



**CITY OF JANESVILLE**

*Wisconsin's Park Place*

**CITY OF JANESVILLE  
Neighborhood and Community Services  
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) PROGRAM**

**&**

**ROCK COUNTY CONSORTIUM  
City of Beloit ~ City of Janesville ~ Greater Rock County  
HOME INVESTMENT PARTNERSHIP (HOME) PROGRAM**

**Request for Proposals  
INFORMATION and APPLICATION PACKET FOR  
FISCAL YEAR 2024**

NEIGHBORHOOD & COMMUNITY SERVICES DEPARTMENT  
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**CITY OF JANESVILLE/ROCK COUNTY CONSORTIUM  
CDBG/HOME Requests for Proposals**

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## **INTRODUCTION**

### **GENERAL INFORMATION:**

The City of Janesville announces the availability of funds for Community Development Block Grant (CDBG) and Rock County Consortium Home Investment Partnership (HOME) Programs Public Service projects. The funds are authorized under the Housing and Community Development Act of 1974, as amended, and are received from the U.S. Department of Housing and Urban Development (HUD). The City of Janesville administers these funds. The funds may be used for various activities which principally benefit low- and moderate-income persons.

This application provides information and instructions for organizations and agencies interested in applying for CDBG and HOME funds. Applications are available on the City of Janesville website.

#### **Eligible applicants:**

- Private non-profit organizations that have received 501(c)(3) federal tax-exempt status from the U.S. Internal Revenue Service (IRS) and are registered as non-profit corporations in the State of Wisconsin.
- Public Agencies

#### **Funding cycle:**

- Funding under the 2024 program year is anticipated to be available beginning in the first quarter of 2024. However, funds are not available until the City receives a contract from the Federal U.S. Department of Housing and Urban Development. Once the City receives a contract from the U.S. Department of Housing and Urban Development, a written agreement between the agency receiving funds and the City will be developed. Federal regulations do not allow an applicant to be reimbursed for expenses incurred prior to the written agreement with the City.

#### **Estimated Funds Available:**

- It is unknown how much funding may be available in 2024. At this time, Federal appropriations have not been made to various Federal agencies. Janesville is a formula grantee of the U.S. Department of Housing & Urban Development, Community Planning & Development, Community Development Block Grant and HOME Investment Partnership Programs, which means that following any Federal statutory Program set-asides, Janesville will be awarded remaining funds based on a formula defined at the Federal level. Subject to change, we are anticipating preparing the 2024 Annual Action Plan assuming funding level with 2023 primary allocations and including a contingency plan for responding to decreases or increases in actual funding.
- In 2023, the City of Janesville received \$459,320 in new CDBG grant funds and the Rock County HOME Consortium (Beloit, Janesville, Greater Rock County) received \$690,268. Additional funding is available through the re-payment of housing loans throughout the year. The estimated level of funding available for CDBG Public Services is \$90,000. HOME funds are available within the geographical boundaries of Rock County. The HOME Consortium has a set-aside of 16% of the total grant allocation for Community Housing Development Organizations (CHDO).

**APPLICATION SCHEDULE:** The following schedule has been developed for review of project applications and decisions on project funding.

- |                    |   |
|--------------------|---|
| June 21, 2023      | CDA held an initial public hearing on community development needs and on the general operation of the CDBG and HOME Programs. The CDA set priorities for funding activities that meet with the high priorities defined in the 2020-2024 Consolidated Plan and these programs. Requests for Proposal and CDBG/HOME application forms are available for proposals that are consistent with the Plan.  |
| August 4, 2023     | Non-profit applications due for requests for funding.   |
| August 16, 2023    | CDA hears presentations by non-profits regarding their requests for funding. The CDA may make a preliminary allocation of the 2024 Community Development Block Grant Program and HOME Program funds to any outside agencies.  |
| August 23, 2023    | Special, additional CDA meeting at which CDA makes a preliminary allocation of the 2024 Community Development Block Grant Program and HOME Program funds to any outside agencies.   |
| September 19, 2023 | Consolidated Plan (Action Plan) Summary published for comment; beginning of 30-day review period.   |
| October 18, 2023   | CDA holds a public hearing on the proposed allocation of the 2024 CDBG and HOME funds and Consolidated Plan (Action Plan) 2024 Action Plan and makes a recommendation to the City Council.  |
| November 13, 2023  | Regulatory deadline for the submission of the 2024 Annual Action Plan is 45 days prior to the start of the Program year. Historically, HUD has waived this deadline due to a lack of Federal appropriations and pending Formula allocation announcement. However as of the June 21, 2023 CDA meeting, no such waiver has been granted. If a waiver is granted, or HUD issues other guidance, the 2024 Annual Action Plan submission may be delayed. City Council will act on proposed budget and allocation of CDBG and HOME funds. |

**PRE-APPLICATION ASSISTANCE:** Staff will be happy to answer questions about the CDBG and HOME programs, this form and the application process, but cannot help write the application or offer comment on drafts. More information and technical assistance can be obtained from:

Kelly Bedessem, Housing Director at (608) 755-3052, [bedessemk@janesvillewi.gov](mailto:bedessemk@janesvillewi.gov) or  
Carrie Clark, Housing Financial & Rehabilitation Specialist at (608) 373-3441,  
[clarkc@janesvillewi.gov](mailto:clarkc@janesvillewi.gov) .

**APPLICATION DEADLINE:**

**An original copy of the full application and requested attachments must be received in our office before 4:30 P.M. Friday, August 4, 2023. Email submissions are preferred and should be in an Adobe PDF format. Submit applications to: [clarkc@ci.janesville.wi.us](mailto:clarkc@ci.janesville.wi.us)**

All proposals must be complete, signed and submitted in reproducible form. Proposals may be hand delivered to our offices located at Janesville City Hall, NCS Office, 18 North Jackson Street, First Floor, Janesville, WI 53548, during normal business hours, Monday through Friday, 7:30 a.m. to 4:30 p.m.

**OVERVIEW OF CDBG/HOME PROGRAM REQUIREMENTS:**

**CDBG NATIONAL OBJECTIVE** CDBG projects must principally benefit low income persons. Determination is based on limited clientele or area benefit activity. At least 70% of the CDBG funds must be spent on activities directly benefiting low income persons.

All activities funded under the CDBG program must meet one of the national objectives of:

1. Benefit low and moderate income persons; or
2. Prevent slums or blight; or
3. Meet an urgent community need (e.g. activity related to aftermath of a tornado or flood).

**Low- and moderate-income** is defined as having an income equal to or less than 80 percent of the area median income, adjusted for household size. The specific household income limits are based on U.S. Census Bureau estimates, updated and issued by HUD annually. <http://www.huduser.org/portal/datasets/il/il15/index.html>

**FY2023 HUD INCOME LIMITS for Rock County, Wisconsin** (effective 6/1/2023, subject to change)

Household Size	30%	50%	80%
1	18,150.00	30,250.00	48,350.00
2	20,750.00	34,550.00	55,250.00
3	24,860.00	38,850.00	62,150.00
4	30,000.00	43,150.00	69,050.00
5	35,140.00	46,650.00	74,600.00
6	40,280.00	50,100.00	80,100.00
7	45,420.00	53,550.00	85,650.00
8	50,560.00	57,000.00	91,150.00

Eligible activities for the CDBG program include the following: acquisition of blighted property; rehabilitation of property; acquisition, or construction of public works or facilities; assistance to for-profit and non-profit businesses and economic development organizations; code enforcement; special projects to remove architectural barriers; provision of public services; administrative and planning activities.

**HOME PROGRAM**

Eligible activities under the HOME program include acquisition, rehabilitation, or construction of affordable housing or direct tenant-based rental assistance on an on-going rather than emergency basis.

All activities funded by the HOME program must provide affordable housing for low income persons (see table above). Further, tenant households in HOME-funded rental housing must be low-income as defined by the HOME Program, or at or below 60% of Rock County Median.

2023 HOME Rental Income Limits	
Household Size	60%
1	36,300.00
2	41,460.00
3	46,620.00
4	51,780.00
5	55,980.00
6	60,120.00
7	64,260.00
8	68,400.00

Activities funded by the HOME Program must remain ‘affordable’ based on the level of direct assistance provided to homebuyers and/or level of investment in a project.

**HOME Affordability Period**

\$0 - \$14,999	5 Years
\$15,000 - \$40,000	10 Years
Over \$40,000	15 Years
New Construction	20 Years

**ELIGIBLE ACTIVITIES and CONSOLIDATED PLAN CONSISTENCY:**

The Community Development Authority has re-affirmed the high priority needs, goals and objectives identified in the 2020-2024 Consolidated Plan for inclusion in the 2024 Annual Action plan:

A link to the full version of the 5-Year Consolidated Plan can be found at:

<https://www.janesvillewi.gov/departments-services/neighborhood-and-community-services> The following Housing, Homeless and Community Development Strategies were established:

**Housing Strategy – (High Priority)**

**Priority Need:** There is a need to increase the amount of affordable, decent, safe, and sanitary housing for homebuyers, homeowners, and renters.

**Objective:** Improve, preserve, and expand the supply of affordable housing for low- and moderate-income persons and families that is decent, safe, and sound.

**Goals:**

- **HS-1 Housing Construction** – Increase the number of affordable housing units in the consortia for owners and renters by assisting with acquisition, rehabilitation, development fees, and construction.
- **HS-2 Housing Rehabilitation** – Continue to assist with rehabilitating existing affordable housing units occupied by owners and renters in the consortia by addressing code violations, emergency repairs, energy efficiency improvements, handicap accessibility and lead hazard reduction.

- **HS-3 Homeownership** – Continue to assist low- and moderate-income homebuyers to purchase homes through down payment and closing cost assistance, including housing counseling.
- **HS-4 Emergency Rental Assistance** – Provide short term rental assistance or security deposit assistance for low- and moderate-income renters.
- **HS-5 Fair Housing** – Promote fair housing choice through education, training, and outreach in the City and Rock County HOME Consortium.

### **Homeless Strategy – (High Priority)**

**Priority Need:** There is a need for services and housing opportunities for homeless persons and persons or families at-risk of becoming homeless.

**Objective:** Improve the living conditions and support services available for homeless persons, families, and those who are at risk of becoming homeless.

#### **Goals:**

- **HMS-1 Housing** – Support the Continuum of Care's efforts to provide emergency shelter, transitional housing, permanent supportive housing, and other permanent housing opportunities.
- **HMS-2 Operation/Support** – Assist providers who operate housing or provide support services for the homeless and persons or families at-risk of becoming homeless.
- **HMS-3 Prevention and Re-Housing** – Assist the Continuum of Care's efforts in prevention of homelessness through anti-eviction activities and program for rapid re-housing.

### **Community Development Strategy – (High Priority)**

**Priority Need:** There is a need to improve the community facilities, infrastructure, public services, and the quality of life in the City of Janesville.

**Objective:** Improve the community facilities, infrastructure, public services, public safety, and transportation, along with the elimination of blighting influences in the City of Janesville.

#### **Goals:**

- **CDS-1 Public Services** – Improve and enhance public services, programs for youth, the elderly, disabled, and general social/welfare public service programs along with mental health for low- and moderate-income persons.
- **CDS-2 Code Enforcement** – Undertake code enforcement activities to maintain the existing housing stock in the City.
- **CDS-3 Clearance/Demolition** – Remove and eliminate slum and blighting conditions through demolition of vacant, abandoned, and dilapidated structures.
- **CDS-4 Accessibility Improvements** – Improve handicap accessibility improvements and removal of architectural barriers to public and community facilities.
- **CDS-5 Neighborhood Facilities** – Improve neighborhood facilities in the City.
- **CDS-6 Transportation** – Support the expansion of transportation options to assist low- and moderate-income residents in the City.

### **Administration, Planning, and Management Strategy – (High Priority)**

**Priority Need:** There is a need for planning, administration, management, and oversight of Federal, State, and local funded programs.

**Objective:** Provide sound and professional planning, administration, oversight, and management of Federal, State, and local funded programs and activities.

**Goals:**

**AMS-1 Overall Coordination** – Provide program management and oversight for the successful administration of Federal, State, and locally funded programs, including planning services for special studies, annual action plans, five-year consolidated plans, substantial amendments, consolidated annual performance and evaluation reports (CAPER), environmental reviews and clearances, fair housing, and compliance with all Federal, State, and local laws and regulations.

**Economic Development Strategy – (Low Priority)**

**Priority Need:** There is a need to increase employment, self-sufficiency, educational training, and empowerment for residents of the City of Janesville.

**Objective:** Improve and expand employment opportunities in the City for low- and moderate-income persons and families.

**Goals:**

- **EDS-1 Employment** – Support and encourage job creation, job retention, and job training opportunities.
- **EDS-2 Development** – Support business and commercial growth through expansion and new development.
- **EDS-3 Redevelopment** – Plan and promote the development, redevelopment, and revitalization of vacant and underutilized commercial and industrial sites.
- **EDS-4 Access to Transportation** – Support the expansion of public transportation and access to bus and automobile service to assist residents to get to work or training opportunities.

**Other Special Needs Strategy – (Low Priority)**

**Priority Need:** There is a need to increase housing opportunities, services, and facilities for persons with special needs.

**Objective:** Improve the living conditions and services for those residents with special needs, including the disabled population.

**Goals:**

- **SNS-1 Housing** – Increase the supply of affordable, accessible, decent, safe, and sanitary housing for the elderly, persons with disabilities, persons with HIV/AIDS, victims of domestic violence, persons with alcohol/drug dependency, and persons with other special needs through rehabilitation of existing buildings and new construction.
- **SNS-2 Social Services** – Support social service programs and facilities for the elderly, persons with disabilities, persons with HIV/AIDS, victims of domestic violence, persons with alcohol/drug dependency, and persons with other special needs.

Consideration will be given to applications that fall into these categories.

The services funded must be either a new service or demonstrate a quantifiable increase in the level of service. Projects must demonstrate that the CDBG funding applied for would not merely replace (supplant) other state or local government funding for an existing service or create a duplication of benefits. Services that were originally funded as a new or increased level of service are eligible for continued funding.

**SERVICE AREA:** CDBG funds must be used to serve persons residing in the **City of Janesville**. HOME funds must be used to serve persons residing in **Rock County**.

**Eligible costs** include: labor, materials, supplies, some operating and maintenance costs for the portion of the facility in which the public service is located, and equipment necessary for the provision of the public service.

**Ineligible costs:** Public facilities such as government buildings, stadiums, museums, etc.; operating and maintenance expenses except for the provision of authorized public services, political activities, income supplement/subsistence payments, or activities that are "community-wide" are not eligible for funding.

Emergency rent assistance is not an eligible activity under the HOME program.

**FAITH-BASED ORGANIZATIONS:**

- a. Organizations that are religious or faith-based are eligible, on the same basis as any other organization, to participate in the CDBG/HOME programs.
- b. Organizations may not engage in inherently religious activities, such as worship, religious instruction, or proselytization, as a part of the programs or services funded with CDBG funds. If the organization conducts such activities, the activities must be offered separately, in time or location, from the programs or services funded with CDBG funds, and participation must be voluntary for the beneficiaries of the CDBG-funded programs or services. Faith-based organizations may use space in their facilities to provide CDBG-funded services without removing religious art, icons, scriptures or other religious symbols.
- c. An organization that participates in the CDBG program shall not, in providing program assistance, discriminate against a program beneficiary or prospective program beneficiary on the basis of religion or religious belief.
- d. A religious organization's exemption from the federal prohibition on employment discrimination on the basis of religion, set forth in section 702(a) of the Civil Rights Act of 1964 is not forfeited when the organization participates in the CDBG program. Notwithstanding the foregoing, non-discrimination requirements imposed by statute on all CDBG grantees shall apply to religious and faith-based organizations.

**OTHER REQUIREMENTS INCLUDE BUT ARE NOT LIMITED TO:**

**Non-Discrimination and Equal Opportunity:** Agencies receiving funding are required to comply with various federal, state and local laws that provide equal opportunity and prohibit discrimination against persons on the basis of race, color, national origin, religion, sex, age or disability. Discrimination is prohibited in the provision of services, in access to the services and to the facilities where the services are provided, and in all other aspects of administering CDBG/HOME projects such as employment and procurement.

**Fiscal Management:** Agencies receiving funding are required to comply with federal uniform administrative requirements regarding fiscal management including financial reporting, record keeping, accounting systems, payment procedures, procurement of goods and services, conflict of interest, and audit requirements. Non-profit organizations must administer programs in compliance with 24 CFR Part 84 and 2 CFR Part 200 Subpart F, 2 CFR Part 230. Public agencies must administer programs in compliance with 24 CFR Part 85 and 2 CFR Part 225

**Insurance Requirements:** Agencies receiving funding are required to provide proof of general liability insurance coverage. If services provided under the contract are provided by a licensed professional, then professional liability insurance will also be required. In addition, if driving is within the scope of services provided under the contract, then automobile insurance will also be required. Worker's Compensation Insurance is also required.

**Reporting Requirements:** Agencies receiving funding are required to submit quarterly and annual progress reports and budget reports. Required data to be reported includes: unduplicated number of clients served, demographic data on clients served (income level, race, ethnicity, disability, household composition), outputs (units of service provided), progress towards meeting outcomes, amount of funding leveraged from other federal, state/local, private or other funding sources, and additional information indicating compliance with other grant and contract requirements.

**Other Federal Requirements:** Funding recipients must comply with all applicable federal and state requirements. This includes 2 CFR 200 as well as other requirements set forth in 24 CFR 570 and in grant contracts. Applicants who receive a grant award will be expected to submit signed assurances that they will comply with all Federal mandates. Some additional Federal mandates include:

1. **The National Environmental Policy Act (NEPA)** which establishes procedures for protecting the environment. In order to use the CDBG funds awarded to a local government, the grantee has to comply with environmental procedures, standards and guidelines mandated by NEPA and all other applicable environmental regulations (e.g., prime farmland protection, historic preservation, floodplain hazards, etc.).

2. **The Davis-Bacon Prevailing Wage Act** requires the payment of prevailing wages for all construction funded in whole or in part with federal funds, including funds passed through to private firms.

3. **The Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1987** applies to federally assisted activities that involve the acquisition of real property or the displacement of persons, including displacement caused by rehabilitation and demolition activities. Any person or business displaced as a direct result of federal assistance must be provided with Uniform Relocation benefits.

4. **Equal Opportunity and Fair Housing Accessibility Laws** require that CDBG grantees administer their project in a manner that affirmatively furthers equal opportunity and fair housing. All CDBG grantees will be required to undertake specific activities to further fair housing. CDBG grantees must assure all activities and services are accessible to persons with disabilities.

5. **Section 3 under the Housing and Urban Development Act of 1968** requires recipients to give, to the greatest extent feasible and consistent with the existing federal, state, and local laws and regulations, job training, employment, contracting and other economic opportunities to Section 3 residents and Section 3 business concerns.

6. **Lead-Safe Housing Rule at 24 CFR Part 35** applies to all target housing that is federally owned and/or receiving Federal assistance. Specific requirements depend on whether the housing is being disposed of or assisted by the federal government, and also on the type and amount of financial assistance, the age of the structure, and whether the dwelling is rental or owner-occupied.

#### **REVIEW AND DECISION-MAKING PROCESS:**

**Step 1 Staff Review and Assessment.** City of Janesville Neighborhood and Community Services staff will perform a technical review of the applications for compliance with HUD requirements and the threshold criteria. Proposals failing to meet the threshold criteria will not be invited to present to the CDA and will not be considered for funding.

**Step 2 Proposals Submitted By CHDOS** will be reviewed by the Administrative Members of the Rock County HOME Consortium. A recommendation will be forwarded to the City of Janesville CDA for the Special Meeting.

**Step 3 The Community Development Authority** will hear **MANDATORY** presentations by applicants regarding their requests for funding on **August 16, 2023**. The CDA **may** make a preliminary

allocation of the 2024 Community Development Block Grant Program and HOME Program funds to any outside agencies in lieu of holding a Special Meeting.

**Step 4 The Community Development Authority** will, if necessary, hold a special meeting on August 23, 2023. At this meeting the CDA will make preliminary allocations of the 2024 Community Development Block Grant Program and HOME Program funds to any outside agencies.

**Step 5 The Community Development Authority** will hold a public hearing on October 18, 2023 on the proposed allocation of the 2024 CDBG and HOME funds and the 2024 Action Plan and make recommendations to the City Council.

**Step 6 Final decision by Janesville City Council.** The Janesville City Council makes the final funding awards. The Council acts on a proposed budget and allocation of the CDBG and HOME funds, scheduled for November, 2023.

**NOTE:** Disposition of final project awards is contingent on project eligibility and funding availability, as well as federal, state and local statutes, regulations, policies and contract requirements.

**City of Janesville  
COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) and HOME INVESTMENT  
PARTNERSHIP PROGRAM (HOME)  
THRESHOLD REVIEW AND EVALUATION CRITERIA**

Incomplete or late applications will not be considered. Applications must meet threshold criteria to be considered for funding.

<b>THRESHOLD CRITERIA</b>		
<b><u>Criteria:</u></b>	<b>Yes</b>	<b>No</b>
A. Application package is complete and was submitted on time.	<input type="checkbox"/>	<input type="checkbox"/>
B. Addresses a CDBG National Objective and is eligible under the CDBG Program regulations (24 CFR 570) or meets HOME regulations	<input type="checkbox"/>	<input type="checkbox"/>
C. Consistent with Consolidated Plan	<input type="checkbox"/>	<input type="checkbox"/>
<b>Application Meets Threshold Criteria:</b> If yes, proceed to review below.	<input type="checkbox"/>	<input type="checkbox"/>

**EVALUATION CRITERIA**

Applications will be evaluated based on the answers to the following questions based on a scoring matrix. (see attached matrix).

**APPLICATION INSTRUCTIONS**

- Please read all questions and instructions carefully. The care that goes into accurately and informatively completing this application is evidence of your agency's ability to manage the complexities of the CDBG and HOME program requirements.
- Please save the Word version of the application to PDF format prior to submission.
- Submit an electronic copy, in PDF Format, of the full application no later than 4:30 p.m. by Friday, August 4, 2023. The application must be received in our office by that date and time to be considered. Late applications will not be accepted.
- If necessary, paper applications should be fastened with a paper clip or other fasteners that can easily be undone for copying. Please do not use binders, covers, or staples. Emailed application materials should be in an Adobe PDF format. Large files, in excess of 2 MB, should be zipped/condensed.

- Any addendums to your application can be attached in a separate pdf as long as they are clearly identified as to which application and section they refer to.
- Additional printed documentation, photographs and maps may be placed immediately behind the page they refer to.
- Narrative responses should be double-spaced in a typeface no smaller than 11 point.
- Select the appropriate Section One for your proposed activity (public service, housing, other). You may delete the unused sections
- Include a UEI (Unique Entity ID) Number on your application. As of April, 2022, the UEI number replaces the DUNS number and can be obtained by registration on SAM.gov if you do not already have a UEI number.
- HOME Program applicants MUST submit Appendix B and/or Appendix C, in addition to all of the above.

<b>I. APPLICATION COVER SHEET</b>	
Project Title:	
Applicant Legal Name:	
Applicant Status	<input type="checkbox"/> Unit of Local Government <input type="checkbox"/> Non-Profit Organization or Developer <input type="checkbox"/> For-Profit Organization or Developer <input type="checkbox"/> Other, please describe
EIN #:	
Unique Entity Identifier (UEI):	
Primary Contact Name & Title:	
Physical Address:	
Mailing Address, if different:	
Phone Number:	
Email Address:	
Web Address:	

<b>PROJECT INFORMATION</b>	
Primary Beneficiaries of my project are:	<input type="checkbox"/> Janesville Residents <input type="checkbox"/> Beloit Residents (HOME Only) <input type="checkbox"/> Greater Rock County Residents (HOME Only)
Application Funding Source:	<input type="checkbox"/> Community Development Block Grant (CDBG) <input type="checkbox"/> HOME Investment Partnership
Project Description (1-2 Sentences):	
Level of Funding Requested:	

<b>BUDGET SUMMARY</b>	
Total Agency Budget:	
Total Project Budget:	
Other Project Funding:	
# Households Served:	
# Persons/Individuals Served:	

**CERTIFICATION and AUTHORIZED SIGNATURE:** To the best of my knowledge and belief, the information contained in this application, and in the additional required documentation submitted with this application, is true and correct. The submission of this application has been duly authorized by the governing body of the Applicant. The Applicant agrees that if the project is allocated funding, it will comply with all federal, state and local statutes, regulations, policies and requirements applicable to CDBG/HOME funding.

Signature, Date	Title	
	:	

**2024 CDBG/HOME APPLICATION**

**I. THRESHOLD AND ELIGIBILITY**

Answer each question fully but concisely.

- 1. Summarize your proposed project in one paragraph (2 to 3 sentences); include a general statement of the project’s overall purpose. Identify if you are applying for CDBG or HOME funds.** Specific output and outcome goals are addressed in Section III questions 6 and 7.

- 2. If applying for CDBG funds, how does your project meet and qualify under the CDBG National Objective?**

CDBG Public Service projects must meet the CDBG National Objective of principally benefiting low- and moderate-income persons. **Please indicate how your proposed project meets and qualifies for this national objective.** Check only one.

- A. Direct Benefit to Low to Moderate Income Individuals
- B. Benefit to a Low to Moderate Income Area
- C. Remove Slum/Blight

**If applying for HOME funds, what category does your project fit into?**

- D. Home Owner Rehab
- E. Homebuyer Activities
  - a.  Direct Homebuyer Assistance
  - b.  New Construction and Direct Homebuyer Assistance
  - c.  Acquisition, Rehab, Resale and Direct Homebuyer Assistance
  - d.  Affordable Rental Housing Development with Lease Purchase
- F. Rental Housing
  - a.  Acquisition, Rehab, Affordable Rental Housing
  - b.  Rehab, Multi-Family Rental Housing Development
  - c.  New Construction, Single or Multi-Family Rental Housing Development

**3. How will your project document that it meets the CDBG National Objective?**

**If you checked A above,**

1. Indicate how your project will limit services exclusively to low-income persons.
2. Describe the process your organization will use to document income eligibility.
3. Attach a copy of the client intake form, highlighting the questions regarding family size and income.

**If you checked B above, please:**

1. Indicate the total number of clients served in the past year.
2. Indicate what percentage of those clients were low, very-low or extremely low-income.
3. Indicate what income eligibility criteria was used to determine the percentages of all low-income persons.
4. Describe the process your organization will use to document income eligibility.
5. Attach a copy of the client intake form, highlighting the questions regarding family size and income.
6. Describe how both the **a)** nature **and b)** location of the services to be provided demonstrate that the persons served will primarily be low-income persons.

**If you checked C above, please:**

1. Indicate the manner in which Slum or Blight will be determined.
2. Indicate the specific location of the property determined to be slum/blight.

**If you checked D, E, or F above, please:**

1. Describe your program or project.
2. What process is used to determine how individuals are selected to participate.
3. Identify how long your organization been providing these services and provide a history of any projects completed in the last 3 years.

**4. What priority need does the proposed project seek to address? (Check all that apply)**

- Job Training or Employment Services
- Rent Assistance
- Healthcare and Mental Health Services
- Alcohol and Other Drug Abuse Services
- General Case Management and Life Skills Training

- Transportation
- Self Sufficiency Programs.
- Increase quality, decent and affordable housing units
- Increase quality, decent and affordable rental units
- Increased home ownership opportunities
- Transitional Housing for general population
- Subsidized Housing
- Affordable Commercial Services-Grocery Stores and Laundromats.

**5. If the proposed project provides services to the homeless, do you currently participate in the Homeless Intervention Task Force or another related organization? (e.g. Point In Time Count)?** \_\_\_\_\_ Yes \_\_\_\_\_ No

**If yes, please briefly describe your participation in the last year.**

**6. If applying for CDBG funds, will the project provide a new service or a quantifiable increase in the current level of service?**

If the proposed project is a new project or a continuing project that is requesting an increase in funding, please:

1. State what your current level of service is.
2. State what your current funding amount for this project is, if any.
3. Indicate in quantitative terms how the new or increased funding will be used to provide a new service or quantifiable increase in the current level of service. *Projects must demonstrate that new or increased funding does not merely replace other state or local government funding for an existing service in order to be eligible for funding. Continuing projects that were originally funded for a new or increased level of service are eligible for continued funding at the same or lower level; increased requests for funding must be tied to a cost of living increase or to new or increased levels of service.*

**7. If applying for CDBG funds, what is the percentage of persons served by your project that reside in the City of Janesville? If applying for the Rock County HOME Consortium, what is the percentage of persons served by your project that reside in Rock County?**

<b>II. COMMUNITY NEED &amp; BENEFIT</b>
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**1. What community needs and gaps in services does this project address?**

Identify the current need in the community in the context of the CDBG/HOME priorities. Describe any gaps in service and the related need for the services proposed. Provide current local statistics, agency statistics or other evidence to document the needs and gaps. If you are submitting a proposal for housing development or rehabilitation under the HOME program, please include a brief market analysis to support the need for the project, potential sales price and estimated length of time property may be on market before re-sale.

## **2. What is the service location and target population of the project?**

Describe the location where the services will be delivered compared to the need in the community. Identify the target population and their unique service needs. Provide details, if this is an expansion of services.

## **3. What other community services address the identified need?**

Identify other services in the community that fill or address this need. Explain how the project's scope will not exceed or overfill the existing service gap.

# **III. PROJECT DESCRIPTION & SOUNDNESS**

## **1. What specific services or activities will the project provide?**

Define and describe what services will be provided by this project (i.e. how they will be implemented, who will implement them, frequency and duration of services).

## **2. How do the proposed services address the needs identified?**

Describe in detail what this project will accomplish and how the proposed services meet client or community needs.

## **3. What outreach methods will be used and how will clients access services?**

Describe in detail how your proposed project will reach the targeted population especially those who are not able to readily access technology, how the target population will access the proposed program and service(s), any barriers and how they will be addressed to reach the target population, if and how your project prioritizes clients and why, and any exclusion criteria and why these criteria were selected.

## **4. How will the project collaborate with other similar service agencies?**

Describe services and programs by other agencies that will provide the same or similar services and resources to your clients. Include how these services help meet needs and promote increased self-sufficiency. Describe how your agency will collaborate with the other agencies and programs. Include any formal agreements and history of partnerships in the community and linkages to mainstream resources.

**5. What are the specific output goals for the proposed project?**

- A. **Persons Served.** Indicate the number of **unduplicated** households and persons to be assisted in total and the number to be assisted with CDBG/HOME funds requested. **Unduplicated** means that each household and person served by the project is counted only once during the program year.

Project Outputs	PY2024	
	Households	Persons
1. Total assisted with all funds		
2. Assisted with CDBG/HOME funds		

- B. **Service Units.** Identify and define each service unit(s) to be provided. Examples of service units include: emergency shelter bed nights, case management hours, meals, vouchers, medical encounters, etc. Each project must track at least one service unit and the service unit(s) tracked should relate to how CDBG/HOME funding will be used in the project (e.g., if general operating costs are supported, bed nights may be an appropriate service unit; if only case management staff are supported, case management hours provided may be the most appropriate unit).

For each service unit identified, indicate in the table below the total number of service units to be provided and the number of service units to be provided with CDBG/HOME funds requested.

Program Year	Service Unit Type	Total Service Units (all funds)	CDBG/HOME Supported Service Units
PY2024			

**6. What are the specific outcome goals for the proposed project?**

Applicants must identify at least one and no more than three measurable outcomes for the proposed project. Complete the following information for each outcome:

- A. State the outcome. Outcomes are the benefits or impacts that result from the services provided. Outcomes measure a change in knowledge, attitude, skills, behavior, conditions or status in the persons served. Examples: obtain, maintain or improve housing arrangements; reduce barriers to employment and self-sufficiency; reduce or eliminate emergency need; improve parenting skills, etc.
- B. Indicate the anticipated percentage and number out of total persons or families/households served who will achieve the outcome each year.
- C. List the indicators that will be used to show that the persons served achieved the outcome. Examples: maintain transitional housing for six months, obtain GED/high

school diploma, receive emergency meal or emergency shelter voucher, etc. Indicate how many of the indicators each person or family/ household will need to meet in order to achieve the outcome.

D. State the basis for selecting the outcome and how it demonstrates achievement of the overall goals of the project.

E. Indicate how you are going to measure the outcome include the data collection tools, the measurement timeline, and who will be responsible for monitoring progress and compiling the information required for reporting. Examples: case notes, pre-test and post-test, client self-assessment survey, client interview or observation, other records (ex. diploma or certificate) or other assessment tools.

Outcome 1:
<p>____ % ( ____ out of ____ ) of total persons served will achieve outcome each year; <b>or</b>          ____ % ( ____ out of ____ ) of families/households served will achieve outcome each year.</p>
<p>Indicators:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol> <p>( ____ out of ____ indicators must be met for each person or family/household in order to achieve outcome)</p>
Basis for selecting outcome:
How outcome will be measured:

Outcome 2:
<p>____ % ( ____ out of ____ ) of total persons served will achieve outcome each year; <b>or</b>          ____ % ( ____ out of ____ ) of families/households served will achieve outcome each year.</p>
<p>Indicators:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol> <p>( ____ out of ____ indicators must be met for each person or family/household in order to achieve outcome)</p>
Basis for selecting outcome:
How outcome will be measured:

Outcome 3:
____% (____ out of ____) of total persons served will achieve outcome each year; <b>or</b> ____% (____ out of ____) of families/households served will achieve outcome each year.
Indicators: 1. 2. 3. (____ out of ____ indicators must be met for each person or family/household in order to achieve outcome)
Basis for selecting outcome:
How outcome will be measured:

**7. What experience do you have in serving the target population and in providing the type of service in the proposed project?**

Describe past experience and performance achieved by this project or similar project; include any barriers encountered and how those barriers were addressed, as well as whether project goals were achieved.

**IV. ORGANIZATIONAL CAPACITY**

**1. What is your organization’s experience in managing publicly funded projects?**

- A. Describe any specific experience your organization has in the administration of federal, state, and local government funds. If your organization does not have experience as an organization, then the relevant experience of board members or staff may be used.
- B. Describe your organization’s fiscal management including financial reporting, record keeping and accounting systems.
- C. Describe whether your organization has a written personnel policy manual that includes procedures for personnel and financial management, a process for grievance, and a plan for affirmative action.
- D. If you have current CDBG/HOME projects/contracts, are they progressing timely and in accordance with the project accomplishments and schedule? If not, explain why.

**2. List funders and describe type and frequency of monitoring, as well as any findings, and the resolution of those findings.**

**3. What are the qualifications of the staff members involved in the project?**

Describe the qualifications (e.g., education, training, experience) of the specific staff members who will manage the project and provide services.

**4. How will your organization assure that project services are provided in a culturally competent and linguistically accessible manner?**

Explain your agency's commitment to and ability to provide services that are culturally competent and linguistically accessible. Include a description of:

- A. How the project's service design and delivery provide for the cultural and linguistic needs of project clients;
- B. The cultural backgrounds and experiences of board members and staff; and
- C. The training and policy guidance provided to board members and staff regarding cultural competence and language barriers.

**5. How does your organization use collaboration with other local community organizations to support the proposed project?**

- A. List the committees, groups, or meetings your organization participates in. For recurring meetings, the expectation is that you list organizations where your agency is present at 75% or more of meetings.
- B. Describe how the collaborations listed help to develop support for the proposed project (such as enhanced access to services needed by project clients, a shared scarce resource, or improved public policy).

**V. FINANCIAL FEASIBILITY**

**1. Provide a copy of the latest Budget Summary for your organization.**

- A. Detail by line item the applicant's proposed project budget separating requested CDBG/HOME funding from additional agency funding dedicated to the project.
- B. Explain in narrative form how CDBG/HOME funds will be used as shown in the budget summary and budget worksheets (e.g. specific positions, type of communication costs, type of supplies, description of equipment items in support of direct services). If your program generates program fees or program income, explain how these dollars are generated (ex. late fees, counseling fees, transitional housing rent, etc.). For each position for which you are requesting full or partial CDBG/HOME funding, attach a current job description that includes a list of the duties and minimum qualifications for filling the position. Note: City of Janesville policy is not to reimburse agency administrative costs such as a director's salary when not providing direct service to clients.

**2. Project Costs**

A. Cost Per Person. Calculate the cost per person to provide services under the proposed project for 2024 using all funding that supports the project and all of the persons served by the project.

B. Cost Per Service Unit. For each type of service unit provided, indicate the projected costs per service unit and how that cost was calculated.

		PY2024
1.	Total Project Cost (all funds)	
2.	Total Number of Persons to be Served (all funds):	
3.	Cost Per Person to be Served: (all funds divided by all persons served)	

**3. If funded, will the proposed project leverage additional resources?**

List the source and amount of funds to be leveraged with CDBG/HOME funding for this project on the Budget Summary for each year of funding requested. Identify which of those funds have been secured, applied for, or are anticipated to be applied for in the future. If applying for HOME funds, indicate the source and amount for any HOME eligible match that you will contribute to the project.

**4. If the proposed project is funded at a level lower than requested, at what amount of funding can the sponsoring agency still deliver meaningful service?**

Due to the limited availability of resources it is often necessary to fund proposed projects at levels below the levels requested. Please describe a reduced level of funding at which effective service can be delivered and what reductions in your budget can be made.

**5. Financial Planning for Project Sustainability.**

Describe efforts by the agency to develop:

- A. alternative future sources of funding to support the proposed project, and
- B. a financial contingency plan in preparation for possible funding reductions.

**6. Financial Management Capability:**

Provide a narrative of your agency’s financial management capacity and include financial audits; describe type, frequency, findings, and resolution to findings.

## APPENDIX A

### Definition and Documentation of Homelessness

The following chart provides the HUD definition and recommended documentation of homelessness for persons served. The documentation of homelessness required depends on the category of homelessness into which the client is placed.

<b>Category 1: Literally Homeless - Definition</b>	
	<p>(1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:</p> <ul style="list-style-type: none"> <li>(i). Has a primary nighttime residence that is a public or private place not meant for human habitation;</li> <li>(ii). Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or</li> <li>(iii). Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution</li> </ul>
<b>Category 1: Literally Homeless - Documentation</b>	
	<ul style="list-style-type: none"> <li>• Written observation by the outreach worker; or</li> <li>• Written referral by another housing or service provider; or</li> <li>• Certification by the individual or head of household seeking assistance stating that (s)he was living on the streets or in shelter;</li> <li>• For individuals exiting an institution, one of the forms of evidence above and: <ul style="list-style-type: none"> <li>o discharge paperwork or written/oral referral, or</li> <li>o written record of intake worker's due diligence to obtain above evidence and certification by individual that they exited institution</li> </ul> </li> </ul>
<b>Category 2: Imminent Risk of Homeless - Definition</b>	
	<p>(2) Individual or family who will imminently lose their primary nighttime residence, provided that:</p> <ul style="list-style-type: none"> <li>(i). Residence will be lost within 14 days of the date of application for homeless assistance;</li> <li>(ii). No subsequent residence has been identified; and</li> <li>(iii). The individual or family lacks the resources or support networks needed to obtain other permanent housing</li> </ul>
<b>Category 2: Imminent Risk of Homeless - Documentation</b>	
	<ul style="list-style-type: none"> <li>• A court order resulting from an eviction action notifying the individual or family that they must leave; or</li> <li>• For individual and families leaving a hotel or motel-evidence that they lack the financial resources to stay; or</li> <li>• A documented and verified oral statement; and <ul style="list-style-type: none"> <li>o certification that no subsequent residence has been identified; and</li> <li>o self-certification or other written documentation that the individual lack the financial resources and support necessary to obtain permanent housing.</li> </ul> </li> </ul>

<b>Category 3: Homeless Under Other Federal Statutes - Definition</b>	
	<p>(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:</p> <ul style="list-style-type: none"> <li>(i). Are defined as homeless under the other listed federal statutes;</li> <li>(ii). Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;</li> <li>(iii). Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and</li> <li>(iv). Can be expected to continue in such status for an extended period of time due to special needs or barriers</li> </ul>
<b>Category 3: Homeless Under Other Federal Statutes - Documentation</b>	
	<ul style="list-style-type: none"> <li>• Certification by the nonprofit or state or local government that the individual or head of household seeking assistance met the criteria of homelessness under another federal statute; and</li> <li>• Certification of no PH in last 60 days; and</li> <li>• Certification by the individual or head of household, and any available supporting documentation, that (s)he has moved two or more times in the past 60 days; and</li> <li>• Documentation of special needs or 2 or more barriers.</li> </ul>
<b>Category 4: Fleeing or Attempting to Flee Domestic Violence - Definition</b>	
	<p>(4) Any individual or family who:</p> <ul style="list-style-type: none"> <li>(i). Is fleeing, or is attempting to flee, domestic violence;</li> <li>(ii). Has no other residence; and</li> <li>(iii). Lacks the resources or support networks to obtain other permanent housing</li> </ul>
<b>Category 4: Fleeing or Attempting to Flee Domestic Violence - Documentation</b>	
	<ul style="list-style-type: none"> <li>• For victim service providers: <ul style="list-style-type: none"> <li>○ An oral statement by the individual or head of household seeking assistance which states: they are fleeing; they have no subsequent residence; and they lack resources. Statement must be documented by a self-certification or a certification by the intake worker.</li> </ul> </li> <li>• For non-victim service providers: <ul style="list-style-type: none"> <li>○ Oral statement by the individual or head of household seeking assistance that they are fleeing. This statement is documented by a self-certification or by the caseworker.</li> <li>○ Where the safety of the individual or family is not jeopardized, <ul style="list-style-type: none"> <li>+ The oral statement must be verified; and</li> <li>+ Certification by the individual or head of household that no subsequent residence has been identified; and</li> <li>+ Self-certification, or other written documentation, that the individual or family lacks the financial resources and support networks to obtain other permanent housing.</li> </ul> </li> </ul> </li> </ul>

## Appendix B

### Income Determinations

Many CDBG funded activities that meet the Low- and Moderate-Income National Objective require grantees to perform an income-eligibility determination for each family before providing CDBG assistance. All CDBG Public Service Sub- Grantees must make an income determination for the family being assisted. The process for performing income eligibility determination consistent with the Part 5 definition of Income is outlined below.



#### Steps for Completing Part 5 Income Determination Process

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1. Determine Whose Income to Count

Determine family size and identify all family members earning income. "Family" means individuals or households, with or without children. As defined at 24 CFR 5.403, "family" includes, but is not limited to, the following, regardless of actual or perceived sexual orientation, gender identity, or marital status: 1) A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or 2) A group of persons residing together, and such group includes, but is not limited to a family with or without children (a child who is temporarily away from home because of placement in foster care is considered a member of the family); an elderly family; a near-elderly family; a disabled family; a displaced family; and the remaining member of a tenant family. This information should be collected on an initial program intake form.
2. Anticipate Income

Forecast each family member's income over the next 12-month period to arrive at the total projected income.

- 3. [Verify Income](#) Two verification procedures are available: 'Third Party Verification' and 'Review of Documents'. Review of Documents is most common. To ensure consistent treatment of applicants, income verification standards should be incorporated into the program guidelines.
- 4. [Review and Assess Documents](#) Review income documents provided by the applicant for each family member, such as payroll stubs, tax returns, etc. Pay special attention to inclusions and exclusions for each method (see page 3).
- 5. [Compare to HUD Published Income Limits](#) To determine eligibility, compare the total projected (and verified) family income with the most recent HUD income limits, adjusted for family size and by geographic area.
- 6. [Certify, and Recertify, if necessary](#) Families must be determined to be income eligible at the time assistance is provided. This declaration of income eligibility is called the income certification. **Families must be recertified if assistance is not provided within 12 months of the initial income certification or if assistance has been provided more than once in a 12-month period.**

Example Family Income Determination

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Verified Income:  
\$20,000



Verified Income:  
\$25,000



Combined  
Family Income:  
\$45,000



HUD Income Limit 2-  
Person Family:  
\$39,000



Applicant ineligible  
for assistance

## Key Highlights of the Part 5 Income Determination Methods

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The keys to successfully determining family income eligibility for a CDBG-funded Public Service Activity using the Part 5 definition of income include:

### Verification Requirements

- Calculate family gross income by reviewing/verifying income documentation, taking into consideration inclusions and exclusions, provided by the family and forecast their income over the next 12 months.

### Inclusions

The following are examples of income that must be included in the income determination (list is not exhaustive)

- Wages, Salaries, and Tips, including Overtime and Bonuses
- Net business income
- Interest and other net income from real or personal property
- Social Security, annuities, insurance policies, pensions, disability or death benefits, etc.
- Unemployment, disability and worker's compensation
- Child support payments

### Exclusions

The following are examples of income that must be excluded in the income determination (list is not exhaustive)

- Income from employment of children under the age of 18
- Payments received for the care of foster children or foster adults
- Inheritances, insurance payments, capital gains and settlement for personal or property losses
- Medical expenses

Below are examples of supporting documentation that may be collected for each source of income a program participant receives to verify that the beneficiary is income eligible. Please note that while third party verification options (denoted by an asterisk \* below) are a best practice it is not required so long as the supporting documentation is consistent with the standards below.

### Income Documentation Standards

Source of Income	Documentation
Salary	<ul style="list-style-type: none"> <li>• Most recently filed tax returns of each family member, over the age of 18, living in the household <i>(If a family member is not required to complete a tax return, then a Form W-2, a Form 1099-MISC, or other tax statements for the family member may be substituted); or</i></li> <li>• Most recent pay stubs for each family member, over the age of 18, living in the household <i>(If paid weekly, applicant must submit six (6) consecutive pay stubs; If paid bi-weekly or semi-monthly, applicant must submit three (3) consecutive paystubs; If paid monthly, applicant must submit two (2) consecutive paystubs); or</i></li> <li>• Employer-generated salary report or letter verifying employment, including current annual income; <i>or</i></li> <li>• Form 4506 <i>(requested from Internal Revenue Service)*</i></li> </ul>

SSI / SSDI	<ul style="list-style-type: none"> <li>• Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) Benefit letter via online login portal stating the applicant's monthly benefits; <i>or</i></li> <li>• Copy of three (3) most recent bank statements showing deposits of award check; <i>or</i></li> <li>• Form SSA-2458 (<i>requested from local Social Security Office for fee</i>)*</li> </ul>
Welfare Assistance (i.e., Medi-Cal, WIC, SNAP, FDPIR, TANF, SNP, etc.)	<ul style="list-style-type: none"> <li>• Welfare Assistance Benefit letter via online login portal stating the applicant's monthly benefits; <i>or</i></li> <li>• Copy of three (3) most recent bank statements showing deposits of award check; <i>or</i></li> <li>• Copy of applicant's three most recent monthly award checks; <i>or</i></li> <li>• Caseworker-generated letter stating the applicant's monthly benefits amount</li> </ul>
Pension	<ul style="list-style-type: none"> <li>• Pension Benefit letter signed by the administrative agency stating the applicant's monthly benefits; <i>or</i></li> <li>• Copy of three (3) most recent bank statements showing deposits of award check; <i>or</i></li> <li>• Copy of applicant's three most recent monthly award checks</li> </ul>
Alimony / Child Support	<ul style="list-style-type: none"> <li>• Marital Settlement Agreement or Court order establishing the payments; <i>or</i></li> <li>• Copy of three (3) most recent bank statements showing deposits of award check; <i>or</i></li> <li>• Copy of applicant's three most recent monthly award checks; <i>or</i></li> <li>• Affidavit of child support signed by applicant</li> </ul>
Unemployment Insurance	<ul style="list-style-type: none"> <li>• Unemployment Insurance Benefit letter signed by the administrative agency stating the applicant's monthly benefits; <i>or</i></li> <li>• Copy of applicant's payment booklet; <i>or</i></li> <li>• Affidavit of unemployment signed by applicant</li> </ul>
Self-Employed Profits / Net-Income from Operation of a Business	<ul style="list-style-type: none"> <li>• Accounting records such as profit and loss statements showing the net amount after business expenses; <i>or</i></li> <li>• Previous two years of filed tax returns</li> </ul>

Interest from Bank Accounts and Cash Funds	<ul style="list-style-type: none"> <li>• Bank manager-generated letter stating amount of interest earned; <i>or</i></li> <li>• Previous 12 months of bank statements showing the amount of interest earned; <i>or</i></li> <li>• Most recent tax return showing amount of interest earned; <i>or</i></li> <li>• Investment statements indicating the amount of dividends earned</li> </ul>
Rental Property Income	<ul style="list-style-type: none"> <li>• Most recently filed tax returns declaring earned rental income; <i>or</i></li> <li>• Copy of property rental / lease agreement signed by the current tenant showing monthly rent; <i>or</i></li> <li>• Copy of most recent rental payment check; <i>or</i></li> <li>• Copy of rental receipt book</li> </ul>

*Disclaimer: these examples are the most common sources of income and supporting documentation. While this list is extensive, it is not exhaustive, and other sources of income or supporting documentation may be included so long as it is commensurate with the standards outlined above.*

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### Use of Self Certifications in-lieu of Income Documentation for Public Service Activities

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Most public service activities can use a self-certification form completed by the applicant in-lieu of a full Part 5 method for income determination. A self-certification is where the applicant states and signs-off on their income at the time of assistance. If a sub-grantee chooses to use a self-certification, it must include consideration and disclosure of the family composition and/or size and the income sources of all members used to certify eligibility. Sub-grantees should have policies in place to ensure the fair and equal treatment of all applicants in the determination of eligibility for benefits funded by the CDBG Program.



# CITY OF JANESVILLE

*Wisconsin's Park Place*

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Thank you for your interest in working with the Rock County HOME Consortium as a Community Housing Development Organization (CHDO).

Before applying to receive HOME funding as a CHDO within the Rock County HOME Consortium, your agency must complete an application for CHDO certification.

**Certification applications must be submitted to the Rock County HOME Consortium each time the applicant non-profit applies for HOME funds as a CHDO.**

Please complete the entire application with the required documentation and submit it to the Rock County Consortium along with your application for funds. We will process your application once your packet is complete, and will notify you within 30 days of approval/denial of CHDO status.

All information should be sent to:

City of Janesville  
Neighborhood & Community Services Department  
PO Box 5005  
Janesville, WI 53547-5005

If you have questions regarding the CHDO application or the program in general, please contact:

Jennifer Petruzzello at [petruzzelloj@janesvillewi.us](mailto:petruzzelloj@janesvillewi.us) or 608-755-3038, or

Carrie Clark at [clarkc@janesvillewi.us](mailto:clarkc@janesvillewi.us) or 608-373-3441.

For more information on the Federal requirements for CHDO certification, see the Final HOME Rule, 2013, at: <https://www.hudexchange.info/programs/home/topics/chdo/#policy-guidance-and-faqs>

# ROCK COUNTY HOME CONSORTIUM

COMMUNITY HOUSING  
DEVELOPMENT ORGANIZATION  
(CHDO)

## CERTIFICATION APPLICATION PACKET

# APPLICATION PACKET CONTENTS

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## CHDO CRITERIA

To be certified as a Community Housing Development Organization ("CHDO"), an organization must meet the certification criteria as required by the U.S. Department of Housing and Urban Development (24 CFR 92.2) and comply with the following policies in order to receive and retain CHDO certification from the Rock County Consortium.

**ORGANIZATION:** The organization must be formally organized under state and local laws.

**PURPOSE OF ORGANIZATION:** The organization must have among its purposes the provision of decent housing that is affordable to low- and moderate-income persons. The CHDO must specify its service area within which it will operate.

**TAX EXEMPT RULING:** The organization must have a tax-exempt ruling from the Internal Revenue Service (IRS), under section 501(c)(3) or 501(c)(4) of the Internal Revenue Code of 1986 or be a subordinate of a central organization under IRC905 or be a wholly-owned entity that is regarded as an entity separate from its owner for tax purposes when the owner organization has a tax-exempt ruling from the IRS under section 501(c)(3) or 501(c)(4).

**BOARD COMPOSITION AND COMPENSATION:** To be certified as a CHDO, at least one-third of the organization's Board of Directors must consist of representatives of the low-income community and no more than one-third of the Board can be from the public sector. Board members may receive a reasonable fixed sum and expenses for each board meeting he/she attends. However, board members cannot receive a salary for their service as a board member.

**LOW-INCOME INPUT:** The organization must have a specific formal (written) process for low-income program beneficiaries to advise the organization in its decisions regarding the design, location of sites, development and management of affordable housing projects within its service area.

**SPONSORSHIP OR CREATION BY A FOR-PROFIT ENTITY:** A for-profit entity cannot qualify as a CHDO, but a for-profit entity may sponsor the creation of a wholly separate nonprofit. However, the for-profit entity may not be an entity whose primary purpose is the development or management of housing, such as builder, contractor, developer, or real estate management firm.

If a CHDO is sponsored or created by a for-profit entity, the entity may not appoint more than 1/3 of the CHDO Board of Directors, nor serve as officers or employees of the CHDO.

**SPONSORSHIP OR CREATION BY A GOVERNMENTAL ENTITY:** A governmental entity cannot qualify as a CHDO, but a governmental entity may sponsor the creation of a wholly separate nonprofit. However, if a CHDO is sponsored or created by a governmental entity, the entity may not appoint more than 1/3 of the CHDO Board of Directors, nor serve as officers or employees of the CHDO.

**FINANCIAL ACCOUNTABILITY:** The organization must have financial accountability standards and certify that its financial management systems comply with a specific standard. Organizations that have been operating for one year or more must submit audited financial statements for the organization's most recent program year. The audited financials should include a twelve-month balance sheet and operating statement. The financial statements will be used in assessing the organization's financial capacity for executing the affordable housing activities it intends to pursue.

**EXPERIENCE:** The organization must be able to demonstrate that it has at least one year of experience directly related to the development of housing. Newly created organizations that do not have this experience may meet the requirement if it has a nonprofit parent or sponsor organization that can demonstrate at least one year of experience in the development of housing, or by hiring a development consultant for the CHDO's first year of operation.

**STAFF AND CAPACITY:** The organization must have experienced paid staff responsible for the day-to-day operations. In addition, it must be able to demonstrate the capacity of its key staff to carry out the housing activities it is planning to undertake.

**Rock County Consortium  
Community Housing Development Organization (CHDO)  
Certification Application**

***APPLICANT INFORMATION:***

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Contact Person

\_\_\_\_\_  
Position with Organization

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Federal Tax I.D. Number

I hereby certify that all statements provided in this application and in the attachments herein are true; that I am authorized to sign this application, and to make these statements, on behalf of the applicant organization; and that the organization understands that misrepresentation of any facts which lead to the improper allocation and expenditure of public funds may result in legal action against the organization for retrieval of any such funds and appropriate penalties.

\_\_\_\_\_  
Signature of Board Chair or Authorized Signator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name, Title

I hereby certify that \_\_\_\_\_ (agency name) conforms to the financial accountability standards of 24 CFR 84.21, "Standards for Financial Management Systems".

\_\_\_\_\_  
Signature of Chief Financial Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name, Title

**NOTE: As part of the application process, the Rock County Consortium will do all necessary due diligence to verify that the operations of an organization are being conducted in accordance with the representations made in this CHDO application.**

## I. REQUIRED ELEMENTS FOR CERTIFICATION

A. **BOARD COMPOSITION:** To be certified as a CHDO, at least one-third of the organization's Board of Directors must consist of low-income representatives that reside in the applicant's service area and no more than one-third of the Board can be from the public sector. When calculating the one-third requirements, we consider the total number of Board Members regardless of their permanent residence. Board members cannot receive salary for their service as board member.

1. An applicant organization must ensure that at least one-third of its governing board consists of representatives of low-income communities within its service area. There are three ways to meet this requirement: (1) individuals can be residents of a low-income neighborhood in the organization's service area but they do not necessarily have to earn a low income themselves, (2) they can be low-income residents of the community; that is, their household income is 80% or less than the Area Median Family Income for the service area as published by the U. S. Department of Housing and Urban Development, or (3) they may be elected representatives of low-income neighborhood organizations.
2. No more than one-third of the organization's Board of Directors may be from the public sector. Representatives of the public sector include: (1) *elected officials*, such as council members, (2) *appointed public officials*, such as planning or zoning commission, regulatory or advisory boards, (3) *public employees*, which include employees of public agencies or departments of the City such as fire and police, and (4) any individual who is not necessarily a public official, but has been *appointed by a public official* to serve on the organization's Board of Directors.

To verify that your current Board meets both the low-income requirement and the limits on public sector representation above, **please provide a full listing of the current board for the organization. On the listing, you must provide the following information for each member: full name, date and length of appointment, employer, and which community he or she represents (low-income, public sector, other).** Documentation supporting those designations must be maintained in the organization's files.

B. **LOW-INCOME INPUT:** To be certified a CHDO, an organization must have a specific formal (written) process for low-income program beneficiaries to advise the organization in its decisions regarding the design, location of sites, development and management of affordable housing projects. Specifically, the organization must have a detailed written plan for ensuring that input from low-income program residents of the service area will be solicited and integrated into the decision-making and project development processes of the organization. **Please provide a copy of the written procedure for gathering low-income input, and some examples of past outreach efforts.**

C. **FINANCIAL ACCOUNTABILITY:** The organization must have financial accountability standards that conform to 24 CFR 84.21, "Standards for Financial Management Systems". These standards are a variation on OMB Circular A-133 but are an updated version to that circular. The organization must certify that its financial management systems comply with this specific standard. Please provide the following information:

- A copy of the most recent bank statement.
- The most recent certified financial statements that have been audited or prepared by an accountant

If your organization does not have audited financial statements because it has been operating for less than one year, you must submit the audited financial statements of the parent or sponsor organization.

*A non-profit organization cannot be certified as a CHDO if the organization's most recent financial statements and/or audit reflect an outstanding finding, material weakness or other unresolved matter that would affect the capacity of that organization to successfully develop a CHDO project.*

D. **EXPERIENCE:**

To be certified as a CHDO as a **developer**, the organization must be able to demonstrate that it has at least one year of experience **directly related to the development of housing**. As a developer, the CHDO arranges financing and is in sole charge of construction or rehabilitation. For rental projects, the CHDO owns the property during development and throughout the period of affordability and performs all development activities. For homebuyer projects, the CHDO owns, rehabilitates or constructs a property, then sells the property. The CHDO must own the property in fee simple title. Newly created organizations that do not have this experience may meet the requirement with a multifamily rental development consultant or if they have a nonprofit parent or sponsor organization that can demonstrate at least one year of experience in the development of housing. Please provide the following:

- A narrative statement, signed by the Executive Director or Board President, documenting that the organization has at least one year of experience directly related to the development of housing prior to seeking CHDO certification; or
- A statement signed by the Executive Director or Board President that documents that its parent or sponsoring organization has at least one year of experience related to the development of housing; and
- A signed agreement or letter of understanding between your organization and the nonprofit parent or sponsor organization that documents the relationship between the two organizations.

To be certified as a CHDO as an **owner**, the organization must be able to demonstrate that it has at least one year of experience **directly related to the ownership and management of housing**. As an owner, the CHDO would act as an owner of rental housing that it does not develop and the CHDO would hire a project manager or contract with a developer to perform rehabilitation or construction. The CHDO must own the property in fee simple title. Please provide the following:

- A narrative statement, signed by the Executive Director or Board President, documenting that the organization has at least one year of experience directly related to the ownership and management of housing prior to seeking CHDO certification; or

- A statement signed by the Executive Director or Board President that documents that its parent or sponsoring organization has at least one year of experience related to the development of housing; and
- A signed agreement or letter of understanding between your organization and the nonprofit parent or sponsor organization that documents the relationship between the two organizations; and
- A signed agreement or letter of understanding with a developer or contractor who has at least one year of experience directly related to the development of housing, and who will assist in the oversight of the development process.

E. **STAFF AND CAPACITY:** The organization must have experienced paid staff responsible for the day-to-day operations. The organization must demonstrate the capacity of its key staff to carry out the activities it is planning to undertake.

Officers or employees of a parent organization (including governmental or public parent organizations) are prohibited from serving as officers or employees of the CHDO (except for the permitted 1/3 of CHDO board members).

**Please provide the following:**

- Resumes of key paid staff members who have successfully completed a project(s) similar to those to be assisted with HOME funds, (include project descriptions of relevant completed projects).
- Listing of relevant current and previous HOME funded projects undertaken by this Agency within the past 10 years. Indicate if the projects were completed/are progressing in accordance with the appropriate CHDO Agreement. If any current projects are stalled or not progressing in accordance with the appropriate CHDO Agreement, indicate measures that are being taken to advance the project(s).

## II. ORGANIZATIONAL STRUCTURE

- A. **ORGANIZATION:** To receive certification, your organization must be organized under state and local laws and must provide evidence of legal status. Please provide:
- Charter, or
  - Articles of Incorporation.
- B. **PURPOSE OF ORGANIZATION:** An organization must have among its purposes the provision of decent housing that is affordable to low and moderate-income persons. Please provide the following:
- By-laws of the organization,
  - Articles of Incorporation,
  - Charter, or
  - Resolution.
- C. **NO INDIVIDUAL BENEFIT OR DISTRIBUTIONS:** No part of your organization's net earnings can inure to the benefit of any member, founder, contributor or individual. All net income must be reinvested in the projects developed by the organization or in subsequent affordable housing projects. Please provide the following:
- By-laws of the organization,
  - Articles of Incorporation, or
  - Charter.
- D. **TAX EXEMPT RULING:** Provide evidence that it has a tax-exempt ruling from the Internal Revenue Service (IRS), under section 501 (c) of the Internal Revenue Code of 1986.
- A 501 (c) (3) Certificate Letter from the IRS
  - A 501 (c) (4) Certificate Letter from the IRS
- E. **SERVICE AREA:** To receive certification an organization must have a clearly defined geographic service area. The service area can be an area larger than a single neighborhood but must be within the Rock County Consortium's HOME Participating Jurisdiction. Please provide the following:
- Neighborhood Name(s), Census Tract(s), Zip Code(s), and Boundary Streets
  - Include a Map
  - Indicate which municipal jurisdiction(s) you are seeking certification to work within: City of Beloit, City of Janesville, or Rock County (outside the Cities of Beloit and Janesville).
- F. **RELIGIOUS ORGANIZATION SPONSORSHIP:** Is your nonprofit organization sponsored or created by a religious organization?
- Yes
- No

If the answer above is "Yes," please note that a religious organization may be a CHDO, however, housing units developed by the CHDO organization must be made available to all persons, regardless of religious affiliation or belief.

G. **FOR-PROFIT ORGANIZATION SPONSORSHIP:** Is your nonprofit organization sponsored or created by a for-profit entity?

- Yes
- No

If the answer above is "Yes," a for-profit entity cannot qualify as a CHDO, but a for-profit entity may sponsor the creation of a nonprofit. However, the for-profit entity may not be an entity whose primary purpose is the development or management of housing, such as a builder, contractor, developer, or real estate management firm. The for-profit entity may not appoint more than one-third of the membership of the organization's governing body. Board members appointed by the for-profit entity may not appoint the remaining two-thirds of the Board members and the CHDO organization must be free to contract for goods and services from vendors of its own choosing.

**III. ROCK COUNTY CONSORTIUM USE ONLY**

Reviewed and approved by: \_\_\_\_\_ . Date: \_\_\_\_\_ .

Reviewed and denied by: \_\_\_\_\_ . Date: \_\_\_\_\_ .

Comments:

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**Rock County HOME Consortium  
Community Housing Development Organization (CHDO)  
Re-Certification Checklist**

The information contained in this checklist will allow the Rock County HOME Consortium to determine whether a Community Housing Development Organization (CHDO) meets the established qualifications and capabilities to be re-certified as a CHDO.

Organization Name: \_\_\_\_\_  
Executive Director: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
FEIN Number: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Contact E-Mail Address: \_\_\_\_\_  
Contact Telephone #: \_\_\_\_\_

The CHDO or its parent organization must be able to show one year of serving the community from the date the participating jurisdiction provides HOME funds. The organization must describe its history of servicing the community by describing activities which it provided, such as, but not limited to: developing new housing, rehabilitating existing stock or managing housing stock.

Please answer the following questions and provide supporting documentation as appropriate.

**1. Organizational Status and Mission**

A. Does your organization have a tax exempt ruling from the Internal Revenue Service (IRS) under Section 501(c) (3) or (4) or a group exemption letter under Section 905 from the IRS that includes the CHDO?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

B. Does your organization have among its purposes the provision of low and moderate income housing?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

C. Has your organization produced a strategic plan that specifies an action plan for housing development?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

D. Since your last re-certification, has your service area changed for CHDO activities?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

## 2. Board Composition

A. Does at least 1/3 of board membership include residents of low-income neighborhoods, other low-income community residents, or elected representatives of low-income neighborhood organizations?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

B. Does no more than 1/3 of the governing board consist of public officials (including any employees of the PJ) or individuals appointed by public officials?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

C. If the CHDO is sponsored by/created by a for-profit entity, does the for-profit entity appoint no more than 1/3 of the governing board members?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

\_\_\_\_\_ N/A

D. Has there been stability/continuity of board members since the last re-certification?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

E. Does the board have an effective structure of overseeing planning and development?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

F. How many board meetings have been held over the past year? \_\_\_\_\_

Has the board failed to have a quorum at any of their meetings over the past year?

\_\_\_\_\_ Yes     If so, how many times? \_\_\_\_\_

\_\_\_\_\_ No

### 3. Sponsorship/Independence

- A. Is the CHDO controlled or does it receive direction from individuals or entities seeking profit from the organization?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

- B. If sponsored or created by a for-profit entity, the for-profit entity's primary purpose does not include the development or management of housing?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No  
\_\_\_\_\_ N/A

- C. If sponsored or created by a for-profit entity, is the CHDO free to contract for goods and services from vendor(s) of its own choosing?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No  
\_\_\_\_\_ N/A

- D. Is the CHDO sponsored by a religious organization?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

- E. If sponsored by a religious organization, is the CHDO a separate secular entity from the religious organization, with membership available to all persons, regardless of religion or membership criteria?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No  
\_\_\_\_\_ N/A

- F. Are there any identity or interest issues between the CHDO and the contractors/vendors, consultants, professionals it uses for its CHDO projects?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

### 4. Relationship/Service to the Community or Service Area

- A. Briefly describe the type of relationship your organization has with the community or service area it serves.

- B. Briefly describe the type of support your organization receives from local government to support your housing activities.

C. Does the CHDO have a formal process for low-income input, where program beneficiaries can advise the organization in decisions regarding design, development and management of affordable housing projects. Explain.

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

**5. Financial Management and Capacity**

A. Does your organization have an annual audit?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

B. If an audit was completed, were there management or compliance audit findings?

\_\_\_\_\_ Yes    If so, are the findings resolved? \_\_\_\_\_ Yes \_\_\_\_\_ No  
\_\_\_\_\_ No

C. Does your organization prepare an annual budget and monitor it on a regular basis?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

D. Does your governing board receive financial reporting?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

E. Does your organization have internal controls to ensure separation of duties and safeguarding of assets?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

F. Does your organization have a conflict of interest policy governing employees and development activities, including: procurement of contract services and the award of housing units for occupancy?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

G. Does your organization maintain insurance such as liability, fidelity bond, workers compensation, property hazard, and project?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

H. Does your current balance sheet and budget indicate funds to support essential operations?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

I. Does your organization have a diversified and stable funding base for operations?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

J. What percent of revenue sources are predictable year to year? \_\_\_\_\_

K. Does your organization have liquid assets available to cover current expenses?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

L. Does the organization have funds available for pre-development expenses or equity investments required for development?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

M. Does your organization have a portfolio of properties, and are they in stable physical and financial condition?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

## 6. Development Capacity

A. Has the organization demonstrated a capacity for carrying out prior HOME activities?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

B. Can the current corporation structure support housing development activities?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

C. Does the current management have the ability to manage additional development activities?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

D. Does the organization have procedures for monitoring the progress of a project?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

E. Does the organization have the capacity to monitor project level cash flow and schedule?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

## 7. Certifications

I certify that the above information is true and correct to the best of my ability.

\_\_\_\_\_  
Signature of Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name, Title

\_\_\_\_\_  
Attest

I certify that our organization conforms to the Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards at [2 CFR part 200](#).

\_\_\_\_\_  
Signature of Chief Financial Officer or CPA

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name, Title

\_\_\_\_\_  
Attest