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**Delaware Continuum of Care
CoCBuilds NOFO (PSH NOFO) Funding Application
Application: DUE 4:00PM Monday October 7, 2024**

**Instructions for Completing the Application:**

Please complete all required questions below and submit all required attachments to Housing Alliance Delaware by email at rstucker@housingalliancede.org and egallaher@housingalliancede.org by **4:00pm on Monday October 7, 2024.** Applications that are incomplete or do not include all required attachments, including the budget workbook, will not be considered for funding.

**All applicants should review the full list of Rating Factor Narrative questions that the CoC will be required to submit to HUD as part of the CoCBuilds application package (found in Appendix A of the RFP).** This application is based heavily on the rating factor narrative questions that must be submitted in the CoC’s application to HUD. Selected applicants will work with the CoC to further develop their narrative responses and answer additional narrative questions to submit a competitive application to HUD.

1. **Applicant Information**
2. **Applicant Agency or Organization Name**  Click or tap here to enter text.
3. **Primary Contact Person**

NAME Click or tap here to enter text.

EMAIL Click or tap here to enter text.

PHONE Click or tap here to enter text.

1. **Secondary Contact Person**

NAME Click or tap here to enter text.

EMAIL Click or tap here to enter text.

PHONE Click or tap here to enter text.

1. **Location(s) of Proposed Project (Address). If the project will have multiple sites, please include all proposed site locations.**

 Click or tap here to enter text.

1. **Clearly identify the applicant, developer (if different from applicant), and relevant subrecipients (if applicable), and define the role each of these entities will play in the project (e.g., developer, property management, service provider, etc.)**

 Click or tap here to enter text.

1. **Identify any other partners involved in the project that are not the applicant, developer, or subrecipient, and describe their role in the project (if relevant).**

Click or tap here to enter text.

1. **Project Budget and Overview [12 points]**
2. **Check which of the following budget line items you are requesting.**

(CHECK ALL BOXES THAT APPLY)

[ ] Acquisition

[ ] New Construction

[ ] Rehabilitation

[ ] Project-Based Rental Assistance

[ ] Operating Costs

[ ] Supportive Services

[ ] Administrative Costs

*Please note that CoC program rules state that CoC program funds used for rental assistance may not be combined in a single structure or housing unit with CoC program operating funds.*

1. **Total Budget Request (Dollar Amount)** Click or tap here to enter text.

\*NOTE: A full budget worksheet must be submitted as an attachment to this application.

1. **Please provide a general overview of your project, including the scope and scale of the project which must include:**
	* Number and configuration of PSH units to be developed with the requested funds,
	* Status of the project in terms of the development process,
	* Any other funding that is dedicated to the project or anticipated, and where you are in the funding process(es), and
	* Any other pertinent information for the reviewer to understand the project being proposed (e.g., general location, partnerships/collaborations, etc.).

Click or tap here to enter text.

1. **Development Experience and Leveraging [24 Points]**
2. **Describe the applicant, developer, and/or relevant subrecipients’ experience with other projects that have a similar scope and scale as the proposed project.**
	* NOTE: Maximum points for experience with at least four other projects that have a similar scope and scale as the proposed project.

Click or tap here to enter text.

1. **Describe the applicant, developer, and relevant subrecipients’ experience leveraging resources substantially similar to the funds being proposed in the current project.**
	* NOTE: Maximum points for at least 3 examples of prior leveraging experience.
	* Examples of resources that will be considered include Low Income Housing Tax Credits, HOME, CDBG, Section 108, Section 202, and Section 811.

Click or tap here to enter text.

1. **Provide information regarding the availability of low-income housing tax credit commitments, project-based rental assistance, and other resources dedicated to the proposed project. Describe the source and dollar value of each of these commitments and describe the overall cost of the project, including the estimated cost per unit.**

Click or tap here to enter text.

1. **If there are current properties under construction or rehabilitation where CoCBuilds funds could be used to obtain units, in addition to the bulleted items above, provide the information below. If N/A, do not respond.**
	* The amount and type of funds being used to construct the property

Click or tap here to enter text.

* + Evidence of site control - submitted as a supplemental attachment
	+ Evidence of completed and approved environmental review - submitted as a supplemental attachment
	+ Identify the owner of the property and their experience with construction or rehabilitation

Click or tap here to enter text.

* + The number of units that will be finished using CoCBuilds funds.

Click or tap here to enter text.

1. **Experience Managing Projects Serving Households Experiencing Homelessness [12 points]**
2. **Describe your organization’s experience and your proposed subrecipients’ experience administering programs for individuals and families experiencing homelessness where one member of the household has a disability. This description should include:**
	* Experience managing properties, such as how you determine the amount of rent to charge based on unit size, addressing program participant complaints, working with other service organizations that may place program participants in the units, and maintaining the properties.
	* NOTE: Maximum points for experience with the above activities in at least 4 properties

Click or tap here to enter text.

1. **Describe the type and frequency of supportive services that will be available to program participants in the proposed project. State whether your organization or another organization will provide supportive services.**
	* Please also describe the prior experience of this organization in providing supportive services to participants experiencing homelessness where one member of the household has a disability.

Click or tap here to enter text.

1. **Is the project location accessible to amenities such as shopping, medical care, etc. via walking or public transportation?**

Choose an item.

* + If yes, please briefly describe.

Click or tap here to enter text.

* + If no, please briefly describe plan for providing transportation for program participants.

Click or tap here to enter text.

1. **Clear and Realistic Implementation Schedule [12 points]**
2. **Please provide your implementation schedule based on the proposed CoCBuilds project. Response should include proposed schedule for site control, environmental review, execution of grant agreement, state and completion dates, occupancy certificate timeline, date property will be available for households to occupy units.**

Based on the type of capital cost requested, provide:

* + New construction – date construction will begin and end, and date property will be available for move-in
	+ Acquisition – date property will be acquired
	+ Rehabilitation – dates rehabilitation of the property will begin and end

Click or tap here to enter text.

1. **Based on your proposed schedule, what would be your desired grant term with HUD?**

Choose an item.

1. **Experience Managing Rental Housing [10 points]**
2. **Describe the rental housing projects you or your subrecipient have managed. If you have or will partner with other organization(s) to manage a property(s), provide the organization’s information, type of program participants assisted, and experience managing rental housing.**

Click or tap here to enter text.

1. **Include the number of grants for affordable housing your agency has been awarded over the last three years, total amount of awards, and the type of subsidy funding or financing provided for housing.**
	* NOTE: Maximum points will be available for adequately describing management of at least 4 times the number of properties and units proposed in this application.

Click or tap here to enter text.

1. **Housing Leveraging [5 points]**
2. **Will this project leverage non-CoC funded housing resources? NOTE: Maximum points for project that provides leveraged housing resources for at least 50% of the total amount being requested OR at leveraged housing resources for at least 25% of the proposed units.**

Choose an item.

If yes, please provide:

* + - Source of commitment (i.e., what entity or funding source is committing the units)

Click or tap here to enter text.

* + - Percentage of subsidies or number of units being committed to the project from leveraged resources

Click or tap here to enter text.

AND

**If yes, please attach a written commitment** from the housing leveraging partner related to this leveraging commitment. If selected for funding, the CoC will work with you to finalize the leveraging commitment documentation to meet HUD’s requirements.

1. **Healthcare Leveraging [5 points]**
2. **Will this project leverage non-CoC funded healthcare or supportive services? NOTE: Maximum points for projects that provide leveraged services that are equivalent to at least $7,500 per unit included in the proposed project. Partial points may be awarded for leveraged services that are less than this threshold.**
	* Choose an item.
	* If yes, please provide:
		+ Source of commitment (i.e., what organization or entity is committing the services)

Click or tap here to enter text.

* + - Dollar amount of commitment

Click or tap here to enter text.

* + - Describe the types of healthcare or supportive services to be provided. Services may include supportive services, home-based and long-term services and supports, primary and medical care, behavioral health, substance use disorder services, treatment and recovery services, or other health or social services.

Click or tap here to enter text.

AND,

**If yes, please attach written commitment** from the healthcare/supportive service leveraging partner related to this leveraging commitment. If selected for funding, the CoC will work with you to finalize the leveraging commitment documentation to meet HUD’s requirements.

1. **Experience Promoting Racial Equity [8 points]**
2. **Please describe:**
	* **Your experience, or the experience of a subrecipient, soliciting, obtaining, and applying input from underserved groups when designing, planning, and implementing housing projects.**

Click or tap here to enter text.

* + **Your experience, or the experience of a subrecipient, building community partnerships with grassroots and resident-led organizations that provide housing, health care, and supportive services.**

Click or tap here to enter text.

* + **Your experience, or the experience of a subrecipient, designing or operating programs that have improved racial equity, particularly among people experiencing homelessness.**

Click or tap here to enter text.

1. **Other Experience**
2. **Does your organization or proposed subrecipients have a plan for maintaining the property annually and conducting needed repairs?**

Choose an item.

* + Optional Comments

Click or tap here to enter text.

1. **Will there be reserve funds specifically for maintenance and repair of proposed units?**

Choose an item.

* + Optional Comments

Click or tap here to enter text.

1. **Will the PSH units be part of mixed-use development in which individuals and families that do not have disabilities will also reside?**

Choose an item.

* + Optional Comments

Click or tap here to enter text.

1. **Will you pursue any environmental justice policy initiatives within the project? If yes, check all that are applicable. [Optional - 2 Bonus points]**

\*NOTE: If you choose to address an environmental justice policy initiative in your application, you will be required to adhere to the information submitted with your application should you receive an award from HUD.

[ ]  Reducing or mitigating exposure to environmental and health hazards (e.g. industrial facilities, EPA superfund sites, brownfields and legacy pollution, heat islands)

Describe

Click or tap here to enter text.

[ ]  Improving protection from and resilience to environmental harms (e.g. fire-resistant materials, floodproofing)

 Describe

Click or tap here to enter text.

[ ]  Expanding environmental benefits (e.g. clean air and water, public transportation, bike and walking paths, clean energy, green technology, biodiversity)

 Describe

Click or tap here to enter text.

[ ]  Overcoming prior disinvestment in environmental infrastructure (e.g. drainage systems, green spaces, pollution controls)

Describe

Click or tap here to enter text.

1. **Attachments**

**Please submit the following attachments with your application.**

[ ] Budget Workbook [required]

[ ] Evidence of Eligibility to Apply (501c3, PHA, or local government status) [required]

[ ] Housing Leveraging Commitments [if applicable]

[ ] Healthcare Leveraging Commitments [if applicable]

[ ] Other (such as proof of site control, proof of environmental review, etc.) [if applicable]