

HOME Investment Partnerships Program

Part A Program Activities Application Summary



I.A. Applicant Information

Applicant Name: _____

Address: _____

City: _____ County: _____

Zip Code: _____ Entity Type: ☐ CHDO ☒ City/County
☐ PJ/Consortia Member

Applicant Website Address: _____

Applicant DUNS #: _____ Applicant EIN #: _____

I.B. Authorized Representative Information

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Other _____

First Name: _____ MI: _____ Last Name: _____

Job Title: _____

☐ **Check if address is the same as Applicant, and fill in phone, fax and E-mail**

Address: _____

City: _____ Zip Code: _____

Phone: _____ Ext: _____ Fax: _____

E-mail: _____

I.C. Applicant Contact Information (do not list admin sub or subrecipient)

☐ **Check if the same as Authorized Representative and go to next section**

☐ Mr. ☐ Ms. ☐ Mrs. ☐ Other _____

First Name: _____ MI: _____ Last Name: _____

Job Title: _____

Contact's Organization: _____

Address: _____

City: _____ Zip Code: _____

Phone: _____ Ext: _____ Fax: _____

E-mail: _____

**Part A Program Activities
Application Summary**

II. Expenditure Percentage/Maximum Application Amount

List all HOME PROGRAM ACTIVITIES contracts for years indicated

**"Drawn Amount" equals total of these contracts' valid
IMPORTANT: draws (and TBRA project setups) received at HCD by 5
p.m. as of the due date of the 2019 HOME NOFA
application.**

	HOME Contract #	Original Allocation Amount	Drawn Amount	Expenditure %
16-HOME-				
15-HOME-				
14-HOME-				
	TOTAL	\$0	\$0	0.00%

The overall expenditure percentage determines the maximum amount that can be applied for, as follows:

Expenditure rate on 2014-2016 HOME Program Activities contracts	Maximum Application Amount
60% or more	\$1,000,000
55 – 59.99%	\$700,000
50 – 54.99%	\$500,000
No open contracts	\$500,000

Maximum Application Amount based on Total Expenditure Percentage:

\$500,000

Part A Program Activities Application Summary

III. Funding by Activity

III.A. Activity

A. Activity	B. Activity Funds Amount	C. Administration Amount	D. Activity Total ¹
First-Time Homebuyer Program (including Infill New Construction and Acquisition with Rehabilitation)	\$0.00	\$0.00	
Owner-Occupied Rehabilitation Program	\$0.00	\$0.00	
Tenant-Based Rental Assistance Program	\$0.00	\$0.00	
Total:	<u>\$0.00</u>	<u>\$0.00</u>	<u>DOESN'T MEET \$300,000 MINIMUM</u>

III.B. HOME Program Income/Recaptured Funds

Program Income/Recaptured Funds balance as of June 30, 2019	
Program Income/Recaptured Funds received in the last 12 Months	

Part A Program Activities Application Summary

IV. Proposed Other Funding Sources

A. Name of HOME Activity	B. Name of Source	C. Funding Source Code*	D. Source Type	E. Match	F. Total Dollar Amount
Proposed Other Funding Total					\$0

Part A Program Activities Application Summary

V. Unit Information

A. Activity	B. HOME-Assisted Units	C. Total Units	D. Target Population ¹
First-Time Homebuyer Program			
Owner-Occupied Rehabilitation Program			
Tenant-Based Rental Assistance Program			

¹From the following list, enter the designated number for any target populations that will be served by your program.

Target Populations

- | | |
|------------------------|----------------------------------|
| 1. Physically Disabled | 9. Seniors |
| 2. Persons with AIDS | 10. Mentally Ill |
| 3. Youths | 11. Veterans |
| 4. Single Adults | 13. Victims of Domestic Violence |
| 5. Single Men | 12. Substance Abusers |
| 6. Single Women | 14. Dually-Diagnosed |
| 7. Families | 15. Homeless |
| 8. Farmworker | 16. Other |

**PART A Program Activities
Application Summary**

VI. Legislative Information

	District #	First Name	Last Name
Assembly			
Senate			
Congress			

	District #	First Name	Last Name
Assembly			
Senate			
Congress			

	District #	First Name	Last Name
Assembly			
Senate			
Congress			

Part A Program Activities

Application Summary

VII. Applicant Certification and Commitment of Responsibility

The person authorized in the resolution must also certify to knowledge of the responsibilities assumed when contracting with the State for HOME funds. The individual must also certify that the information, statements, and attachments contained in the application are, to the best of their knowledge and belief, true and correct. By signing this certification, the applicant is also authorizing the Department to contact any agency that may assist in determining applicant capability, whether or not that agency is named in the application.

As the official designated by the governing body, I hereby certify that if approved by the Department for a 2019 HOME funding allocation, the _____ (applicant name) assumes the responsibilities specified in the HOME Regulations.

1. It possesses the legal authority to apply for the allocation and to execute the proposed program or project;
2. It has resolved any audit findings for prior Department or federally-funded housing or community development projects or programs to the satisfaction of the Department or federal agency by which the finding was made;
3. It is not currently suspended or debarred from receiving federal funds;
4. It is currently in compliance with the submittal requirements of Office of Management and Budget Circular 2 CFR 200.512, pursuant to the Single Audit Act of 1984, P.L. 98-502, and the Single Audit Act amendments of 1996, P.L. 104-156;
5. There are no pending lawsuits that would impact the implementation of this program;
6. It will follow the State Relocation Plan and the federal Uniform Relocation Act requirements;
7. It will comply with all statutes and regulations governing the HOME Program;
8. It will comply with all State and federal requirements;
9. It has staff available or has committed to hiring staff able to operate a local HOME program or project and oversee the work of an administrative subcontractor or subrecipient, if any;
10. It will use HOME funds as grants solely for authorized activities;
11. If a CHDO, that it is currently certified or that it has submitted an application for certification, and that its organization is currently in compliance with section 8204.1 of the State HOME Regulations including:
 - Its certified service areas include the jurisdiction for which their proposed activity is located;
 - Its board composition complies with and will continue to comply with the requirements for CHDOs in the definition contained in 24 CFR Section 92.2;
 - The purpose of the organization complies with 24 CFR 92.2; and
 - It is not a public body nor is it controlled by, or under the direction of, a public body, or individuals or entities seeking to derive profit or gain from the organization.
12. If a CHDO, it will fulfill the role of sole project developer in the administration of the proposed activity/ies.

I authorize the Department of Housing and Community Development to contact any agency, whether or not named in this application, which may assist in determining the capability of the Applicant. All information contained in this application is acknowledged to be public information. **(This certification must be signed by the person authorized in the Resolution)**

Signature _____

Title _____

Type Name _____

Date _____

[illegible]

Part A Program Activities Application Summary

IX. Reporting History

INSTRUCTIONS:

1. A HOME Annual Performance Report (APR) is due by every July 31 after the first HOME contract is received, so enter all APR submittal dates below, regardless of when last HOME contract was received.
2. Fill in all HOME Program Activities contract numbers starting with 14, 15 or 16.
3. Fill in all HOME Program Activities contract numbers starting with 14, 15 or 16.
4. Indicate the date each quarterly report was e-mailed to the HOME Program.

Please note that most city and county HOME Project contracts have Quarterly Program Income reporting that starts in a different quarter than with HOME Program Activities Contracts.

VERY IMPORTANT: Attach to this form a printout of each e-mail to HOME in which quarterly and annual reports were transmitted, as evidence of the submittal date entered below. Even if HCD has evidence of reports received on time, no credit will be given for any report without a supporting printout attached in this NOFA application. There will be no appeal process.

If necessary, before you submit your application, ask your HOME Program Activities Representative to e-mail to you evidence that a particular report was e-mailed to HOME.

HOME Project Contracts:

- 16-HOME- First Program Income (P.I.) Report due for cities and counties for April - June 2017
- 15-HOME- First P.I. Reports due for Oct. - Dec. 2015 if executed in 9/2015 or 10/2015; OR due for Jan. - Mar. 2016 if executed in 11/2015
Date Executed by HCD:
- 14-HOME- First P.I. Reports due for cities and counties for Oct. - Dec. 2014 if executed in 11/2014; OR due for Jan. - Mar. 2015 if executed between 12/1/2014 and 1/31/2015
Date Executed by HCD:

HOME Program Activities Contracts:

- 16-HOME- First Quarterly Performance and (for cities and counties only) Program Income Reports due for January - March 2018
- 15-HOME- First Quarterly Performance and (for cities and counties only) Program Income Reports due for April - June 2016 if executed in 4/2016 or 5/2016, or due for July - September 2016 if executed between 6/1/2016 and 8/31/2016, or due for October - December 2016 if executed from 9/1/16 - 11/30/16
Date Executed by HCD:
- 14-HOME- Quarterly Performance and (for cities and counties only) Program Income Reports due for April - June 2015 and beyond

Quarterly Performance and Program Income Reports					
14-HOME Contracts		15-HOME Contracts		16-HOME Contracts	
Performance	Program Income	Performance	Program Income	Performance	Program Income
	Jan-Mar 15 Date Submitted	Jan-Mar 16 Date Submitted	Jan-Mar 16 Date Submitted	Jan-Mar 18 Date Submitted	Jan-Mar 18 Date Submitted
Apr-June 15	Apr-June 15 Date Submitted	Apr-June 16	Apr-June 16 Date Submitted	Apr-June 18	Apr-June 18 Date Submitted
July-Sep 15	July-Sep 15 Date Submitted	July-Sep 16	July-Sep 16 Date Submitted	Jul-Sep 18	Jul-Sep 18 Date Submitted
Oct-Dec 15	Oct-Dec 15 Date Submitted	Oct-Dec 16	Oct-Dec 16 Date Submitted	Oct-Dec 18	Oct-Dec 18 Date Submitted
Jan-Mar 16	Jan-Mar 16 Date Submitted	Jan-Mar 17	Jan-Mar 17 Date Submitted	Jan-Mar 19	Jan-Mar 19 Date Submitted
Apr-June 16	Apr-June 16 Date Submitted	Apr-June 17	Apr-June 17 Date Submitted	Apr-June 19	Apr-June 19 Date Submitted
July-Sep 16	July-Sep 16 Date Submitted	Jul-Sep 17	Jul-Sep 17 Date Submitted		
Oct-Dec 16	Oct-Dec 16 Date Submitted	Oct-Dec 17	Oct-Dec 17 Date Submitted		
Jan-Mar 17	Jan-Mar 17 Date Submitted	Jan-Mar 18	Jan-Mar 18 Date Submitted		
Apr-June 17	Apr-June 17 Date Submitted	Apr-June 18	Apr-June 18 Date Submitted		
Jul-Sep 17	Jul-Sep 17 Date Submitted	Jul-Sep 18	Jul-Sep 18 Date Submitted		
Oct-Dec 17	Oct-Dec 17 Date Submitted	Oct-Dec 18	Oct-Dec 18 Date Submitted		
Jan-Mar 18	Jan-Mar 18 Date Submitted	Jan-Mar 19	Jan-Mar 19 Date Submitted		
Apr-June 18	Apr-June 18 Date Submitted	Apr-June 19	Apr-June 19 Date Submitted		

ANNUAL REPORTS

Fiscal Year 2016-17 Date HOME APR Submitted
Fiscal Year 2017-18 Date HOME APR Submitted
Fiscal Year 2018-19 Date HOME APR Submitted

Comments Box: