

**Rhode Island Housing**  
**Combined Funding Application for HOME and Housing Trust Fund**

**Due 4:00 p.m.**  
**December 18, 2020**

Applicant Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

Address(es): \_\_\_\_\_

\_\_\_\_\_

Please indicate the amount of funds you are requesting:

***Total Funds Requested:*** \$ \_\_\_\_\_

**HOME Funds:** \$ \_\_\_\_\_

**HTF Funds:** \$ \_\_\_\_\_

*If your organization is a Community Housing Development Organization (“CHDO”) and will be seeking operating support for expenses directly attributable to your development proposal please complete the proposed budget for CHDO operating support and check here:*

***Application Instructions:***

**All applicants are required to participate in a pre-application meeting.**

Applications (including all spreadsheets and attachments) must be uploaded via Smartsheet. Please contact Lauren Farley, HOME and HTF Coordinator, at lfarley@rihousing.com or 401-429-1412 for access information and to set up pre-application conference call.

**1. Applicant Information**

Organization: \_\_\_\_\_

Ownership entity if different from above: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Tax ID: \_\_\_\_\_ Agency DUNS # (required): \_\_\_\_\_

Executive Director: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Type of Organization:

Housing developer: \_\_\_\_\_ Organization is: non-profit  for-profit

Housing Authority:  Municipality:

Social Service Agency  Other: \_\_\_\_\_

**2. Project Location**

Project Name: \_\_\_\_\_

Street Address\*: \_\_\_\_\_

City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Plat: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Census Tract: \_\_\_\_\_ Block Group: \_\_\_\_\_

*\*for scattered site developments attach a separate list of addresses.*

**3. Project Involves** *(check all that apply)*

Acquisition *if yes, submit a Voluntary Acquisition Letter*

New Construction Rehabilitation

Demolition Relocation *if yes, submit a relocation plan.*

Environmental Remediation *Please refer to RIH Relocation Handbook*

Property is: Vacant Land

Existing building  Year built: \_\_\_\_\_ To be demolished? Yes

Property/site is in a 100-year Flood Zone Yes

**Submit a FEMA flood map for every project address (see Application Checklist on page 8).**

**4. Occupancy and Relocation**

Number of current residential units in building: \_\_\_\_\_ Number of commercial spaces: \_\_\_\_\_

Is property occupied? No Yes

If yes, number of occupied units: \_\_\_\_\_ Number of operating businesses: \_\_\_\_\_

Number requiring permanent relocation: households: \_\_\_\_\_ businesses: \_\_\_\_\_

Number requiring temporary relocation\*: households: \_\_\_\_\_ businesses: \_\_\_\_\_

**5. Total Number of Proposed Residential Units**

Total Number of Units: \_\_\_\_\_ Number of Affordable Units: \_\_\_\_\_

# HOME units: \_\_\_\_\_ # HTF units: \_\_\_\_\_

Total building square footage (units and community/commercial): \_\_\_\_\_

Total commercial square footage: \_\_\_\_\_ Total community space square footage: \_\_\_\_\_

Total number of on-site parking spaces: \_\_\_\_\_

<b>Rental Unit Summary</b>										
<b>Number of Bedrooms: SRO, EFF, 1 through 5</b>	<b>Number of Baths</b>	<b>Assisted Unit Sq. Footage</b>	<b>Total Number of Units at This Size</b>	<b>Number of Units at _____ % AMI</b>	<b>Number of Units at _____ % AMI</b>	<b>Number of Units at _____ % AMI</b>	<b>Operating Subsidy (Yes or No)?</b>	<b>Proposed Tenant Paid Utilities (U/A)</b>	<b>Proposed Net Rent Per Unit Per Month</b>	<b>Proposed Gross Rent Per Unit Per Month</b>
<b>Totals:</b>										

\*Temporary relocation applies to tenants who are eligible to return to the development upon completion. Temporary relocation cannot exceed 12 months. Temporarily relocated tenants must be re-housed in the development at rents that do not exceed 30% of household income.

**6. Site Control. *Attach evidence of site control. See Application Checklist on pages 8.***

Applicant Owned

P & S Agreement

Option

No Site Control                      Purchased with RIH bridge loan?    Yes            No

Explanation, if needed: \_\_\_\_\_

Name of Current Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Acquisition Cost: \_\_\_\_\_

**7. Project Status.** *Attach evidence, if available. See Application Checklist on page 8.*

Item	Already Obtained	Not Needed	In Process	Expected Date
Zoning Approval				_____
Planning/Subdivision				_____
Final Comprehensive Permit				_____
Building Permits				_____
DEM Wetlands	<input type="checkbox"/>			_____
DEM Remediation	<input type="checkbox"/>			_____
DEM Septic Approval				_____
HUD Flood Zone				_____
RI Historic Preservation &				_____
Phase I Environmental				_____
Phase II Environmental				_____
Utility Availability				_____

**8. Project Schedule**

Benchmark	Expected Date
Reservation of all funding acquired	
Date of Closing	
Acquisition of property	
Completion of design/engineering	
Request for Construction/Rehab Bids	
Award of construction contract	
Begin marketing of units	
Start construction	
Construction completion	
Submission of occupant eligibility documentation	
Full Occupancy	

**9. Project Details** (*check all that apply*). **Do not claim anything that cannot be substantiated.**

**Sustainable Design & Accessibility:**

Compact Development	Smart Growth / Walkability
Uses Existing Infrastructure	Public Water <input type="checkbox"/> Public Sewer
Brownfield Redevelopment	Historic Preservation <input type="checkbox"/>
Preserves/Provides Open Space	Percentage of open space provided: _____
Preserves Agricultural Land	Neighborhood Revitalization <input type="checkbox"/>
EPA Water Sense Appliances	Energy Star
Universal Design	Green Building
Handicapped Accessible Units	Number of ADA units: _____

**Geographic Diversity:**

Amount of housing stock in city/town considered affordable? \_\_\_\_\_%

Provides Transportation Options	within _____ mile(s)
Access to Employment Centers/Jobs	within _____ mile(s)
Access to Community Services	within _____ mile(s)
Access to Food and Retail Goods	within _____ mile(s)
Access to Parks/Recreational Areas	within _____ mile(s)
Access to High Performing Schools	Please Specify: _____

**Duration of Affordability:** Affordability Period \_\_\_\_\_ years.

**10. Write a concise narrative description of your proposal which includes:**

- a) Describe the objectives and beneficiaries of proposal (including location and community impact) and explanation of how your project is consistent with the State Guide Plan, emphasizing Land Use 2025 and the Strategic Housing Plan and the Rhode Island Consolidated Plan.
- b) Describe all previous affordable housing projects your organization has produced and identify all key staff members, partners and development team (e.g., architects, engineers, consultants, property manager).
- c) Describe any community/resident input into project planning and/or execution and explain how this project addresses that feedback and community needs.

**ATTACH IN EXACT ORDER THE INFORMATION AND/OR  
DOCUMENTS REQUESTED ON APPLICATION CHECKLIST TO  
SMARTSHEET**

**All applicants must sign the Agreement and Certification.**

**Agreement and Certification**

The undersigned specifically agrees that the funds requested by this application will be secured by a Mortgage and/or Deed Restriction on the property described herein and that Rhode Island Housing, its agents, successors and assigns make no representations or warranties, express or implied, to the Applicant regarding the property, the condition of the property or the value of the property.

*I verify that the information in this application is true and correct. I understand that false statements herein are subject to the penalties of Rhode Island Law relating to unsworn falsification to authorities.*

Organization Name:

By: \_\_\_\_\_ Title: \_\_\_\_\_

Print or type name

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Application Checklist

### Attach in this order (for all applications)

Application (signed and dated)

Narrative proposal description (Question 10)

Board Resolution authorizing submission

### *Tab 1: Financial*

Complete **all** Development Proforma pages/budgets

Evidence of funding reservation(s)

### *Tab 2: Development Team Capacity*

Resumes of all development staff

Architect and Contractor Qualifications (if selected)

Organization's financial compilation or audit

### *Tab 3: Project Status*

Property Deed and legal description of each property

Include Plat, Lot and zip codes for all addresses

Photographs of property

Evidence of site control

Evidence of zoning approval

FEMA Flood Map for each address

### *Tab 4: Design & Construction*

Schematic Design and Specs

(Refer to RIH D&C Handbook)

Detailed construction estimates (rehabilitation budget)  
prepared by qualified professionals.



## Application Checklist continued

### Tab 5: Unit Marketing and Housing Demand

Market Analysis Form & Attachments

Waitlist

Market Study (if available)

Tenant Selection Policy

HUD Form 935.2 and written  
Affirmative Marketing Plan

### Tab 6: Geographic Diversity/Community

Site location map (also show surrounding area)

Evidence of Community Involvement in Planning

### Additional tabs for the following:

#### ***Acquisition only:***

Voluntary Acquisition Letter to Seller

#### ***Relocation only:***

Relocation plan that includes household and unit size and current gross rent, and copies of GIN sent to tenants.

#### ***Community Housing Development Organizations only:***

CHDO Addendum

CHDO Operating Application