15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972; (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended; (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended; and (h) protection of endangered species under the Endangered Species Act of 1973, as amended.

16. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1968, EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 .

17. Will comply with the Lead-Based Paint Poisoning Prevention Act which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

18. Will comply, as applicable, with the provisions of the Hatch Act which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program. In cases where City, State and/or Federal laws, rules and regulations address certain issues, the most stringent ruling shall apply.

Signature of Chief Executive Officer

Printed name of Chief Executive Officer

Title: _____

Date: _____

MUST SIGN ALL COPIES IN BLUE INK

SECTION 10

OTHER ATTACHMENTS

PLEASE ATTACH THE FOLLOWING DOCUMENTS BEHIND THIS PAGE:

- 1. *** MOST CURRENT AUDIT REPORT*****
- 2. APPROPRIATE BUSINESS LICENSES**
- 3. LEGAL DESCRIPTION OF THE PROPERTY**
- 4. EVIDENCE OF SITE CONTROL (DEED, P & S, ETC.)**
- 5. PROFESSIONAL SERVICES CONTRACT(S)**
- 6. EVIDENCE OF ZONING APPROVAL**
- 7. MAP SHOWING SITE LOCATION AND SURROUNDING AREA**
- 8. PHOTOGRAPHS OF PROPERTY**
- 9. BUYER SELECTION PROCEDURES (HOMEOWNERSHIP PROPOSALS)**
- 10. TENANT SELECTION POLICY FOR ALL RENTAL PROPOSALS**
- 11. AFFIRMATIVE MARKETING PLAN**
- 12. LIST OF BOARD OF DIRECTORS**
- 13. ARTICLES OF INCORPORATION**
- 14. ORGANIZATIONAL BY-LAWS**

SECTION 11

HELPFUL LINKS

OMB Circulars

OMB Circular A-87 <http://www.whitehouse.gov/omb/circulars/a087/a087-all.html>

OMB Circular A-102 <http://www.whitehouse.gov/omb/circulars/a102/a102.html>

OMB Circular A-110 <http://www.whitehouse.gov/omb/circulars/a110/a110.html>

OMB Circular A-122 <http://www.whitehouse.gov/omb/circulars/a122/a122.html>

OMB Circular A-133 <http://www.whitehouse.gov/omb/circulars/a133/a133.html>

CDBG/HOME Regulations

CDBG Regulations Link

http://www.access.gpo.gov/nara/cfr/waisidx_03/24cfr570_03.html

HOME Regulations Link

http://www.access.gpo.gov/nara/cfr/waisidx_03/24cfr92_03.html

American Factfinder Link

http://factfinder.census.gov/home/saff/main.html?_lang=en

Excluded Parties List System

<http://epls.arnet.gov/>