



Program Year 2016

**Online RFP Guidebook for
HOME Investment Partnerships Grant:
Community Housing Development Organizations (CHDO's)**

Grants Management
Community Development and Planning Department
City of Arlington

October 2015

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Introduction to HOME

HOME Investment Partnerships Grant (HOME)

HOME is the largest federal block grant to state and local governments designed exclusively for creating affordable housing to low- to moderate-income households. HOME provides formula grants to states and Participating Jurisdictions (local governments) to use in partnership with local nonprofit organizations, owners, sponsors, and/or developers to fund a wide range of allowable activities located at 24 CFR Part 92.

HOME is authorized under Title II of the Cranston-Gonzalez National Affordable Housing Act, as amended, 42 U.S.C. 12704. Key substantive changes were made in 2013 to the HOME Final Rule including but not limited to:

- Accelerating the timely production and occupancy of assisted housing,
- Strengthening the performance of Participating Jurisdictions and their partners in producing and preserving affordable housing units,
- Providing Participating Jurisdictions with greater flexibility in the design and implementation of their projects, and
- Increasing administrative transparency and accountability.

Detailed information regarding the newly established 2013 HOME Final Rule can be located online at: <https://www.hudexchange.info/home/home-final-rule/highlights-of-the-changes-in-the-home-final-rule/>. Additional information regarding the HOME program can be located by visiting the HOME program web pages at <http://www.hud.gov/offices/cpd/affordablehousing/programs/home/>.

Consolidated Plan

The U.S. Department of Housing and Urban Development (HUD) requires all participating jurisdictions to submit a three- to five-year strategic planning document called the Consolidated Plan. The 2015-2019 Consolidated Plan describes the housing and community development needs of the city of Arlington for a five-year period. This document represents the City of Arlington's vision for improving the quality of life in the low-income areas of the city and provides details on how specific goals will be accomplished. It is through the Consolidated Plan that the City of Arlington determines its funding priorities each program year. As conditions change, the Consolidated Plan may be amended. The Consolidated Plan and other program information may be found <http://www.arlington-tx.gov/cdp/grants/planningandreporting/consolidated-plans-action-plans-capers/>

Annual Action Plan

The Action Plan is the annual update to the Consolidated Plan. The plan describes resources available, how those resources are to be utilized, including funded projects, and the geographic distribution of those resources. The planning process has been specifically created to assist in mapping one-year actions for community development and making good use of available federal, state, and local resources.

City of Arlington Geographic Targeting, Area Amenities, Energy Efficiency

Projects must primarily benefit low- to moderate-income residents and households of the city of Arlington. Activities that are provided city-wide include but not limited to public services, homebuyers'

assistance, housing rehabilitation, homeless prevention and assistance, and tenant-based rental assistance (TBRA).

In the 2015-2019 Consolidated Plan, funds are targeted to provide assistance primarily in the Central Arlington Neighborhood Revitalization Strategy Area (NRSA), an area which includes 57 percent low- to moderate-income (LMI) individuals, a 26 percent poverty rate, and a high concentration of minority citizens. In general, the NRSA boundaries are Sanford/Randol Mill on the North, Collins on the East, Abram on the South and Crowley Road on the West.

Another target area listed in the Consolidated Plan is the East Arlington Target area, an area which includes 67 percent low- to moderate-income (LMI) individuals, a 32 percent poverty rate and is also targeted for concentrated improvements. The East Arlington Target area is generally bounded by Cooper on the West, Mitchell on the North, Great Southwest on the East and Arkansas on the South.

- **Geographical Targeting**

For purposes of proposals, housing units must be located within the city limits of Arlington. Bonus points will be given to projects located in the Central Arlington Neighborhood Revitalization Strategy Area (NRSA), the East Arlington Promise Zone target area, or other low- to moderate-income target areas. Proposals should state which target area/s, if any, will be utilized for the proposed project/s.

- **Area Amenities**

The City will award points to Community Housing Development Organizations (CHDO's) that can clearly show within the RFP projects that will make a substantial impact in neighborhoods. For example, a substantial difference might be projects that includes activities such as acquisition, demolition and new constructing and/or re-constructing multiple homes in close proximity to each other and adjacent to other grant-funded projects such as parks, sidewalks, and street improvements.

- **Energy Efficiency**

Bonus points will be awarded to projects that can clearly show energy efficient design including but not limited to the use of sustainable construction materials such as insulated concrete forms (ICF), reduced water usage, solar panels, effective storm water management, and/or creation of green space.

- **Innovative Partnerships**

Bonus points will be awarded to projects that demonstrate innovative partnerships with organizations that can contribute lasting resources such as partners who can assist with HOME match and/or other contributions towards the proposed project/s.

2015-2019 Consolidated Plan Measurable Objectives

By regulation, HUD grant funds must be used to meet the measurable objectives of the City of Arlington Consolidated Plan. Measurable objectives are developed after an analysis of existing conditions, community needs, and an extensive citizen participation process. City Council priorities and the United Way community assessments provide additional, ongoing direction for community development projects. The priority matrix on page 5 provides an overview of the relationship among these priority areas and the Consolidated Plan. Plans and studies from a variety of sources were compiled to identify trends and potential partnerships.

The chart below illustrates the priority community development needs outlined in the 2015-2019 Consolidated Plan. A priority classification was assigned to each activity type based on the extent of community need. *High* priority indicates activities to address this need will be targeted for funding by the City of Arlington during the five-year strategic planning period. *Medium* priority indicates that activities to address this need may be funded by the City of Arlington during the five-year strategic planning period, if funds are available. The City will also take action to help groups locate other sources of funds for high and medium priority activities. *Low* priority indicates that the City of Arlington will not fund activities to address this need during the five-year strategic planning period.

PRIORITY LEVEL	PRIORITY NEED
	Economic Development
High	1.) Business and Job Development
High	2.) Infrastructure Improvements
High	3.) Public Facility Development/Improvement
High	4.) Neighborhood Development and Revitalization
	Quality Housing Opportunities
High	1.) Housing Rehabilitation
High	2.) Homebuyer Program
High	3.) Tenant-Based Rental Assistance
High	4.) Housing Development
	Neighborhood Development and Revitalization
High	1.) Infrastructure Improvements
High	2.) Public Facility Development/Improvement
High	3.) Neighborhood Development and Revitalization
	Social Service Support
High	1.) Identify and fund collaborative projects that increase efficiency or effectiveness of social service providers by consolidating programs and services.
High	2.) Fund non-profit agencies providing Social Services to eligible Arlington residents to the maximum allowed under the 15% cap.
High	3.) Enhance the effectiveness of social service resources by encouraging partnerships with other Consolidated Plan goals and activities.
	Homeless Services
High	1.) Support the Tarrant County Continuum of Care Strategic Plan Goals to Reduce Homelessness in Arlington.
High	2.) Support the "Housing First" strategy by partnering with non-profits, government agencies and other funding sources to prevent homelessness and rapidly-rehouse newly homeless families.
High	3.) Continue to support Shelter Services to the maximum allowed by ESG. Encourage shelter providers to implement programs that target economic self-sufficiency to minimize the shelter stay.

Application Process

Limitations of the RFP

The City of Arlington Community Development and Planning Department, Grants Management Division reserves the right to accept or reject any and all proposals received. In addition, the City of Arlington

reserves the right to negotiate with all qualifying organizations or to cancel in whole or in part a request for proposals if deemed in the best interest of City of Arlington as it relates to the city priorities.

Eligible Applicants

Non-profit organizations, owners, developers, and sponsors who deliver services to low- to moderate-income households within the City of Arlington's service area may apply for funding. All non-profit organizations must have their non-profit status with supporting documentation from the IRS at the time of application to receive funding through the City of Arlington.

Eligible Activities

Eligible activities in order of priority include:

- **Homebuyer housing:**
 - ✓ Acquisition, Demolition, and Reconstruction of properties for sale to low- to moderate- income homebuyers
 - ✓ Acquisition and New construction of properties for sale to low- to moderate- income homebuyers.
 - ✓ Acquisition and Rehabilitation of homebuyer properties for sale to low- to moderate- income homebuyers

Minimum Criteria for Receipt of Funding

The proposed project must:

- Provide services that primarily benefit low- to moderate-income households residing in the City of Arlington;
- Meet at least one of the Consolidated Plan Measurable Objectives; and

The application must be completed in a professional and accurate manner, with all sections thoroughly completed and sufficient detail to demonstrate knowledge and capacity to carry out the proposed project.

Organizations must demonstrate the financial viability to operate a federally-funded project strictly on a reimbursement basis. City of Arlington funds are awarded to organizations on a reimbursement basis only. This means that funds will be available to the organization *after* it has paid for eligible project costs. However, no costs incurred prior to contract approval may be reimbursed. A financially viable organization is one that is able to:

- Operate for a minimum of 90 days pending reimbursement without financial hardship;
- Demonstrate an existing and consistent cash flow; and
- Have a separation of duties for internal controls, etc.

Organizations must be in good standing with the City of Arlington, (i.e. have no outstanding reporting delinquencies, outstanding monitoring findings, or program/project capacity issues) in order to be considered for funding.

Available Funds

The City is making a total of approximately \$125,651 available for PY2016 HOME CHDO projects through this Request for Proposal. HOME funds are used for highly innovative, sustainable, single-family housing projects that can compose and substantiate a proposal using a maximum use of local partnerships and resources. Funding availability is dependent upon receipt of HUD allocations for PY2016 (July 1, 2016-June 30, 2017) and/or determinations of local priority needs.

Conflict of Interest

The standards in 2 CFR Part 200, Subpart B Conflict of Interest, provide that no employee, officer, or agent shall participate in the selection, award, or administration of a contract supported by federal funds if a real or perceived conflict of interest would be involved. Such a conflict would arise when an employee, officer, or agent, any member of his or her immediate family, his or her partner, or an organization which employs or is about to employ any of the parties indicated herein has a financial or other interest in the firm selected for an award.

Effective May 25, 2007, Chapter 176 of the Texas Local Government Code requires all vendors seeking to contract with the City of Arlington for the sale or purchase of property, goods, or services to file a conflict of interest questionnaire with the City Secretary.

Debarment & Suspension Status

The U.S. Department of Housing and Urban Development requires verification status of all contractors and non-profit agencies via the online System for Award Management (SAM) <https://www.sam.gov>. Any parties listed by SAM as debarred or suspended are not eligible to apply for CDBG funding.

Review Criteria

The review process for proposals requesting grant funds consists of a review by City staff, citizen review by the United Way Arlington (UW-A) Grant Review Committee, review by the NRSA Steering Committee (for proposals that impact the NRSA), review by the Community and Neighborhood Development Committee of the City Council, a 30-day public comment period for citizen input, City Council review and approval, and HUD review and approval.

1. Staff review verifies that the proposal is an eligible activity as determined by HUD guidelines. If a proposal is determined to be ineligible, the applicant is informed and the proposal is withdrawn from consideration. In cases where there is uncertainty as to the proposal's eligibility, the City's HUD representative will be consulted for a decision. Staff will evaluate proposals based on information provided in the submitted application and will not request missing information.
2. The UW-A Grant Review Committee (GRC) reviews the proposals. This committee evaluates the content of the proposals, determines the need for services, and ensures that services are not being provided by another entity. **The GRC will not request missing information.** UW-A/GRC scores and rankings are presented to the City Council's Community and Neighborhood Development Committee along with the proposal. The NRSA Steering Committee may also provide input on projects that are located in or provide service to the Central Arlington NRSA.

3. The Community and Neighborhood Development Committee provides a mechanism by which community needs may be recognized, prioritized, and recommended to the City Council for funding. Recommendations for grant awards are incorporated into the draft annual Action Plan for citizen input.
4. Citizen input is obtained through the public hearing process. Notices are published in local newspapers two weeks in advance of all hearings, specifying date, time, and references to proposed activities. The City Council reviews and approves the Annual Action Plan by resolution following the citizen comment period. Each applicant will be notified in writing regarding their grant application. Final review and approval of the Action Plan is completed by HUD.

If residents are unable to attend the public hearing, they may forward comments in writing to the City of Arlington. Written questions may also be faxed to 817-459-6253.

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Grants Management
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Criteria for Decision Making

United Way-Arlington annually assists the City by providing a citizen review of proposals through the Grant Review Committee. The mission of United Way-Arlington is to provide human service planning for Arlington that encourages cooperation and collaboration and facilitates the implementation of community solutions. The UW-A Grant Review Committee reviews and evaluates grant proposals with confidentiality and objectivity, using published scoring criteria.

The City Council makes the final decisions regarding project funding, which are then incorporated into the overall HOME budget submitted to HUD in the annual Action Plan. Once funds are received from HUD, the City executes contracts with each of the selected organizations. If the approved funding level is different than that requested on the proposed budget, a revised budget and performance measurement system must be submitted before a contract is executed. This RFP does not commit the City to award a contract for any costs incurred in the preparation of this proposal. Furthermore, the City reserves the right to accept or reject any and/or all proposals received because of this request, to negotiate with a qualified source, or cancel in part, or in its entirety this RFP.

RFP Process

Request for Proposals Workshop, Arlington City Hall 3rd Floor,	October 23, 2015
Deadline for written questions	November 9, 2015
Questions and Answers available on City website	November 18, 2015
Deadline for submission of CDBG applications (3:00 p.m.)	December 4, 2015
Deadline for submission of ESG and HOME applications (3:00 p.m.)	December 11, 2015
Staff review of proposals	December 2015
United Way Arlington Grant Review Committee Reviews	December 2015 – January 2016
City Council Community and Neighborhood Development	February 2016
30-day citizen comment period and public hearing	March – April 2016
City Council approval of Action Plan	April 2016
Applicants notified regarding awards	May 2016
HUD review and approval	June 2016
Subrecipient Workshop, Arlington City Hall 3rd Floor, 10AM	June 16, 2016
Contract Year begins	July 1, 2016

Monitoring and Recordkeeping Contract Procedures

Contracts with CHDO's will be negotiated individually with City staff.

Recordkeeping

Accurate recordkeeping is crucial to the successful management of grant funded activities. Insufficient documentation is likely to lead to monitoring findings, and these findings will be more difficult to resolve if records are missing, inadequate, or inaccurate. Organizations receiving funding must complete an application for each household while maintain supporting documentation in participant files. If it is determined at the time of monitoring that the supporting documentation is incorrect or insufficient, reimbursement will be denied for costs associated with any and all ineligible expenses.

Access to Records/Maintenance of Records

HUD and the Comptroller General of the United States or their authorized representatives have the right to access all project records. Recipients of HUD funds must keep documentation on funded projects for the applicable timeframes listed in 24 CFR Part 92.

Inadequate Performance or Non-Compliance

If an organization and/or its HOME-funded project are found to be in non-compliance with federal regulations and/or with any of the terms stipulated in the contract, funding can be withheld until full

compliance is achieved or permanently as deemed necessary by the City of Arlington. In the event that compliance cannot be achieved, funding may be terminated and repayment may be required. Reimbursements, if any, will resume when acceptable reporting procedures are met as required by the City of Arlington.

If project performance is found to be substantially inadequate in meeting the stated objectives and measures, the organization may be required to submit a written explanation. Inadequate project performance may adversely affect any and/or all future HOME funding requests to the City.

City of Arlington Policy and Practices

DUNS Number

HUD requires a DUNS number to track some federally-funded projects. The DUNS number is a unique nine-character number that identifies your organization. It is a tool of the Federal government to track how Federal money is distributed. Most large organizations, libraries, colleges, and research universities already have DUNS numbers. Ask your grant administrator or chief financial officer to provide your organization's DUNS number.

If your organization does not have a DUNS number, use the Dun & Bradstreet (D&B) [online registration](#) to receive one free of charge. See <http://fedgov.dnb.com/webform/>. The following information is needed to obtain a DUNS number:

- Name of organization
- Organization address
- Name of the CEO/organization owner
- Legal structure of the organization (corporation, partnership, proprietorship)
- Year the organization started
- Primary type of business
- Total number of employees (full and part time)

Obtaining a DUNS number places your organization on D&B's marketing list which is sold to other companies. You can request not to be added to this list during your application.

Online RFP Guidance

This guidance will give step-by-step instructions for completing the PY2016 HOME RFP. If you have a question not discussed in this guidebook, please submit your question to Darwin Wade at Darwin.Wade@arlingtontx.gov or 817-459-6221. Frequently Asked Questions will be released on November 18, 2015.

Creating an Application

Go to <http://webapps.arlingtontx.gov/dnp/blockgrants/> and click “New Applicant? Click here”



Complete all fields provided.

Program Year	Pre-populated
Organization Name	Self-explanatory
Fed. Tax ID No.	Enter your organization’s federal tax ID number issued by the IRS.
Grant Type	For HOME applicants, choose HOME. If your organization is applying for more than one source of funding, separate applications must be submitted for each type.
Program Name	Self-explanatory
Contact Person	Self-explanatory
Mailing Address	Self-explanatory
City	Self-explanatory

State	Self-explanatory
Zip Code	Self-explanatory
Contact Phone	Must be XXX-XXX-XXXX format
Contact Fax	Self-explanatory
Contact Email	Self-explanatory

Check the Certification box, and enter the verification code. Click Submit.

I have read and understand the requirements for the grant program indicated above as outlined in the Application Guidebook and the corresponding Request for Proposals. I acknowledge that this application will be considered incomplete if I fail to submit all required documents by the deadline stated in the Request for Proposals. I further acknowledge that all proposals submitted will become part of the City of Arlington's official files and subject to the Public Information Act. I certify that I am not uploading any application files that include viruses or other software that may harm City of Arlington property.

Verification Code

 Type the code shown:

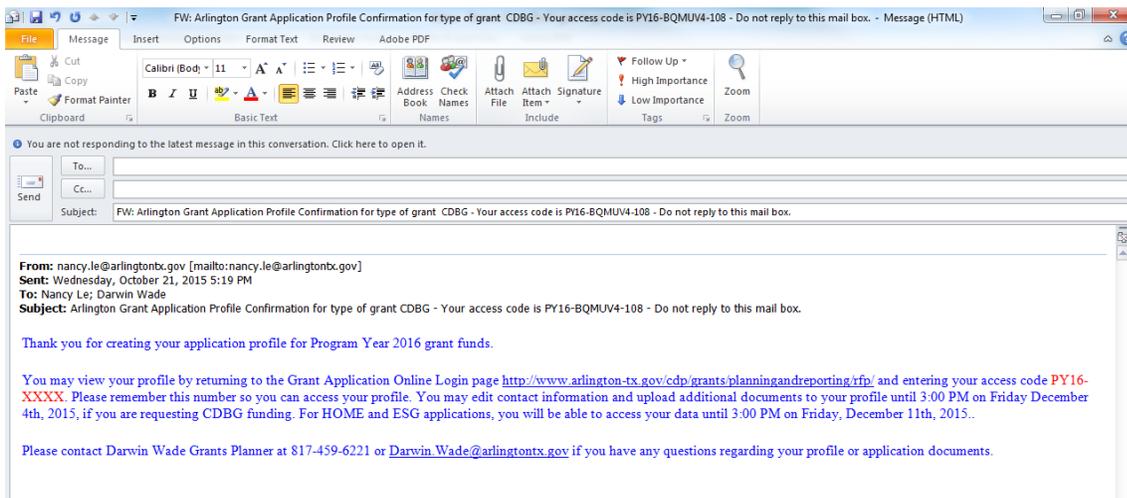
[Show another code](#)

[Previous Screen](#)

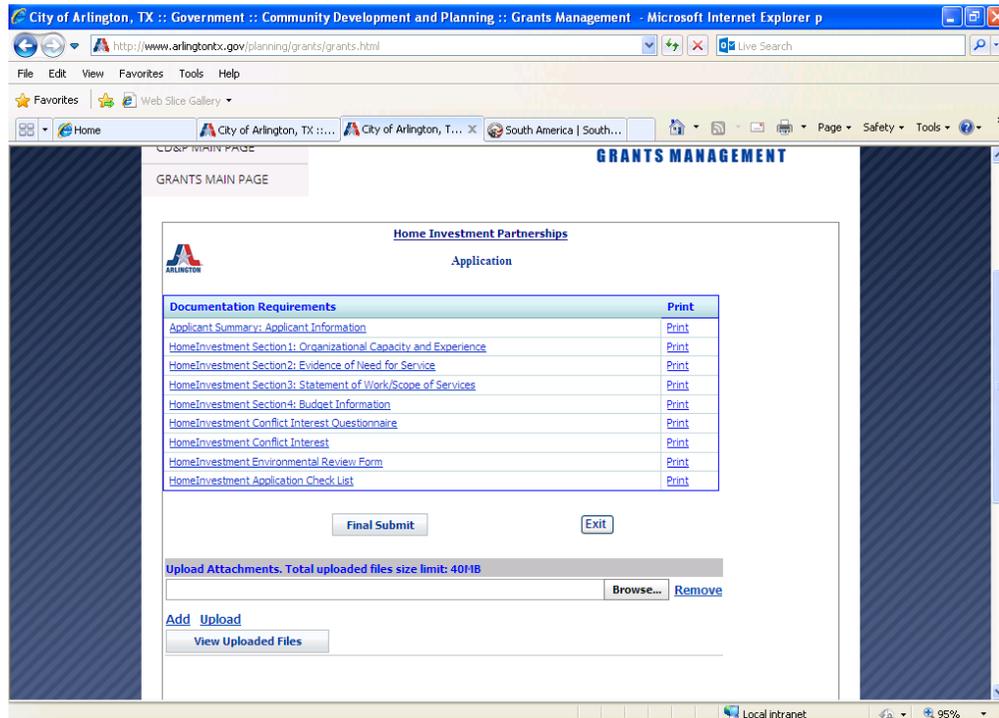
Once submitted, the Contact Email entered above will receive an Access Code. The application may be edited until the due date. DO NOT lose this Access Code. The code may be shared with other staff, but cannot be changed once the code is given, unless a new application is created. Once the applicant clicks “Submit”, the application will appear without having to log-in. If you don’t receive an email with the Access Code; however, contact City Staff immediately.

Logging In to the Application

The email with the Access Code will look like the image below, with the Access Code highlighted in red. Other important information is included in this email, so it is important to save it until the application has been submitted.



Click on the link provided in this email. If you will be accessing this application frequently, it might be useful to bookmark the link to quick access. To enter the application, enter your unique Access Code, and begin the application. The main menu screen should look like this:



Applicant Summary

Many of the fields in this section will be pre-populated with information provided in the applicant profile completed to create an account. Any of the pre-populated fields may be changed and saved at this point, if necessary.

Type of Organization	Self-explanatory
Name of Organization	Self-explanatory
Program Name	Self-explanatory
Tax ID #	Self-explanatory
DUNS #	Self-explanatory
Mailing Address	Mailing address (should pre-populate from applicant profile)
City	Self-explanatory
State	Self-explanatory
Zip	Self-explanatory
Physical Address	If your organization has a different physical address than mailing address, enter it here. Otherwise, you can click "Check if same as mailing address" to pre-populate these fields

City	Self-explanatory
State	Self-explanatory
Zip	Self-explanatory
Contact Person	The main contact person for this application
Telephone	Please insert the contact's direct line, if possible
Fax	Self-explanatory
Email Address	Application contact email (should pre-populate)

Contact Table

Insert a contact person for each contact type using the table and the instructions below.

To add a contact, click "Add" at the bottom of the table

Provide the following information for a **general contractor/construction manager**, a **financial contact person**, the **person who wrote the application**, and an **authorized contact**. Include attachments of job descriptions and resumes for key staff.

Contact Type	Name	Title	Phone	Email
No data to display				
Add				

General Contractor/Construction Manager: Person who works with the project on a daily basis and can answer questions.
Application Contact: Person who wrote this application.
Authorized Contact: Person authorized to make commitments on behalf on the organization.
Finance Contact: Person who manages and can answer questions about the organization's budget.



Complete all of the fields in the table, then click "Update".

Provide the following information for a **general contractor/construction manager**, a **financial contact person**, the **person who wrote the application**, and an **authorized contact**. Include attachments of job descriptions and resumes for key staff.

Contact Type	Name	Title	Phone	Email
Contact Type <input type="text"/>	Name <input type="text"/>	Title <input type="text"/>	Phone <input type="text"/>	Email <input type="text"/>
Update Cancel				
Add				

General Contractor/Construction Manager: Person who works with the project on a daily basis and can answer questions.
Application Contact: Person who wrote this application.
Authorized Contact: Person authorized to make commitments on behalf on the organization.
Finance Contact: Person who manages and can answer questions about the organization's budget.



The new contact should appear like this:

Provide the following information for a **general contractor/construction manager**, a **financial contact person**, the **person who wrote the application**, and an **authorized contact**. Include attachments of job descriptions and resumes for key staff.

Contact Type	Name	Title	Phone	Email
Edit Delete Program Contact	Sarah Stubblefield	Grants Planner	817-459-6232	Sarah.Stubblefield@arlingtontx.gov
Add				

General Contractor/Construction Manager: Person who works with the project on a daily basis and can answer questions.
Application Contact: Person who wrote this application.
Authorized Contact: Person authorized to make commitments on behalf on the organization.
Finance Contact: Person who manages and can answer questions about the organization's budget.

Continue for all types of program contacts (General Contractor/Construction Manager, Application, Authorized, and Finance contacts are required).

Program Summary

Program year	Pre-populated
Amount Requested	Total HOME request amount
Other funding	All other funding for project
Total Program Cost	Pre-populated
% HOME funds of total Program Cost	Pre-populated
Match Funds	Total amount of anticipated match funds
Matching sources	Insert eligible forms of match sources here
Brief Program Description	Provide 4-6 sentences to describe your program.

Click "Save" before moving to the next screen

Section 1: Organizational Capacity and Experience

A. Provide the information as explained in this table:

Year of Incorporation	Self-explanatory
Years of direct experience with the program	How long has your organization been operating this program?
Organizational overview of agency	In the text box provided, insert a detailed organizational overview of the organization history and capacity, making sure to include the elements listed in the directions.

B. Previous Experience with Federal Funds

1. Does your organization have previous experience with projects involving federal funds?
If you answer no, the application will skip to question number 4.
2. If yes, how many years of previous experience do you have with federally funded projects?
Briefly describe your experience.
3. If you have previous experience with federal projects was your project completed as planned? If no, explain why.
4. Was the organization required to pay back funds in violation of regulations, etc? If yes, indicate the actions cited.

- If your organization does not have experience with federally funded projects, how will you ensure adherence to federal requirements? List examples of related experience.

C. Previous Experience with City of Arlington Projects

- Do you have previous experience with City of Arlington Projects? If yes, please describe below, including the results of the project.
- Has your organization received HUD funds through the City of Arlington? If no, you will be directed to question 5. If yes, describe.
- If you are a prior recipient of City of Arlington HUD funds, what was the date (mm/dd/yyyy) of your last City of Arlington monitoring visit? If your program has not yet been monitored, contact grants staff to determine your next monitoring date.
Use the calendar provided to choose the appropriate monitoring date.
- Were there any findings and/or concerns in your last monitoring? If yes, describe.
- If your organization has not received funds through the City of Arlington, describe your experience managing projects of a similar type and size. Limit 650 characters.

D. Board of Directors

Complete the table below for each current member of the applicant's Board of Directors. If your organization does not have a board of directors (e.g., governmental entity), upload an explanation of why this form is not applicable (Identify board office held as applicable).

Insert all Board members into the table using the instructions below:

Click “Add New Board Member”

D. Complete the table below for each current member of the applicant's Board of Directors. If your organization does not have a board of directors (e.g., governmental entity), upload an explanation of why this form is not applicable (Identify board office held as applicable).

Member Name	Arlington Resident	Board President	Company Affiliation	Job Title	Current Board Term	Length Of Service	Sex	Race	Ethnicity	CHDO Low-income Rep
No data to display										
<input type="button" value="Add Board Member"/>										



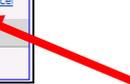
Complete all fields for each Board Member. Then click “Update”.

D. Complete the table below for each current member of the applicant's Board of Directors. If your organization does not have a board of directors (e.g., governmental entity), upload an explanation of why this form is not applicable (Identify board office held as applicable).

Member Name	Arlington Resident	Board President	Company Affiliation	Job Title	Current Board Term	Length Of Service	Sex	Race	Ethnicity	CHDO Low-income Rep	
Member Name	<input type="text"/>	Arlington Resident <input type="checkbox"/>	Board President <input type="checkbox"/>	Company Affiliation <input type="text"/>	Job Title <input type="text"/>	Current Board Term <input type="text"/>	Length Of Service <input type="text"/>	Sex <input type="checkbox"/>	Race <input type="checkbox"/>	Ethnicity <input type="checkbox"/>	CHDO Low-income Rep <input type="checkbox"/>

[Update](#) [Cancel](#)

[Add Board Member](#)



Member Name	Self-explanatory
Arlington Resident	Is the member an Arlington resident?
Board President	Yes/No
Company affiliation	Self-explanatory
Job Title	Self-explanatory
Current Board Term	What is the current term of the board member?
Length of Service	How long has the board member served?
Sex	Male/Female
Race	Asian, Black/African-American, White, Other
Ethnicity	Hispanic/non-Hispanic
CHDO Low-Income Rep	Indicate if this board member is considered a low-income representative on the board, per HUD regulation.

Section 2: Evidence of Need for Service

Part 1 – Priority Activities

Select the geographic region where your proposed project is located.

Choose City-Wide, Central Arlington NRSA, or East Arlington Target Area.

Choose one of the PY2015-2019 Consolidated Plan measurable objectives that apply to your proposed project.

- a. Owner-occupied housing: Acquisition, Demolition, Reconstruction (High)
- b. Owner-occupied housing: Acquisition, New construction (High)
- c. Owner-occupied housing: Acquisition, Rehabilitation (High)
- d. Mixed-use development (medium)

Use the text box to explain any additional target areas or objectives your project will address.

Part 2 – Activity Type

- A. Is the proposed project an eligible CHDO set-aside activity?
 - a. Answer Yes or No.
- B. Select the activity type that best relates to your project.
 - a. Although you may have a multi-faceted project, choose the activity type that BEST represents your project.

Part 3 – Project Beneficiaries

A. Target Income Group

Indicate the number of units or households to be served in each Target Population.

Enter the number associated with each target population. The total is pre-populated.

0-30% of the Area Median Income	Self-explanatory
31-50% of the Area Median Income	Self-explanatory
51-60% of the Area Median Income	Self-explanatory
61-80% of the Area Median Income	Self-explanatory
Market Rate Income	Self-explanatory
Total	Pre-populated

B. Identify which population is your organization’s priority. More than one box can be checked.

B. Priority Population

Disabled Homeless Elderly
 Families AIDS Single/Non Elderly



C. Identify which household type will be targeted. More than one box can be checked.

C. Target Household Type

Individuals Small (2-4) Large (5+)



Part 4 – Additional Project Support

For this project, have you applied (or will you apply) for funding from other sources? Answer Yes or No. If yes, complete the table.

To complete the table, click “Add Funding”.

Part 4 – Additional Project Support
 For this project, have you applied (or will you apply) for funding from other sources?
 Yes No

Action Controls	Funding Source	Amount	Status ID	Date Awarded
No data to display				
		\$0.00		
<input type="button" value="Add Funding"/>				



Complete the fields then click “Update”.

Part 4 – Additional Project Support
 For this project, have you applied (or will you apply) for funding from other sources?

Yes No

Action Controls	Funding Source	Amount	Status ID	Date Awarded
	Funding Source <input type="text"/>	Amount <input type="text" value="\$0.00"/>	Status ID <input type="text"/>	Date Awarded <input type="text"/>
				Update Cancel
		\$0.00		
<input type="button" value="Add Funding"/>				

Funding Source	Self-explanatory
Amount	Self-explanatory
Status ID	Pending, Approved, Denied
Date Awarded	Choose the date awarded, a future award date, or leave blank if unknown

Part 5 – Project Location

- A. All projects must be located within the city limits of Arlington. Is the project located in Arlington? If yes, identify the project location by describing the project’s legal description, if known. Describe the location of the project in comparison to identified target areas and area amenities. Describe the need for service in this particular area. Upload maps of the project location and the project service area as an attachment to this application.

Part 6 – Market Analysis

- A. Develop a need statement that clearly states the purpose for the project. Discuss the causes of the problem, the resulting need within the community, and the significance of the project to the beneficiaries of the community. Support your statement with relevant statistics. In addition, you **must** include an overview of the market, a market survey, a market study and documentation of need, and a marketing plan.
- B. Affirmative Marketing Activities: Outline the proposed marketing plan (Homeownership and Rental Housing projects only) such that it describe the methods for informing the public, owners, and potential tenants about federal fair housing laws. Describe procedures to be used to inform and solicit applications for persons in the housing market area who are not likely to apply for housing without special outreach. Applicant records must describe actions to be taken to affirmatively market units and assess the results of those actions. Describe in detail minority Outreach, the prospective resident profile, resident services and activities (if applicable), and maintenance services (if applicable).

Part 7 – Community Support

For new construction or acquisition of vacant land for future housing projects include evidence of community support or neighborhood notification for the proposed project. Describe the measures your organization has taken to garner community support in the space below. Upload

the neighborhood notification letter and mailing list, letters of support, and notices of meetings or public hearings, if applicable, as attachments to this application

Section 3: Statement of Work & Scope of Services

Part 1 – Project Development

Do you have site control? (Or Earnest Money Agreement executed if applying to acquire)	Yes or No
If yes, provide date site control was acquired.	Select the date using the calendar provided
If no, explain how you intend to secure site control prior to the start of this project. Include the anticipated acquisition date of right-of-way, easements or permissions to encroach.	Explain.
Will your project involve temporary or permanent relocation of residents or businesses?	Yes or No
Will your project involve the construction or rehabilitation of 12 or more HOME-assisted units?	Yes or No
If yes, explain	Explain how your organization will meet the Davis-Bacon Labor Standards. If applicable, upload your organization’s full policy as an attachment to this application
Describe the property analysis and the proposed improvements to property	Use the text box provided to describe the property analysis and the proposed property improvements

Part 2 – Project Development Timeline

A. Work Plan.

Describe with details the project timeline from acquisition through final sale or lease of units. Include timelines, activity flow charts, and the recruitment/marketing plan as applicable to your proposed project.

B. Implementation Schedule.

Contract Start Date	Select the date.
Initiation of Marketing and Outreach	Select the date.
Initiation of Eligibility Determinations	Select the date.
Completion of Pre-Commitment Activities	Select the date.
50% of Funds Expended	Select the date.
100% of Funds Expended	Select the date.
Project Completion	Select the date.
Final sales of unit(s) to homebuyers	Select the date.

C. Production Schedule: Complete the schedule in the table by adding months in which Home funds will be expended.

Click “Add Schedule”

C.. Production Schedule: Please complete the following schedule (by adding months in which Home funds will be expended).

Month Year	Home Expended Amount	# of Housing Units completed	# of Housing Unit Occupied
No data to display			
	\$0.00	\$0.00	\$0.00

[Add Schedule](#)

Complete the fields then click “Update”.

C.. Production Schedule: Please complete the following schedule (by adding months in which Home funds will be expended).

Month Year	Home Expended Amount	# of Housing Units completed	# of Housing Unit Occupied
Month Year	Home Expended Amount	# of Housing Units completed	# of Housing Unit Occupied
	\$0.00	0	0
	\$0.00	\$0.00	\$0.00

[Add Schedule](#) [Update](#) [Cancel](#)

Month Year	Select the month and year
Home Expended Amount	Self-explanatory
# of Housing Units completed	Self-explanatory
# of Housing Unit Occupied	Self-explanatory

Part 3 – CHDO Operating Projects Only

Are you a qualified CHDO?	Yes or No
Government:	Name of the state or local government you are affiliated with.
Name of Contact Person:	Name of government contact person to verify CHDO affiliation
Provide the date of certification:	Self-explanatory
Please indicate which type of project you are proposing to implement.	Select from the list.
If you have a project ready to implement, please provide a brief description of the proposed project and use of operating costs.	Provide brief description in text box

Section 4: Budget Information

Part 1 – Sources and Uses

- A. **Revenue/Sources of Income:** Complete the table with the program sources of revenue using the instructions below:

Click “Add Budget Revenue”.

Source of Revenue	Estimated Home Amount	Estimated Other Sources Amount	Total Estimated Revenue
No data to display			
	\$0.00	\$0.00	\$0.00
<input type="button" value="Add Budget Revenue"/>			

Complete each field then click "Update".

Source of Revenue	Estimated Home Amount	Estimated Other Sources Amount	Total Estimated Revenue
Source of Revenue <input type="text"/>	Estimated Home Amount <input type="text" value="\$0.00"/>	Estimated Other Sources Amount <input type="text" value="\$0.00"/>	
			\$0.00
Update Cancel			
<input type="button" value="Add Budget Revenue"/>			

Please explain each source of revenue in the box below the Source Revenue table.

In the next text box, provide detailed development budget and narrative for each project.

- B. **Uses/Expenses of Proposed Project:** Complete the table below listing all anticipated expenses for the total development of the proposed project, identifying all expenses that will be used as a source of match. Be sure to include hard and soft costs, developer fees, and construction management fees (if any).

Click "Add New Budget Expense".

Activity Type (Hard and Soft costs)	Estimated Expense (HOME)	Estimated Expense (Other)	Total Estimated Expense	Is this a source match?
No data to display				
	\$0.00	\$0.00		\$0.00
<input type="button" value="Add New Budget Expense"/>				

Complete each field then click "Update".

Activity Type (Hard and Soft costs)	Estimated Expense (HOME)	Estimated Expense (Other)	Is this a source match?
Activity Type (Hard and Soft costs) <input type="text"/>	Estimated Expense (HOME) <input type="text" value="\$0.00"/>	Estimated Expense (Other) <input type="text" value="\$0.00"/>	Is this a source match? <input type="text"/>
		Update Cancel	
		\$0.00	\$0.00
Add New Budget Expense			



Activity Type (Hard and Soft costs)	Include budget line items for all hard and soft costs here
Estimated Expense (HOME)	Include all requested HOME funds for this project in this field. The total amount of this column should equal the total PY2016 HOME request for this proposal.
Estimated Expense (Other)	Include all other expenses for the proposed project in this field. This field plus the Estimate HOME Expense column should equal the total estimated project cost.
Is this a source match?	Yes or No

B1. Match Table: Complete the table and include all sources of match. All sources of match must be a permanent contribution to the HOME program.

Click “Add All New Match”.

B1.Match Table
Please include all sources of match in the table below (the total amount of match should equal the costs in the table above identified as a source of match). All match must be a permanent contribution to the HOME program.

Anticipated Date of Contribution	Match Type	Detail/Explanation	Amount
No data to display			
			\$0.00

Page 1 of 0 (0 items) ◀ ▶

[Add All New Match](#)



B2. Use the text box provided to explain any costs that are not usual, customary, or that made additional explanation.

C. Fiscal Management

C1. Working Capital and Letters of Commitment: Describe your organization’s line of credit or working capital for this project in the space below. Indicate the source of the working capital, and upload documentation to the application providing evidence of the source, interest rate, the real estate agent’s selling fee, and the selling agent’s percentage. For each source upload Letters of Commitment.

C2. Fiscal Management: Describe the organization’s fiscal management including external audit, record keeping, accounting systems, payment procedures, and audit requirements.

Conflict of Interest Questionnaire

Name of person doing business with local governmental entity.	Self-explanatory
Check this box if you are filing an update to a previously filed questionnaire.	Self-explanatory.
Describe each affiliation or business relationship with an employee or contractor of the local governmental entity who makes recommendations to a local government officer of the local governmental entity with respect to expenditure of money.	Use the text box to explain the relationship.
Describe each affiliation or business relationship with a person who is a local government officer and who appoints or employs a local government officer of the local governmental entity that is the subject of this questionnaire.	Use the text box to describe each relationship.
Is a local government officer receiving or likely to receive taxable income from the filer of this questionnaire?	Answer Yes or No.
Is the filer of the questionnaire receiving or likely to receive a taxable income from or at the direction of a local government officer AND the taxable income is not from the local governmental entity?	Answer Yes or No.
Is the filer of this questionnaire affiliated with a corporation or other business entity that a local government officer serves as an officer or director, or holds an ownership of 10 percent or more?	Answer Yes or No.
Describe any other affiliation or business relationship that might cause a conflict of interest.	Use this text box to describe any other professional relationships that may be deemed a conflict of interest.

Conflict of Interest

Does a Conflict of Interest exist within your organization?	Answer Yes or No.
I certify that no conflict of interest exists between the City of Arlington and (name of organization)	By checking this box, you certify that there is no conflict of interest between the City of Arlington and your Organization
Organization Name	Self-explanatory
I certify that no conflict of interest exists between subcontractor and (name of organization)	By checking this box, you certify that there is no conflict of interest between subcontractors and your organization.
Organization Name	Self-explanatory
I certify that a conflict of interest does exist between the City of Arlington and (name of organization)	By checking this box, you certify that a conflict exists between the City of Arlington and your organization.
Organization Name	Self-explanatory
I certify that a conflict of interest does exist between subcontractors and (name of organization)	By checking this box, you certify that a conflict exists between subcontractors and your organization.
Organization Name	Self-explanatory
Subcontractor	List the subcontractor with whom your organization has a conflict of interest
If a conflict exists, describe the nature of the conflict of interest below. Identify the individual, employment and the conflict or potential conflict, and their affiliation with your organization.	Use this text box to describe the nature of the conflict between the City of Arlington or a subcontractor and your organization.

Environmental Review Form

Type of funding requested	Pre-populated
Amount of Request	Requested HOME amount
CHDO Name	Pre-populated
Project Name	Pre-populated
Contact Person	Pre-populated
Contact Address	Pre-populated
Phone	Pre-populated
Fax	Pre-populated
Email	Pre-populated
Property Address	Address of the property where your project is located
Property Owner	Current property owner of the proposed project
Mailing Address	Mailing address of current property owner
Legal Property Description	Self-explanatory
Appraised Value	Current appraised value of the property
If project involves the acquisition, rehabilitation, renovation, or conversion of a physical structure, provide the date the structure was constructed	Use the calendar to select the date of construction.
Is property/project in 100 year floodplain?	Answer Yes or No.
Is property/project site within 1,000 feet of a highway, freeway or major arterial?	Answer Yes or No.
If yes, indicate which highway, freeway or major arterial	
Is property/project site within 500 feet of a railroad?	Answer Yes or No.
Is property/project site in Runway Clear Zone / Clear Zone?	Answer Yes or No.
Is the property/project site in an Accident Potential Zone?	Answer Yes or No.

Be sure to upload all required documents to the application. Use PDF when available.

Uploading Documents

Documents must be uploaded to support the completed application. All items must be attached as applicable for your application to be considered complete. Any items missing from the checklist when city staff and the Grant Review Committee review the application will count against the overall evaluation of the proposal. Name your documents with the organization name and the document type uploaded. For example: “City of Arlington – Program Specific Organization Chart.pdf”. Please upload .pdf documents when possible. Since the file sizes of documents fluctuate, we cannot recommend a specific number of pages to limit your uploaded documents to. If you run into problems while uploading documents, contact city staff as soon as possible.

Click “Browse” to look for the location of your document.

Upload Attachments. Total uploaded files size limit: 40MB

<input type="text"/>	Browse...	Remove
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[Add](#) [Upload](#)

[View Uploaded Files](#)

Click "Add" to add multiple files at one time.

Upload Attachments. Total uploaded files size limit: 40MB

<input type="text"/>	Browse...	Remove
<input type="text"/>	Browse...	Remove
<input type="text"/>	Browse...	Remove

[Add](#) [Upload](#)

[View Uploaded Files](#)

Click "Upload" to upload them into the application.

Upload Attachments. Total uploaded files size limit: 40MB

<input type="text"/>	Browse...	Remove
<input type="text"/>	Browse...	Remove
<input type="text"/>	Browse...	Remove

[Add](#) [Upload](#)

[View Uploaded Files](#)

To view all the uploaded files, click "View Uploaded Files".

Upload Attachments. Total uploaded files size limit: 40MB

<input type="text"/>	Browse...	Remove
<input type="text"/>	Browse...	Remove
<input type="text"/>	Browse...	Remove

[Add](#) [Upload](#)

[View Uploaded Files](#)

The "Upload File List" will look like this:

Upload File List

Page 1 of 1 (1 items) < Prev [1] Next >

Organization Name	Attachment File Name	
City of Arlington	11_Document's Name.docx	View Document

Page 1 of 1 (1 items) < Prev [1] Next >

Application Checklist

Please review the list of documentation required for this application.
Click on the box to confirm that the document is included in the application.

#	Application Document Description
<input checked="" type="checkbox"/>	Cover Letter (optional)
<input checked="" type="checkbox"/>	Job Descriptions and Resumes of key personnel and ESG-funded positions
<input type="checkbox"/>	Program-Specific Organizational Chart
<input type="checkbox"/>	Maps of Project Location and Project-Service area map
<input type="checkbox"/>	Community Support Documents: neighborhood notification letter, letters of support, and notices of public meetings/hearings
<input type="checkbox"/>	Non-Profit documentation from IRS
<input type="checkbox"/>	Minutes authorizing submittal of proposal
<input type="checkbox"/>	Articles of Incorporation
<input type="checkbox"/>	By-laws
<input type="checkbox"/>	Organizational Chart (not program specified)
<input type="checkbox"/>	Organizational Budget (not program specific)
<input type="checkbox"/>	Financial Audit/Certified Financial Statement
<input type="checkbox"/>	Director's and Officers' Liability and Errors and Omissions Insurance
<input type="checkbox"/>	Policies and Procedures for employees
<input type="checkbox"/>	Internal Control Policies and Procedures (if not included above)
<input type="checkbox"/>	Code of Conduct listing prohibited behavior for board and employees
<input type="checkbox"/>	Design Plans (preliminary or final)
<input type="checkbox"/>	Earnest Money Agreement (if applicable, included a copy of a cancelled check)
<input type="checkbox"/>	Appraisal of Property
<input type="checkbox"/>	Property Survey map
<input type="checkbox"/>	Working Capital documentation
<input type="checkbox"/>	Letters of Commitment
<input type="checkbox"/>	Relocation of Residents or Business Policy
<input type="checkbox"/>	Marketing Plan
<input type="checkbox"/>	Cost Estimates

Click "View Uploaded Files" to review the documents uploaded.

Upload Attachments. Total uploaded files size limit: 40MB

[Browse...](#) [Remove](#)

[Add](#) [Upload](#)

[View Uploaded Files](#)

Printing Documents

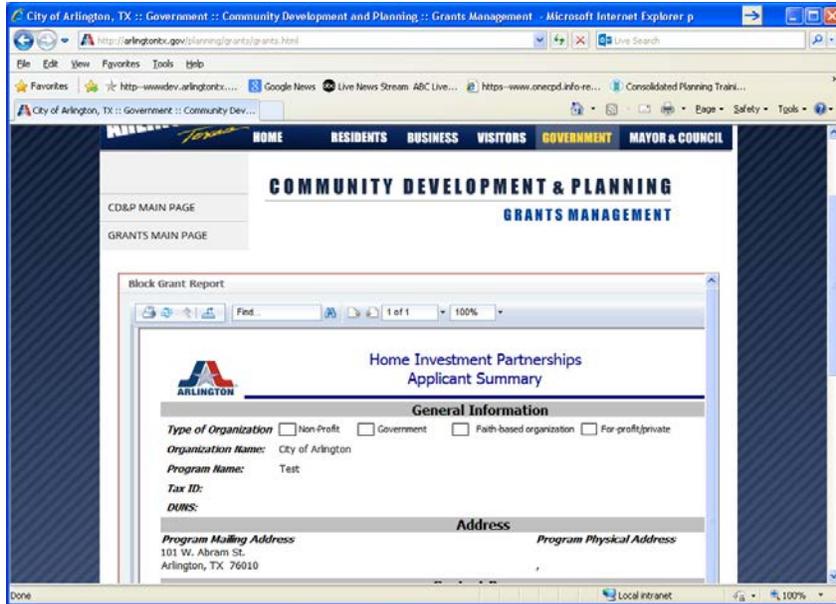
A. On the "Menu" page, click "Print" next to the desired section.

Home Investment Partnerships
Application

Documentation Requirements	
Applicant Summary: Home Investment Applicant Information	Print
Home Investment Section1: Organizational Capacity and Experience	Print
Home Investment Section2: Evidence of Need for Service	Print
Home Investment Section3: Statement of Work/Scope of Services	Print
Home Investment Section4: Budget Information	Print
Home Investment Conflict of Interest Questionnaire	Print
Home Investment Conflict of Interest	Print
Home Investment Environmental Review Form	Print
Home Investment Application Check List	Print

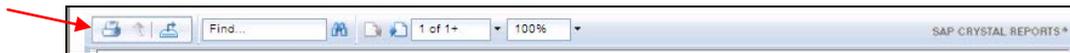
[Final Submit](#) [Exit](#)

The report page will open in the same window.



B. The bar on top of the page offers you multiple options.

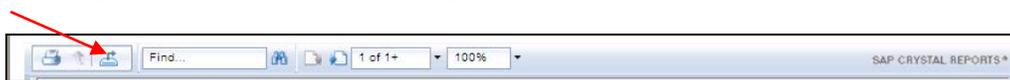
B1. Click the Print icon to print the document.



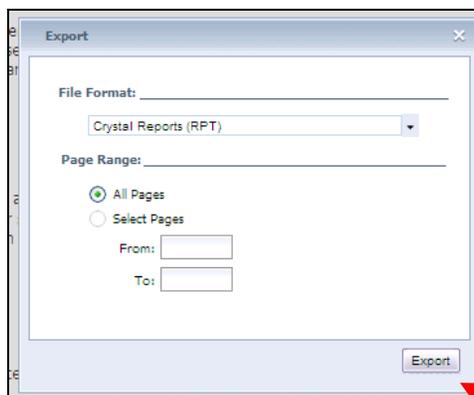
The Print window will appear.

Select your options and click print.

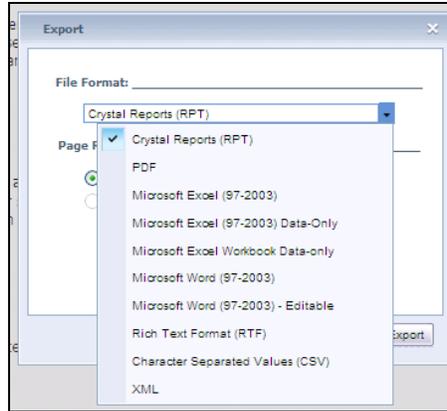
B2. You can export the application to several Microsoft Word applications, including Word, Excel, and PDF. This can be helpful for saving the application for your organization's records (or for spell-checking/saving application elements). To begin, click the Export icon to export the document.



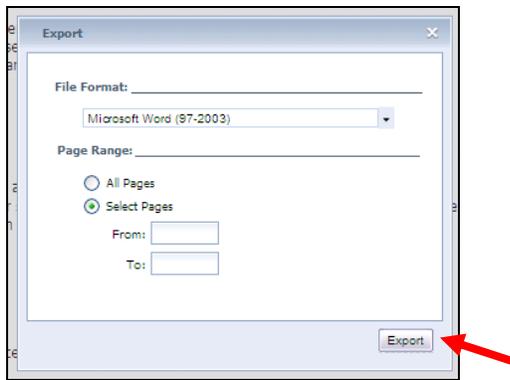
The Export window will appear.



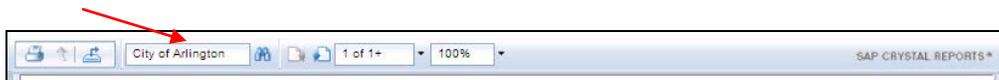
Click on the arrow to select the format you would like to export the document to.



Select the pages you would like to export, then click export.



B3. Click inside the "Find" box and type a word or combination of words you would to search in the document.

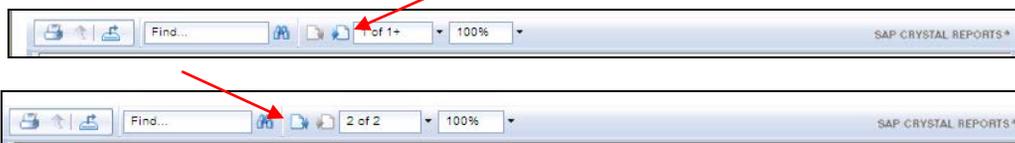


Click the find icon to proceed with the search.

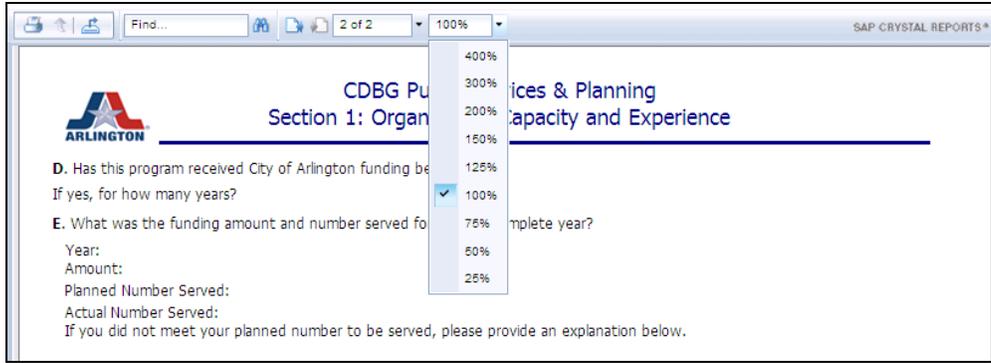


The document highlights every section containing the words searched.

B4. If there are multiple pages in a section, you can view the additional pages by clicking the page icon to move to the Next or Previous page.

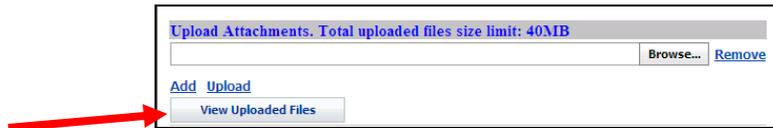


B5. Click the arrow next to the percentage box to zoom in or out of the page.



Final Submission of Application

After reviewing all the documents submitted in the Application Checklist, go to the Menu page. Before the final submission, you can upload more files and review the uploaded files.



Click on “Final Submit” to submit your application.



Once you click “Final Submit”, you should receive an email indicating that the application has been received. City Staff will also receive a notification email simultaneously. Any final submissions received after the deadline will not be considered for PY2016 HOME funds.

You must also submit a hard copy of the Organization Certification Form and a print out of the Applicant Summary section of the online application. This form can be downloaded at <http://www.arlington-tx.gov/cdp/grants/planningandreporting/rfp/>. Have an authorized signatory sign the form and attach a printed copy of the Applicant Summary section of the online application. The documents must be delivered to the Grants Management Division at City Hall by hand or by mail before the submission deadline on **Friday, December 11, 2015 at 3:00 PM**.

For Mail-in:

City of Arlington
Grants Management
Attn: Darwin Wade
P.O. Box 90231, MS 01-0330
Arlington, TX 76004-3231

For Hand-Delivery:

Arlington City Hall
One Start Center, 2nd Floor
101 W. Abram Street
Arlington, TX 76010