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Part V

Department of Housing and Urban Development

**Notice of Funding Availability for Fiscal
Year (FY) 2005 Self-Help Homeownership
Opportunity Program (SHOP); Notice**

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4951-N-01]

Notice of Funding Availability for Fiscal Year (FY) 2005 Self-Help Homeownership Opportunity Program (SHOP)

AGENCY: Office of the Assistant Secretary for Community Planning and Development, HUD.

ACTION: Notice of Funding Availability (NOFA).

Overview Information

A. *Federal Agency Name:* Department of Housing and Urban Development, Office of Community Planning and Development.

B. *Funding Opportunity Title:* Self-Help Homeownership Opportunity Program (SHOP).

C. *Announcement Type:* Initial announcement.

D. *Funding Opportunity Number:* The **Federal Register** number for this NOFA is FR-4951-N-01. The Office of Management and Budget (OMB) paperwork approval number is 2506-0157.

E. *Catalog of Federal Domestic Assistance (CFDA) Number:* Self-Help Homeownership Opportunity Program. The CFDA number is 14.247.

F. *Application Deadline:* The application submission date is November 7, 2005. Applications may be submitted electronically or in paper version. Applications submitted electronically through www.Grants.gov must be received by grants.gov no later than 11:59:59 p.m. eastern time on the application submission date. Applicants submitting paper applications must send their applications via the United States Postal Service (USPS) no later than 11:59:59 p.m. eastern time on the application submission date. Please see the General Section of the SuperNOFA (70 FR 13575) published March 21, 2005, for further information about application submission, delivery, and timely receipt requirements.

G. *Optional, Additional Overview Content Information:* SHOP funds are awarded to national and regional nonprofit organizations and consortia demonstrating experience in administering self-help housing programs in which the homebuyers contribute a significant amount of sweat-equity toward construction or rehabilitation of the dwelling.

The amount available for SHOP in Fiscal Year (FY) 2005 is approximately \$24,800,000 to be awarded to eligible applicants.

Full Text of Announcement

I. Funding Opportunity Description

A. Program Description

SHOP funds are intended to facilitate and encourage innovative homeownership opportunities on a national geographically diverse basis through self-help housing programs that require a significant amount of sweat-equity by the homebuyer toward the construction or rehabilitation of the dwelling.

SHOP programs are administered by national and regional nonprofit organizations and consortia. Units developed with SHOP funds must be decent, safe, and sanitary non-luxury dwellings and must be made available to eligible homebuyers at prices below the prevailing market prices. Eligible homebuyers are low-income individuals and families (*i.e.*, those whose annual incomes do not exceed 80 percent of the median income for the area, as established by HUD) who would otherwise be unable to purchase a dwelling but for the provision of sweat equity. Housing assisted under this NOFA must involve labor contributed by homebuyers and volunteers in the construction of dwellings and by other activities that involve the community in the project.

B. Authority

The funding made available under this program is authorized by Section 11 of the Housing Opportunity Program Extension Act of 1996 (42 U.S.C. 12805 note) (the "Extension Act").

II. Award Information

Approximately \$24,800,000 will be available for this program in FY 2005. Any unobligated funds from previous competitions or additional funds that may become available due to deobligation or recapture from previous awards or budget transfers may be added to the FY 2005 appropriation to fund applications submitted in response to this NOFA. Awards will be made to successful applicants in the form of a grant. The period for drawing funds is up to 36 months from the date HUD establishes a line of credit for successful applicants.

III. Eligibility Information

A. Eligible Applicants

You must be a national or regional nonprofit public or private organization or consortium that has the capacity and experience to provide or facilitate self-help housing homeownership opportunities. Your organization or consortium must undertake eligible

SHOP activities directly and/or provide funding assistance to your local affiliates to carry out SHOP activities.

A national organization is defined as an organization that carries out self-help housing activities or funds affiliates that carry out self-help housing activities on a national scope. A national organization must propose in its application to use a significant amount of SHOP funds in at least two states.

A regional organization is defined as an organization that carries out self-help housing activities or funds affiliates that carry out self-help housing activities on a regional scope. A regional area is a geographic area, such as the Southwest or Northeast, that includes at least two states. The regional organization must propose to use a significant amount of SHOP funds in at least two states. The states in the region need not be contiguous, and the service area of the organization need not precisely conform to state boundaries. Affiliates working under regional organizations must be located within the regional organization's service area.

A consortium is defined as two or more nonprofit organizations located in at least two states that individually have the capacity and experience to carry out self-help housing activities or fund affiliates that carry out self-help housing activities on a national or regional scope and enter into an agreement to submit a single application for SHOP funding on a national or regional basis. The consortium must propose to use a significant amount of SHOP funds in each state represented in the consortium. One organization must be designated as the lead entity. The lead entity must submit the application and, if selected for funding, execute the SHOP Grant Agreement with HUD and assume responsibility for the grant on behalf of the consortium in compliance with all program requirements.

A consortium agreement, executed and dated by *all* consortium members for the purpose of applying for and using FY 2005 SHOP funds, must be submitted with your application. All consortium members must be identified in your application. A consortium's application must be a *single integrated document that demonstrates the consortium's comprehensive approach to self-help housing*. If individual consortium members use different program designs, your application must briefly describe in factor 3 the program design of each consortium member. Upon being funded, the lead entity must enter into a separate agreement with each consortium member. The agreement must incorporate the requirements of the FY 2005 SHOP

Grant Agreement between HUD and the consortium and outline the individual consortium member's responsibilities for compliance with HUD's 2005 SHOP program.

An affiliate is defined as:

(1) a local public or private nonprofit self-help housing organization which is a subordinate organization (*i.e.*, chapter, local, post, or unit) of a central organization and covered by the group exemption letter issued to the central organization under Section 501(c)(3) of the Internal Revenue Code;

(2) a local public or private nonprofit self-help housing organization with which the applicant has an existing relationship (*e.g.*, the applicant has provided technical assistance or funding to the local self-help housing organization); or

(3) a public or private nonprofit self-help housing organization with which the applicant does not have an existing relationship, but to which the applicant will provide necessary technical assistance and mentoring as part of funding under the application.

You must carry out eligible activities or you must enter into an agreement to fund affiliates to carry out eligible activities. If you are a consortium, each of your affiliates must be linked to an individual consortium member.

Your application may not propose to fund any affiliate or consortium member that is also included in another SHOP application. You must ensure that any affiliate or consortium member under your FY 2005 application is not also seeking FY 2005 SHOP funding from another SHOP applicant. If an affiliate applies for funds through more than one applicant, it may be disqualified for any funding.

B. Cost Sharing or Matching

There is no match requirement for the SHOP funds. However, you are expected to leverage resources for the construction of self-help housing assisted with SHOP. Failure to provide documentation of leveraged resources that meet the submission requirements for firm commitments as stated in factor 4 will result in a lower application score.

C. Other

1. Eligible Activities

Eligible activities are:

a. *Land acquisition* (including financing and closing costs), which may include reimbursing an organization, consortium, or affiliate, upon approval of any required environmental review, for non-grant amounts expended by the organization, consortium, or affiliate to

acquire land before completion of the review;

b. *Infrastructure improvements* (installing, extending, constructing, rehabilitating, or otherwise improving utilities and other infrastructure, including removal of environmental hazards); and

c. *Administration, planning, and management development*, including the costs of general management, oversight, and coordination of the SHOP grant, staff and overhead costs of the SHOP grant, costs of providing information to the public about the SHOP grant, costs of providing civil rights training to local affiliates as well as any expenses involved in affirmatively furthering fair housing, and indirect costs (such as rent and utilities) of the grantee or affiliate in carrying out the SHOP activities.

2. Threshold Requirements

HUD will not consider an application from an ineligible applicant. An applicant must meet all of the applicable threshold requirements of Section III.C of the General Section of the SuperNOFA (70 FR 13575). Each applicant must meet and comply with the SHOP threshold requirements described below:

a. *Organization and Eligibility*. You must be eligible to apply under SHOP (see Section III.A. of this program section).

b. *Non-Profit Status*. You must describe how you qualify as an eligible applicant and provide evidence of your public or private nonprofit status, such as a current Internal Revenue Service (IRS) ruling that your organization is exempt from taxation under Section 501(c)(3) or 501(c)(4) of the Internal Revenue Code of 1986. If you are a consortium, each participant in your consortium must be a nonprofit organization. Each consortium member must submit evidence of its nonprofit status to the lead entity for inclusion in the consortium's application package.

c. *Consortium Agreement*. If you are a consortium, each consortium member must enter into and sign a consortium agreement for the purpose of applying for and carrying out SHOP activities. Your consortium agreement must be submitted as an appendix to your application.

d. *Amount*. The amount of SHOP funds you request must be sufficient to complete a minimum of 30 self-help housing units and may not exceed an average investment of \$15,000 per unit.

e. *Homebuyer Eligibility*. The population you propose to serve must be eligible for SHOP assistance. Eligible homebuyers are low-income individuals

and families (*i.e.*, those whose incomes do not exceed 80 percent of the median income for the area, as established by HUD). You must specify the definition of "annual income" to be used in your proposed program. You may use one of the following three definitions of "annual income" to determine whether a homebuyer is income eligible under SHOP:

(1) "Annual income" as defined at 24 CFR 5.609; or

(2) "Annual income" as reported under the Census long-form for the most recent available decennial Census; or

(3) "Adjusted gross income" as defined for purposes of reporting under the IRS Form 1040 series for individual federal annual income tax purposes.

You may also adopt or develop your own definition of annual income for use in determining income eligibility under SHOP subject to review and approval by HUD.

f. *Experience*. You must demonstrate that you have successfully completed at least 30 self-help homeownership units in a national or regional area within the 24-month period immediately preceding the publication of this NOFA. To qualify as self-help homeownership units, the homebuyers must have contributed a significant amount of sweat-equity toward the construction of the dwellings as set forth in Section III.C.2(g) below.

g. *Sweat Equity*. Your program must require homebuyers to contribute a minimum of 100 hours of sweat equity toward the construction or rehabilitation of their own homes and/or the homes of other homebuyers participating in the self-help housing program. However, in the case of a household with only one adult, the requirement is 50 hours of sweat equity toward the construction of these homes. This includes training for construction on the dwelling units, but excludes homebuyer counseling and home maintenance training. All homebuyers must meet these minimum hourly sweat equity requirements; however, grantees must permit reasonable accommodations for persons with disabilities in order for them to meet the hourly requirements. For example, homebuyers with disabilities may work on less physical tasks or administrative tasks to meet this requirement or a volunteer(s) may enter into an agreement to substitute for the disabled person.

h. *Community Participation*. Your program must involve community participation in which volunteers assist in the construction of dwellings. Volunteer labor is work performed by an individual without promise, expectation, or compensation for the

work rendered. For mutual self-help housing programs that are assisted by the U.S. Department of Agriculture's Rural Housing Services/Rural Development under Section 523 of the Housing Act of 1949 (7 CFR Part 1944, subpart I) or which have a program design similar to the Section 523 program, the work by each participating family on other participating families' homes may count as volunteer labor. A mutual self-help housing program generally involves 4 to 10 participating families organized in a group to use their own labor to reduce the total construction cost of their homes and complete construction work on their homes by an exchange of labor with one another.

i. *Eligible Activities.* You must propose to use the SHOP funds for eligible activities (see Sections III.C.1 and IV.D.). You must carry out the activities or you must fund affiliates to carry out the activities.

3. Threshold Submission Requirements

In order for your application to be rated and ranked, all threshold requirements must be met. Threshold requirements 2 (d) through (i) above do not require separate submissions. These requirements must be addressed under the submission requirements for the rating factors listed below in Section V, Application Review Information Criteria, of this SHOP NOFA.

4. Other Requirements

a. *Affirmatively Furthering Fair Housing.* SHOP recipients must affirmatively further fair housing.

b. *Economic Opportunities for Low- and Very Low-Income Persons* (Section 3). SHOP recipients must comply with Section 3 of the Housing and Urban Development Act of 1968 (Section 3), 12 U.S.C. 1701u (Economic Opportunities for Low- and Very Low-Income Persons in Connection with Assisted Projects), and the HUD regulations at 24 CFR part 135, including the reporting requirement of subpart E. Section 3 requires recipients to ensure that to the greatest extent feasible, training, employment, and other economic opportunities will be directed to low- and very-low income persons, particularly those who are recipients of government assistance for housing, and business concerns that provide economic opportunities to low- and very-low income persons.

c. *Ensuring the Participation of Small Businesses, Small Disadvantaged Businesses, and Women-Owned Businesses.* SHOP recipients (grantees and affiliates) must comply with 24 CFR 84.44(b) to take all necessary affirmative

steps in contracting for the purchase of goods or services to assure that minority firms, women's business enterprises, and labor surplus area firms are used whenever possible.

d. Executive Order 13166, "Improving Access to Services for Persons With Limited English Proficiency (LEP)." See the General Section for requirements for providing access to services under this Executive Order.

e. Executive Order 13279, "Equal Protection of the Laws for Faith-Based and Community Organizations." See the General Section.

f. *Participation in HUD-Sponsored Program Evaluation.* See the General Section.

g. Executive Order 13202, "Preservation of Open Competition and Government Neutrality Towards Government Contractors' Labor Relations on Federal and Federally Funded Construction Projects." See the General Section.

h. *Salary Limitation for Consultants.* See the General Section.

i. *Real Property Acquisition and Relocation.* SHOP projects are subject to the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (Uniform Act or URA) (42 U.S.C. 4601), and the government-wide implementing regulations issued by the U.S. Department of Transportation at 49 CFR part 24.

The Uniform Act is a federal law that establishes minimum standards for federally funded programs and projects that require the acquisition of real property (real estate) or displace persons from their homes, businesses, or farms. The Uniform Act's protections and assistance apply to the acquisition, rehabilitation, or demolition of real property for federal or federally funded projects. The Uniform Act was enacted by Congress to ensure that people whose real property is acquired, or who move as a direct result of projects receiving federal funds, are treated fairly and equitably and receive assistance in moving from the property they occupy.

SHOP grantees and affiliates must comply with all applicable Uniform Act requirements in order to receive SHOP funds for their programs and projects; non-compliance could jeopardize SHOP funding. Real property acquisitions for a SHOP-assisted program or project conducted prior to completion of an environmental review and HUD's approval of a request for release of funds and environmental certification are also subject to the Uniform Act. SHOP grantees and affiliates must ensure that all such real property acquisitions

comply with applicable Uniform Act requirements.

Generally, real property acquisitions conducted without the threat or use of eminent domain, commonly referred to as "voluntary acquisitions," must satisfy the applicable requirements and criteria of 49 CFR 24.101(b)(1) through (5). Evidence of compliance with these requirements must be submitted to and be maintained by the SHOP grantee. It is also important to note that tenants who occupy property which may be acquired through voluntary means must be fully informed as to their eligibility for relocation assistance. This includes notifying such tenants of their potential eligibility when negotiations are initiated, notifying them if they become fully eligible, and, in the event the purchase of the property will not occur, notifying them that they are no longer eligible for relocation benefits. Evidence of compliance with these requirements must be submitted to and be maintained by the SHOP grantee.

Additional information and resources pertaining to real property acquisition and relocation for HUD-funded programs and projects are available on HUD's Real Estate Acquisition and Relocation Web site at <http://www.hud.gov/relocation>. You will find applicable laws and regulations, policy and guidance, publications, training resources, and a listing of HUD contacts if you have questions or need assistance.

j. *Environmental Requirements.* The environmental review requirements for SHOP supersede the environmental requirements in the General Section. The provisions contained in section 305(c) of the Multifamily Housing Property Disposition Reform Act of 1994, implemented in the Environmental Review regulations at 24 CFR part 58, are applicable to properties assisted with SHOP funds. All SHOP assistance is subject to the National Environmental Policy Act of 1969 and related federal environmental authorities. SHOP grant applicants are cautioned that no activity or project may be undertaken, or federal or non-federal funds or assistance committed, if the project or activity would limit reasonable choices or could produce an adverse environmental impact until all required environmental reviews and notifications have been completed by a unit of general local government, tribe, or state and until HUD approves a recipient's request for release of funds under the environmental provisions contained in 24 CFR part 58. Notwithstanding the preceding sentence, in accordance with section 11(d)(2)(A) of the Housing Opportunity Extension Act of 1996 and HUD Notice

CPD-01-09, an organization, consortium, or affiliate receiving SHOP assistance may advance non-grant funds to acquire land prior to completion of an environmental review and HUD's approval of a request for release of funds and environmental certification. Any advances to acquire land prior to such approval are made at the risk of the organization, consortium, or affiliate, and reimbursement from SHOP funds for such advances will depend on the result of the environmental review.

k. **Statutory and Program Requirements.** SHOP is governed by Section 11 of the Housing Opportunity Program Extension Act of 1996 (42 U.S.C. 12805 note) (the Extension Act), and this NOFA. There are no program regulations. You must comply with all statutory requirements applicable to SHOP as cited in Section I, Funding Opportunity Description, of this SHOP NOFA and the program requirements cited in this SHOP NOFA. Pursuant to these requirements, you must:

(1) Develop, through significant amounts of sweat-equity by each homebuyer and volunteer labor, at least 30 dwelling units at an average cost of no more than \$15,000 per unit of SHOP funds for land acquisition and infrastructure improvements;

(2) Use your grant to leverage other sources of funding, including private or other public funds, to complete construction of the housing units;

(3) Develop quality dwellings that comply with local building and safety codes and standards, that will be made available to homebuyers at prices below the prevailing market price;

(4) Schedule SHOP activities to expend all grant funds awarded and substantially fulfill your obligations under your grant agreement, including timely development of the appropriate number of dwelling units. Grant funds must be expended within 24 months of the date that they are first made available for draw-down in a line of credit established by HUD for the Grantee, except that grant funds provided to affiliates that develop five or more units must be expended within 36 months; and

(5) Not require a homebuyer to make an up-front financial contribution to a housing unit other than cash contributed for down payment or closing costs at the time of acquisition.

IV. Application and Submission Information

A. Address To Request Application Package

This notice contains all the information necessary for national and

regional nonprofit organizations and consortia to submit an application for SHOP funding. This section describes how you may obtain application forms, additional information about the SHOP program NOFA, and technical assistance. Copies of the published SHOP NOFA and related application forms for this NOFA may be downloaded from the grants.gov Web site at www.grants.gov/FIND. You may choose from links provided under the topic "Search Grant Opportunities," which allows you to do a basic search or to browse by category or agency. If you have difficulty accessing the information, you may receive customer support from Grants.gov by calling its help line at (800) 518-GRANTS or sending an e-mail to support@grants.gov. The operators will assist you in accessing the information. If you do not have Internet access and you need to obtain a copy of this NOFA, you may contact HUD's NOFA Information Center toll-free at (800) HUD-2209.

1. **Application Kit.** There is no application kit for this program. All the information you need to apply is contained in this NOFA and available at www.grants.gov/Apply. HUD has made an effort to improve the readability of this NOFA and publish all required forms for application submission in the **Federal Register**. The NOFA forms are available to be downloaded from www.grants.gov/Apply by clicking on Apply Step 1. Please pay attention to the submission requirements and format for submission specified for this SHOP NOFA to ensure that you have submitted all required elements of your application.

The published **Federal Register** document is the official document that HUD uses to solicit applications. Therefore, if there is a discrepancy between any materials published by HUD in its **Federal Register** publications and other information provided in paper copy, electronic copy, or at www.grants.gov, the **Federal Register** publication prevails. Please be sure to review your application submission against the requirements in the **Federal Register** for this program NOFA.

2. **Guidebook and Further Information.** A guidebook to HUD programs entitled, "Connecting with Communities: A User's Guide to HUD Programs and the FY 2005 NOFA Process," is available for the HUD NOFA Information Center and the HUD Web site at www.hud.gov/offices/adm/grants/fundsavail.cfm. The guidebook provides a brief description of all HUD programs, identifies eligible applicants

for the programs, and provides examples of how programs can work in combination to serve local community needs. You can also get a copy from the NOFA Information Center at (800) HUD-8929 or, for the hearing impaired, (800) HUD-2209 (TTY) (these are toll-free numbers). The NOFA Information Center is open between the hours of 10 a.m. and 6:30 p.m. eastern time, Monday through Friday, except on Federal holidays.

B. Content and Form of Application Submission

You must meet all application and submission requirements described in Section IV.B of the General Section (70 FR 13581). Your application should consist of the items listed in the section below called Assembly Format and Content. HUD's standard forms can be found in Appendix B of the General Section (70 FR 13599).

1. **Page Limits.** There are page limits for responses to the five rating factors. A national or regional organization is limited to 60 pages of narrative to respond to the five rating factors. A consortium is permitted up to 10 additional pages total to accommodate the requirement to address the capacity and soundness of approach of its individual consortium members if they are different from that of the lead agency. Required appendices, forms, certifications, statements, and assurances are not subject to the page limitations. All pages must be numbered sequentially from 1 through 60 or 70, for factors 1 through 5. For paper submissions, tabs must be inserted to separate each factor. Your application may contain only the narrative statements that address the five rating factors and the required forms, certifications, assurances, and appendices listed in Assembly Format and Content below to be submitted for review. In responding to the five factors, information must be included in your narrative response to each factor, unless this NOFA states that it should be included as an appendix. If you are submitting material using the fax method described in the General Section (70 FR 13583), the narrative should refer to the documents being faxed as part of your narrative response to the factor. Any supplemental information not required in the narratives or appendices requested by HUD that further explains information required in the five factors will not be reviewed for consideration in the scoring of the application. Applicants are discouraged from submitting unnecessary documentation.

2. Assembly Format and Content.

Your FY 2005 application will be comprised of an Application Overview, Narrative Statements (rating factors), Forms, and Appendices. In order to receive full consideration for funding, you should use the following checklist to ensure that all requirements are addressed and submitted with your electronic application. For applicants that submit a paper application, the application must be assembled according to the following checklist to ensure that all of the required items are submitted.

a. Application Overview (Not subject to the page limitations)

- SF-424, Application for Federal Assistance (signed by the Authorized Organization Representative (AOR) of the organization eligible to receive funds).
- SF-424 Supplement, Survey on Ensuring Equal Opportunity for Applicants.
- Self-Help Housing Organization Qualification—Narrative describing qualification as an eligible applicant and Evidence of Nonprofit Tax Exempt Status (in accordance with section III.C.2. of this NOFA).
- Consortium Agreement, if applicable.
- Program Summary.

b. Narrative Statements Addressing: (Subject to the page limitations described above.)

- Factor 1—Capacity of the Applicant and Relevant Organizational Staff.
- Factor 2—Need/Extent of the Problem.
- Factor 3—Soundness of Approach.
- Factor 4—Leveraging Resources.
- Factor 5—Achieving Results and Program Evaluation.

c. Forms, Certifications, and Assurances: (Not subject to the page limitations.)

- HUD-424CB, Grant Application Detailed Budget.
- HUD-424-CBW, Grant Application Detailed Budget Worksheet.
- SF-LLL, Disclosure of Lobbying Activities, as applicable.
- HUD-2880, Applicant/Recipient Disclosure/Update Report.
- HUD-2990, Certification of Consistency with the RC/EZ/EC-II Strategic Plan.
- HUD-2993, Acknowledgment of Application Receipt (paper submissions only).
- HUD-96011, Facsimile Transmittal (electronic submissions only).
- HUD-2994, Client Comments and Suggestions (optional)

— HUD-96010, Program Outcome Logic Model.

d. Appendices: (Not subject to the page limitations.)

- A copy of your code of conduct (see section III.C.3 of the General Section, 70 FR 13577).
- Leveraging documentation—firm commitment letters (see factor 4).
- Survey of potential affiliates, if applicable (see factor 2).
- Demonstration of past performance for new applicants (see factor 1).
- HUD-27300, Questionnaire for HUD's Initiative on Removal of Regulatory Barriers (see factor 3).
- Evaluative criteria for Removal of Regulatory Barriers to Affordable Housing in affiliate selection process, if applicable (see factor 3).

e. Certifications and Assurances.

Applicants are placed on notice that by signing the SF-424 cover page noted above in 2.a., Application Overview, the applicant is certifying to all information described in Section IV.B.2 ("Certifications and Assurances") in the General Section (70 FR 13581).

C. Submission Date and Time

1. The application submission date is November 7, 2005.

2. *No Facsimiles or Videos.* HUD will not accept for review, evaluation, or funding, any entire application sent by facsimile (fax). However, third-party documents or other materials sent by facsimile in compliance with the submission requirements and received by the application submission date will be accepted. Facsimile corrections to technical deficiencies will be accepted. Also, videos submitted as part of an application will not be viewed.

D. Intergovernmental Review

Executive Order 12372 review does not apply to SHOP.

E. Funding Restrictions

1. Administrative costs.

Administrative costs may not exceed 20 percent of any SHOP grant. Indirect costs may only be charged to the SHOP grant under a cost allocation plan prepared in accordance with OMB Circular A-122.

2. *Pre-agreement costs.* After submission of the application, but before the effective date of the SHOP Grant Agreement, an applicant may incur costs that may be charged to its SHOP grant provided the costs are eligible (see Section III.C.1.) and in compliance with the requirements of this NOFA (including environmental review requirements) and the application. Applicants incur costs at their own risk, because applicants that

do not receive a SHOP grant cannot be reimbursed.

3. *Ineligible Costs.* Costs associated with the rehabilitation, improvement, or construction of dwellings and any other costs not identified in Section III.C.1. are not eligible uses of program funds. Acquiring land for land banking purposes (*i.e.*, holding land for an indefinite period) is an ineligible use of SHOP funds. Acquisition undertaken by the applicant or its affiliate before the submission of the application is not an eligible cost.

F. Other Submission Requirements

1. You must meet all submission requirements described in Section IV.F of the General Section, except the requirement for waiver of electronic submissions. Please refer to Section IV.F of the General Section (70 FR 13582) for detailed submission instructions, including methods for submission and timely receipt requirements for electronic and mailed applications. Applicants should carefully review these instructions as there have been major changes implemented for all HUD's 2005 NOFAs.

2. In addition to the submission requirements described in Section IV.F.4 of the General Section, please note the following direction specific to SHOP. During FY 2005, HUD strongly encourages submission of electronic applications. Electronic applications must be submitted through the www.Grants.gov portal. While electronic application submission through Grants.gov is encouraged, an applicant that wishes to submit a paper application must send an original and two copies to the Department of Housing and Urban Development, Central Processing Unit, Room 7152, 451 Seventh Street, SW., Washington, DC 20410, ATTN: Self-Help Homeownership Opportunity Program (SHOP). In subsequent years of competition, electronic submissions will be expected.

V. Application Review Information

A. Criteria

Rating Factor 1: Capacity of the Applicant and Relevant Organizational Staff (30 Points)

This factor examines the extent to which you, as a single applicant or consortium (including individual consortium members), have the experience and organizational resources necessary to carry out the proposed activities effectively and in a timely manner. Any applicant that does not receive at least 20 points under this factor will not be eligible for funding.

In evaluating this factor, HUD will consider your recent and relevant experience in carrying out the activities you propose, and your administrative and fiscal management capability to administer the grant, including the ability to account for funds appropriately. All applicants, including individual consortium members, must have capacity and experience in administering or facilitating self-help housing. If you are sponsoring affiliate organizations that do not have experience in developing self-help housing, HUD will assess your organization's experience in providing technical assistance and the ability to mentor new affiliates. For applicants that currently have open SHOP grants, HUD will assess your organization's past performance based upon performance reports that demonstrate your organization's completion of eligible SHOP activities, the number of families provided housing, financial status information focusing on timely use of funds, and other program outcomes. HUD will consider whether you have had funds deobligated for failure to meet your drawdown and construction schedules or funds were returned because of monitoring findings or other program deficiencies. HUD will also rely on monitoring reports, audit reports, and other information available to HUD in making its determination under this factor. For applicants that currently have open SHOP grants from previous years, HUD will assess your pattern of meeting benchmarks in the most recent three years of participation in the program. If you are not a current recipient of SHOP funds, you must summarize your past performance in undertaking similar or the same activities during the past three years. You may supplement your narrative with existing internal or external performance reports or other information that will assist HUD in making this determination and submit it as an appendix. Supplemental information and reports from applicants that have not received previous SHOP funding do not count against the page limitations. Failure to provide this information will result in a lower score.

Submission Requirements for Rating Factor 1

a. *Past Experience (12 points)*. You must describe your past experience in carrying out self-help housing activities (specify the time frame during which these activities occurred) that are the same as, or similar to, the activities you propose for funding, and demonstrate that you have had reasonable success in carrying out and completing those

activities. You must include the average number of sweat equity hours provided per homebuyer family, and the average number of volunteer labor hours provided per unit. You may demonstrate reasonable success by showing that your previous activities were carried out as proposed, consistent with the time frame you proposed for completion of all work. You must provide evidence regarding your performance in meeting established benchmarks for acquiring properties and completing housing construction and indicate that performance reports were submitted as required. New applicants furnishing supplemental material should refer to the introduction to this rating factor. To the extent that you encountered delays that were beyond your control, please describe the circumstances causing the delays and the mitigating actions taken to overcome them to successfully complete your program.

b. *Management Structure (12 points)*. You must provide a description of your organization's or consortium's management structure, including an organizational chart. You must also describe your key staff and their specific roles and responsibilities for day-to-day management of your proposed SHOP program. You must indicate if you will or will not be working with organizations that are inexperienced in carrying out self-help housing and describe how you will provide technical assistance and mentor these organizations to develop capacity either directly or indirectly.

c. *Experience Developing Accessible Housing (6 points)*. You must demonstrate your experience in and ability to construct and alter self-help housing by describing the kinds of features that you have used to design homes in accordance with universal design and visitability standards, or otherwise make homes accessible to the elderly or persons with disabilities. You must provide data on the number of accessible units you have completed and the time frame during which units were constructed and/or altered.

Rating Factor 2: Need/Extent of the Problem (10 Points)

This factor examines the extent to which you demonstrate an urgent need for SHOP funds in your proposed target areas based on the need for affordable housing and the quality of the data submitted to substantiate that need.

The purpose of this factor is to make sure that funding is provided where a need for funding exists. Under this factor, you must identify the community need or needs that your proposed SHOP

activities are designed to address. If you plan to select some or all affiliates after application submission, you must demonstrate how the selection of affiliates will help to address the needs identified in the proposed target areas.

Submission Requirements for Rating Factor 2

Extent of Need for Affordable Housing (10 points). You must establish the need for affordable housing and the specific need for SHOP funds in the communities or areas in which your proposed activities will be carried out. You must specifically address the need for acquisition and/or infrastructure assistance for self-help housing activities in these identified areas and how your proposed SHOP activities meet these needs. Also, to the extent information is available, you must address the need for accessible homes in the target area(s); evidence of housing discrimination in the target area(s); and any need for housing shown in the local Analysis of Impediments to Fair Housing Choice, if appropriate. Applicants that select affiliates after application submission must submit a list of affiliates they surveyed and upon which they are basing their need for SHOP funding, as well as the specific criteria to be used to select communities or projects based on need.

In reviewing applications, HUD will consider the extent, quality, and validity of the information and data submitted that addresses the need for affordable housing in the target area. Such information must include:

a. *Housing market data* in the proposed target areas including, but not limited to: Low-income, minority, and disability populations; number of home sales and median sales price; and homeownership, rental, and vacancy rates. This information can be obtained from state or regional housing plans, the American Housing Survey, the United States Census, Home Mortgage Disclosure Act data or other local data sources, such as Consolidated Plans, comprehensive plans, local tax assessor databases, or relevant realtor information. Data included in your application must be recent and specific to your proposed target areas; and

b. *Housing problems in the proposed target areas* such as overcrowding, cost burden, housing age or deterioration, low homeownership rate (especially among minority families, families with children, and families with members with disabilities), and lack of adequate infrastructure or utilities.

Rating Factor 3: Soundness of Approach (40 Points)

This factor examines the quality and soundness of your plan to carry out a self-help housing program. In evaluating this factor HUD will consider the areas described below:

a. Your proposed use of SHOP funds, including the number of units and the type(s) of housing to be constructed, and the use of sweat equity and volunteer labor; your schedule for expending funds and completing construction, including interim milestones; the proposed budget and cost effectiveness of your program; and your plan to reach all potentially eligible homebuyers, including those with disabilities and others least likely to apply; and your criteria for selecting homebuyers.

b. How your planned activities further the five HUD policy priorities that apply specifically to SHOP in FY 2005 as described in the General Section (70 FR 13586). The policy priorities for SHOP are:

(1) Providing increased homeownership opportunities for low- and moderate-income persons, persons with disabilities, the elderly, minorities, and families with limited English proficiency;

(2) Encouraging accessible design features: visitability in new construction and substantial rehabilitation and universal design;

(3) Providing full and equal access to grassroots, faith-based, and other community-based organizations in HUD program implementation;

(4) Participation in Energy Star; and

(5) Removal of regulatory barriers to affordable housing.

Submission Requirements for Rating Factor 3

Activities. Describe the types of activities that you propose to fund with SHOP and the proposed number of units to be assisted with SHOP funding, the housing type(s) (single family or multifamily, or both) to be assisted and the form of ownership (fee simple, condominium, cooperative, etc.) you propose to use.

a. *Sweat Equity and Volunteer Labor (6 points).* Describe your program's requirements for sweat equity and volunteer labor (*i.e.*, types of tasks and numbers of hours required for both sweat equity and volunteer labor) and how you will provide reasonable accommodations for persons with disabilities by identifying sweat equity assignments that can be performed by the homebuyer regardless of the disability, such as doing administrative, clerical, organizational, or other office

work or minor tasks on site. Reasonable accommodation can include sweat equity by the homebuyer that can be performed regardless of the disability or substitution of a non-homebuyer designee(s) to perform the sweat equity assignments on behalf of the homebuyer. Volunteers who substitute for disabled homebuyers must enter into an agreement to complete the work on behalf of the homebuyers. Include the dollar value of both the sweat equity and volunteer labor contributions and specify the amount by which these contributions will reduce the sales price to the homebuyer. Applicants showing a larger reduction of the sales price as a result of the homebuyer's sweat equity and volunteer labor contributions will receive a higher score.

b. *Funds Expenditure, Construction, and Completion Schedules (5 points).* Submit a construction and completion schedule that expends SHOP funds and substantially fulfills your obligations if you are funded. You must provide a definition of "substantially fulfills" by specifically stating the percentage or number of properties that you propose to be completed and conveyed to homebuyers at the time all grant funds are expended. Your construction schedule must include the number of dwelling units to be completed within 24 months or, in the case of affiliates that develop five or more units, within 36 months, and a time frame for completing any unfinished units.

Your schedule must also include milestones or benchmarks against which HUD can measure your progress in selecting local affiliates if they are not specifically identified in the application, expending funds, and completing acquisition, infrastructure, and housing construction activities within these schedules. These milestones or benchmarks should be established at reasonable intervals (*e.g.*, monthly, quarterly).

c. *Budget (6 points).* Provide a detailed budget including a breakdown for each proposed task and each budget category (acquisition, infrastructure improvements, and administration) funded by SHOP in the HUD-424-CB and 424-CBW. If SHOP funds will be used for administration of your grant, you must include the cost of monitoring consortium members and affiliates at least once during the grant period. Your detailed budget must also include leveraged funding to cover costs of completing construction of the proposed number of units. Budget amounts on the HUD-424-CB and 424-CBW must agree with amounts stated elsewhere in the application.

d. *Cost Effective (3 points).* Describe how the cost of your proposed SHOP units compares to similar units in the target area(s) that are not funded with SHOP. You must demonstrate that your SHOP costs will not exceed an average of \$15,000 per unit, and that your proposed self-help housing activities are cost-effective. Applicants must address costs of land, infrastructure, and housing construction for non-SHOP units.

e. *Policy Priorities (6 points).* Describe how each of the five HUD policy priorities identified specifically for SHOP is furthered by your proposed activities. You will receive up to one point for each policy priority (1), (2), (3), and (4) based on how well your proposed work activities address the specific policy, and up to two points for how you address policy priority (5), removal of regulatory barriers to affordable housing, for which you must submit form HUD-27300, Questionnaire for HUD's Initiative on Removal of Regulatory Barriers, except as provided below. Applicants that identify affiliate organizations and jurisdictions to be served in their application to HUD should address the questions in Part A or Part B of form HUD-27300 for the jurisdiction in which the majority or plurality of services will be performed. Applicants that do not identify affiliates and communities to be served in their application to HUD, but select affiliates competitively or through another method after application submission to HUD, may address this policy priority by including it as an evaluative criterion in their affiliate selection process. Such applicants may receive up to two points by requiring affiliate applicants for the awarded SHOP funds to complete the questions in either Part A or B, as appropriate. In order to receive points, applicants that identify affiliates after application submission must include their evaluative criterion as an appendix, and, if awarded SHOP funds in FY 2004, must demonstrate how the evaluative criteria that were included in your FY 2004 application were implemented. You must also describe how the evaluative criteria affected the selection and funding of affiliates, to the extent this has been completed. The narrative for your evaluative criteria does not count against the page limits described in Section IV.B.1, Page Limits.

Applicants applying for funds for projects located in local jurisdictions and counties/parishes are invited to answer 20 questions under Part A. An applicant that scores at least five in column 2 will receive 1 point in the NOFA evaluation. An applicant that scores 10 or more in column 2 will

receive 2 points in the NOFA evaluation. The community(ies) must be identified on the form HUD-27300.

Applicants applying for funds for projects located in unincorporated areas or areas otherwise not covered in Part A are invited to answer the 15 questions in Part B. Under Part B, an applicant that scores at least four points in Column 2 will receive one point in the NOFA evaluation. Under Part B, an applicant that scores eight points or greater will receive a total of two points in the evaluation. The community(ies) must be identified on the form HUD-27300.

A limited number of questions on form HUD-27300 expressly request the applicant to provide brief documentation with its response. Other questions require that, for each affirmative statement made, the applicant supply a reference, Web site address, or brief statement indicating where the back-up information may be found, and a point of contact, including a telephone number or e-mail address. Applicants are encouraged to read HUD's notices published in the **Federal Register** on March 22 (69 FR 13450) and April 21 (69 FR 21663), 2004, to obtain an understanding of this policy priority and how it can impact your score.

f. Program Outreach (4 points).

Describe materials or services that will be used to reach potential homebuyers, including persons least likely to apply. For example, what alternative formats will be used to reach persons with a variety of disabilities and what language accommodations will be made for persons with limited English proficiency.

g. Homebuyer Selection (6 points).

Describe your criteria for selecting homebuyers, including the minimum and maximum income of targeted homebuyers, and other criteria and selection procedures. If the selection criteria or procedures used by individual consortium members or affiliates are different from your criteria, you must describe the differences. You must specify the definition of annual income that you will use to determine the income eligibility of homebuyers as described in Section III.C.2.e. If a consortium member's or affiliate's definition of annual income is different from your income definition, you must identify the consortium member or affiliate and its definition. For organizations that select affiliates after application submission, you must specify how you will impose this requirement in your selection of affiliates.

h. Performance and Monitoring (4 points). Describe your plan for

overseeing the performance of consortium members and affiliates, including a plan for monitoring each consortium member and affiliate for program compliance at least once during the term of the grant. Your plan should address when and how you will shift funds among consortium members and affiliates to ensure timely and effective use of SHOP funds within the schedule submitted for item b. above.

Rating Factor 4: Leveraging Resources (10 Points)

This factor addresses your ability to secure other resources that can be combined with HUD's program resources to fully fund your proposed program. When combined with the SHOP grant funds, homebuyer sweat equity, and volunteer labor, your leveraged resources must be sufficient to develop the number of units proposed in your application. HUD will consider only those leveraging contributions for which current firm commitments as described in this factor have been provided. A firm commitment means a written agreement under which the applicant, a partner, or an entity agrees to perform services or provide resources for an activity specified in your application. Firm commitments in the form of cash funding (e.g., grants or loans), in-kind contributions, donated land and construction materials, and donated services will count as leverage. Leveraging does not include the dollar value of sweat equity and volunteer labor for your proposed activities. Leveraging does not include financing provided to homebuyers. However, financing provided through the U.S. Department of Agriculture's Section 502 direct loans to homebuyers for construction of their dwellings counts as leveraging for mutual self-help housing programs. Firm commitments must be substantiated by the documentation described below.

Submission Requirements for Rating Factor 4

Firm Commitments of Resources (10 Points). Provide firm commitments (letters, agreements, pledges, etc.) of leveraged resources or services from the source of the commitment. In order to be considered, leveraged resources or services must be committed in writing and include your organization's name, the contributing organization's name (including designation as a Federal, State, local, or private source), the proposed type of commitment, and dollar value of the commitment as it relates to your proposed activities. Each letter of commitment must be signed by an official of the organization legally

able to make the commitment on behalf of the organization. See section IV.F, Other Submission Requirements, of the General Section (70 FR 13583) regarding the procedures for submitting third-party documentation. Each letter of commitment must specifically support your FY 2005 SHOP application or specific projects in your FY 2005 application. If your organization depends upon fundraising and donations from unknown sources/providers, you must submit a separate letter committing a specific amount of dollars in fundraising to your proposed FY 2005 SHOP program. Likewise, if you have received funds from organizations and agencies from previous years that are not committed to another activity and you have the sole discretion to commit these funds to your FY 2005 SHOP program, you must submit a separate letter committing these dollars to your FY 2005 SHOP program. In all instances, the dollar amount must be stated in the letters. Letters of commitment may be contingent upon your receiving a grant award. Letters of commitment must be included as an appendix to your application, and do not count toward the page limitation noted in Section IV.B.1. Unsigned, undated, or outdated letters, letters only expressing support of your organization or its proposal, or those not specifically stating the dollar amount or linking the resources to your FY 2005 SHOP application or specific projects in your FY 2005 application do not count as firm commitments.

To receive full credit for leveraging, an applicant's leveraging resources must be clearly identified for its FY 2005 SHOP application and must total at least 50 percent of the amount shown on forms HUD-424-CB needed to complete all properties, minus the proposed SHOP grant amount, homebuyer sweat equity, and volunteer labor.

Rating Factor 5: Achieving Results and Program Evaluation (10 Points)

This factor emphasizes HUD's determination to track whether applicants meet commitments made in their applications and grant agreements and assess their performance in realizing performance goals. HUD requires SHOP applicants to develop an effective, quantifiable, outcome-oriented evaluation plan for measuring performance and determining whether goals have been met using the Logic Model, form HUD-96010. "Outcomes" are benefits accruing to the families and/or communities during or after participation in the SHOP program. The self-help housing units developed are outputs as described under this factor,

not outcomes. Applicants must clearly identify the outcomes to be achieved and measured. Examples of outcomes for SHOP include increasing the homeownership rate in a neighborhood or among low-income families by a certain percentage, increasing financial stability (e.g., increasing assets of the low-income homebuyer households through additional savings or home equity) or increasing housing stability (e.g., whether persons and families assisted remain in the home one, two, or five or more years after completion). Outcomes must be quantifiable.

In addition, applicants must establish interim benchmarks for which outputs lead to the ultimate achievement of outcomes. "Outputs" are the direct products of the applicant's program activities. Examples of outputs for SHOP include the number of houses constructed, number of sweat equity hours, or number of homes rehabilitated. Outputs should produce outcomes for your program. Outputs must be quantifiable.

"Interim benchmarks" are steps or stages in your activities that, if reached or completed successfully, will result in outputs for your program. Examples of interim benchmarks for SHOP include income-qualifying homebuyers, obtaining building permits, or securing construction materials and equipment.

Program evaluation requires that you identify program outcomes, outputs, benchmarks, and performance indicators that will allow you to measure your performance. Performance indicators should be objectively quantifiable and measure actual achievements against anticipated achievements. Your evaluation plan should identify what you are going to measure, how you are going to measure it, and the steps you have in place to make adjustments to your work plan if performance targets are not met within established time frames. This factor reflects HUD's goal to embrace high standards of ethics, management, and accountability. Successful applicants will be required to periodically report on their progress in achieving the proposed outcomes identified in the application.

Submission Requirements for Rating Factor 5

Program Evaluation Plan (10 Points). In narrative format, you must submit a program evaluation plan that demonstrates how you will measure your own program performance. Your plan must identify the interim benchmarks, outputs, and outcomes you expect to achieve including time frames for accomplishing these goals. Your

plan must demonstrate how interim benchmarks relate to outputs and subsequently to outcomes in your proposed program. Your plan must include performance indicators to measure actual accomplishments against anticipated achievements. You must indicate how your plan will measure the performance of individual consortium members and affiliates, including the standards and measurement methods, and the steps you have in place or how you plan to make adjustments if you begin to fall short of established benchmarks and time frames. In addition to your program evaluation plan, you must complete the Logic Model, form HUD-96010. Using form HUD-96010 to respond to this factor counts toward the page limits set forth in section IV, B of this NOFA. Form HUD-96010 may be downloaded from www.grants.gov/Apply. In rating this factor, HUD will consider whether the application identifies outcome measures that meet the definition set out in this NOFA as well as the effectiveness of proposed measurement techniques.

B. Review and Selection Process

1. Factors for Award Used To Evaluate Applications

HUD will evaluate all SHOP applications that successfully complete technical processing and meet threshold and submission requirements for Factors 1 through 5. The maximum number of points awarded for the rating factors is 100 plus the possibility of an additional 2 RC/EZ/EC-II bonus points.

2. RC/EZ/EC-II Bonus Points

Applicants may receive up to 2 bonus points for eligible activities that the applicant proposes to locate in federally designated Empowerment Zones (EZs), renewal communities (RCs), or enterprise communities (ECs) designated by the United States Department of Agriculture (USDA) in Round II (EC-IIs) that are intended to serve the residents of these areas and that are certified to be consistent with the area's strategic plan or RC Tax Incentive Utilization Plan. For ease of reference in this notice, all of the federally designated areas are collectively referred to as "RC/EZ/EC-IIs" and the residents of these federally designated areas as "RC/EZ/EC-II residents." The RC/EZ/EC-II certification must be completed for an applicant to be considered for RC/EZ/EC-II bonus points. A list of RC/EZ/EC-IIs can be obtained from HUD's grants web page at www.hud.gov/offices/adm/grants/fundsavail.cfm. Applicants can

determine if their program or project activities are located in one of these designated areas by using the locator on HUD's Web site at www.hud.gov/crlocator. Copies of the certification can be found in the electronic application and on HUD's Web site at <http://www.hud.gov/offices/adm/grants/nofa05/snofaforms.cfm>.

The certification must be completed and signed by the appropriate official in the RC/EZ/EC-II for an applicant to be considered for RC/EZ/EC-II bonus points.

3. Rating

Applications that meet all threshold requirements listed in Section III.C will be rated against the criteria in Factors 1 through 5 and assigned a score. Applications that do not meet all threshold factors will be rejected and not rated.

4. Ranking and Selection Procedures

Applications that receive a total of 75 points or more (without the addition of RC/EZ/EC-II bonus points) will be eligible for selection. RC/EZ/EC-II bonus points will be awarded as follows: 2 points to an applicant with over 25 percent of its proposed units in RC/EZ/EC-II; 1 point for 10 to 25 percent of units in RC/EZ/EC-IIs; and 0 points below 10 percent of units in RC/EZ/EC-II zones. After adding any bonus points for RC/EZ/EC-IIs, HUD will place applications in rank order. HUD will consider rank order, funds availability, and past performance in the selection and funding of applications.

5. Technical Deficiencies

After the application submission date and consistent with regulations in 24 CFR part 4, subpart B, HUD may not consider any unsolicited information you may want to provide. HUD may contact you to clarify an item in your application or to correct technical deficiencies. In order not to unreasonably exclude applications from being rated and ranked, HUD may contact applicants to ensure proper completion of the application and will do so on a uniform basis for all applicants. However, HUD may not seek clarification of items or responses that improve the substantive quality of your response to any rating factor.

Examples of curable (correctable) technical deficiencies include inconsistencies in the funding request, a failure to submit the proper certifications, or failure to submit an application that contains an original signature by an authorized official. In each case, HUD will notify you in writing by describing the clarification or

technical deficiency. Applicants will be notified by facsimile or by United States Postal Service (USPS), return receipt requested. Clarifications or corrections to technical deficiencies in accordance with the information provided by HUD must be submitted within 14 calendar days of the date of receipt of the HUD notification. If the due date falls on a Saturday, Sunday, or Federal holiday, your correction must be received by HUD on the next day that is not a Saturday, Sunday, or Federal holiday. If the deficiency is not corrected within this time period, HUD will reject your application as incomplete and it will not be considered for funding.

6. HUD's Strategic Goals To Implement HUD's Strategic Frameworks and Demonstrate Results

See the General Section (70 FR 13586) for HUD's Strategic Goals.

7. Policy Priorities

Please refer to Section V.A.2 of the General Section (70 FR 13586) for information regarding application criteria addressing HUD's policy priorities.

Note: Upon completion of all applications, grant selections and awards, HUD intends to add relevant data for the SHOP program obtained from the "Removal of Regulatory Barriers" policy priority factor to the database on state and local regulatory reform actions maintained at the Regulatory Barrier Clearinghouse Web site at www.huduser.org.rbc/ used by states, localities, and housing providers to identify regulatory barriers and learn of exemplary local efforts at regulatory reform.

VI. Award Administration Information

A. Award Notices

1. HUD reserves the right to:
 - a. Fund less than the amount requested by any applicant based on the application's rank, the applicant's past performance, and the amount of funds requested relative to the total amount of available funds;
 - b. Fund less than the full amount requested by any applicant to ensure a fair distribution of the funds and the development of housing on a national, geographically diverse basis as required by the statute; and/or
 - c. Not award funds to an applicant with significant performance problems.
- HUD will not fund any portion of an application that is ineligible for funding under program threshold requirements in Section III.C.2 or which does not meet other threshold and pre-award requirements in Section III.C.4. The minimum grant award shall be the amount necessary to complete at least 30 units at an average investment of not

more than \$15,000 per unit or a lesser amount if lower costs are reflected in the application. If any funds remain after all selections have been made, these funds may be available for subsequent competitions.

2. *Debriefing.* For a period of at least 20 days, beginning 30 days after the awards for assistance are publicly announced, HUD will provide to a requesting applicant a debriefing related to its application. A debriefing request must be made in writing or by email by its authorized official whose signature appears on the SF-424 or his or her successor in the office and submitted to Ms. Lou Thompson, Office of Affordable Housing Programs, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW., Room 7164, Washington, DC 20410-7000. Information provided during a debriefing will include, at a minimum, the final score you received for each rating factor, final evaluation comments for each rating factor, and the final assessment indicating the basis upon which assistance was provided or denied.

B. Administration and National Policy Requirements

1. When administering your SHOP award, you are required to comply with the following administrative and financial requirements:

A-122 Cost Principles for Non-Profit Organizations; A-133 (Audits of States, Local Governments, and Non-Profit Organizations); and the regulations at 24 CFR part 84 (Grants and Agreements with Institutions of Higher Education, Hospitals, and other Non-Profit Organizations).

2. Copies of the OMB Circulars may be obtained from EOP Publications, Room 2200, New Executive Office Building, Washington, DC 20503, telephone (202) 395-3080 (this is not a toll-free number) or (800) 877-8339 (toll-free TTY Federal Information Relay Service) or from the Web site at <http://www.whitehouse.gov/omb/circulars/index.html>.

3. Please refer to all award administration information requirements described in Section VI ("Award Administration Information") of the General Section (70 FR 13590).

C. Reporting. Grantees are required to submit quarterly and annual reports providing data on the construction status, unit characteristics, and income and racial and ethnic composition of homeowners in SHOP-funded properties. For each reporting period, as part of the required report to HUD, grant recipients must include a completed

Logic Model (form HUD-96010), which identifies output and outcome achievements.

VII. Agency Contact

Further Information and Technical Assistance. Before the application due date, HUD staff is available to provide general guidance and technical assistance about this NOFA. However, staff is not permitted to assist in preparing your application. Also, following selection of applicants, but before awards are announced, staff may assist in clarifying or confirming information that is a prerequisite to the offer of an award. You may contact Ms. Lou Thompson, SHOP Program Manager, Office of Affordable Housing Programs, U.S. Department of Housing and Urban Development, 451 Seventh Street, SW., Room 7164, Washington, DC 20410-7000, telephone (202) 708-2684 (this is not a toll-free number). This number can be accessed via TTY by calling the toll-free Federal Information Relay Service Operator at (800) 877-8339. For technical support for downloading an application or electronically submitting an application, please call Grants.gov Customer Support at 800-518-GRANTS (this is a toll-free number) or e-mail at support@grants.gov.

VIII. Other Information

A. Please review Section VIII.A., B., E., F., G., and H. ("Other Information") of the General Section (70 FR 13591), and please note that these subsections are incorporated by reference.

B. Paperwork Reduction Act. The information collection requirements contained in this document have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520) and assigned OMB control number 2506-0157. In accordance with the Paperwork Reduction Act, HUD may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a currently valid OMB control number. Public reporting burden for the collection of information is estimated to average 60 hours per annum per respondent for the application and grant administration. This includes the time for collecting, reviewing, and reporting the data for the application, quarterly, and annual report, and final report. The information will be used for grantee selection and monitoring the administration of funds. Response to this request for information is required in order to receive the benefits to be derived.

C. Environmental Impact. A Finding of No Significant Impact with respect to the environment has been made for this Notice in accordance with the regulations at 24 CFR part 50 that implement Section 102(2)(c) of the National Environmental Policy Act of

1969 (42 U.S.C. 4332 (C)). The Finding of No Significant Impact is available for public inspection between 8 a.m. and 5 p.m. in the Office of the General Counsel, Regulations Division, Department of Housing and Urban Development, 451 Seventh Street, SW.,

Room 10276, Washington DC 20410-0500.

Dated: August 31, 2005.

Pamela H. Patenaude,

Assistant Secretary for Community Planning and Development.

BILLING CODE 4210-29-P

APPLICATION FOR FEDERAL ASSISTANCE

Version 7/03

| | | | | |
|--|------------|---|---|------------------------------|
| 1. TYPE OF SUBMISSION: Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction | | Pre-application <input type="checkbox"/> Construction <input type="checkbox"/> Non-Construction | 2. DATE SUBMITTED | Applicant Identifier |
| | | | 3. DATE RECEIVED BY STATE | State Application Identifier |
| | | | 4. DATE RECEIVED BY FEDERAL AGENCY | Federal Identifier |
| 5. APPLICANT INFORMATION | | | | |
| Legal Name: | | Organizational Unit: Department: | | |
| Organizational DUNS: | | Division: | | |
| Address: Street: | | Name and telephone number of person to be contacted on matters involving this application (give area code) Prefix: First Name: | | |
| City: | | Middle Name | | |
| County: | | Last Name | | |
| State: | Zip Code | Suffix: | | |
| Country: | | Email: | | |
| 6. EMPLOYER IDENTIFICATION NUMBER (EIN): □□-□□□□□□□□ | | Phone Number (give area code) | | Fax Number (give area code) |
| 8. TYPE OF APPLICATION: <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) Other (specify) <input type="checkbox"/> <input type="checkbox"/> | | 7. TYPE OF APPLICANT: (See back of form for Application Types) Other (specify) | | |
| | | 9. NAME OF FEDERAL AGENCY: | | |
| 10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: TITLE (Name of Program): □□-□□□□ | | 11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: | | |
| 12. AREAS AFFECTED BY PROJECT (Cities, Counties, States, etc.): | | | | |
| 13. PROPOSED PROJECT Start Date: Ending Date: | | 14. CONGRESSIONAL DISTRICTS OF: a. Applicant b. Project | | |
| 15. ESTIMATED FUNDING: | | 16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? | | |
| a. Federal | \$.00 | a. Yes. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: | | |
| b. Applicant | \$.00 | b. No. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E. O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW | | |
| c. State | \$.00 | | | |
| d. Local | \$.00 | | | |
| e. Other | \$.00 | | | |
| f. Program Income | \$.00 | 17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <input type="checkbox"/> Yes If "Yes" attach an explanation. <input type="checkbox"/> No | | |
| g. TOTAL | \$.00 | | | |
| 18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED. | | | | |
| a. Authorized Representative | | | | |
| Prefix | First Name | Middle Name | | |
| Last Name | | Suffix | | |
| b. Title | | c. Telephone Number (give area code) | | |
| d. Signature of Authorized Representative | | e. Date Signed | | |

INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required face sheet for pre-applications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

| Item: | Entry: | Item: | Entry: | | | | | | | | | | | | | | | | | | |
|--------------------------------|--|-------------------|---|----------------------|-----------------------|--------------|---|-------------|-----------------------|---------------|-----------------|-------------------|---------------|---------------------|------------------------|--------------------------------|--------------------|--|--------------------------------|-----|---|
| 1. | Select Type of Submission. | 11. | Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project. | | | | | | | | | | | | | | | | | | |
| 2. | Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable). | 12. | List only the largest political entities affected (e.g., State, counties, cities). | | | | | | | | | | | | | | | | | | |
| 3. | State use only (if applicable). | 13. | Enter the proposed start date and end date of the project. | | | | | | | | | | | | | | | | | | |
| 4. | Enter Date Received by Federal Agency Federal identifier number: If this application is a continuation or revision to an existing award, enter the present Federal Identifier number. If for a new project, leave blank. | 14. | List the applicant's Congressional District and any District(s) affected by the program or project | | | | | | | | | | | | | | | | | | |
| 5. | Enter legal name of applicant, name of primary organizational unit (including division, if applicable), which will undertake the assistance activity, enter the organization's DUNS number (received from Dun and Bradstreet), enter the complete address of the applicant (including country), and name, telephone number, e-mail and fax of the person to contact on matters related to this application. | 15. | Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15. | | | | | | | | | | | | | | | | | | |
| 6. | Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service. | 16. | Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process. | | | | | | | | | | | | | | | | | | |
| 7. | Select the appropriate letter in the space provided. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">A. State</td> <td style="width: 50%;">I. State Controlled</td> </tr> <tr> <td>B. County</td> <td>Institution of Higher</td> </tr> <tr> <td>C. Municipal</td> <td>Learning</td> </tr> <tr> <td>D. Township</td> <td>J. Private University</td> </tr> <tr> <td>E. Interstate</td> <td>K. Indian Tribe</td> </tr> <tr> <td>F. Intermunicipal</td> <td>L. Individual</td> </tr> <tr> <td>G. Special District</td> <td>M. Profit Organization</td> </tr> <tr> <td>H. Independent School District</td> <td>N. Other (Specify)</td> </tr> <tr> <td></td> <td>O. Not for Profit Organization</td> </tr> </table> | A. State | I. State Controlled | B. County | Institution of Higher | C. Municipal | Learning | D. Township | J. Private University | E. Interstate | K. Indian Tribe | F. Intermunicipal | L. Individual | G. Special District | M. Profit Organization | H. Independent School District | N. Other (Specify) | | O. Not for Profit Organization | 17. | This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes. |
| A. State | I. State Controlled | | | | | | | | | | | | | | | | | | | | |
| B. County | Institution of Higher | | | | | | | | | | | | | | | | | | | | |
| C. Municipal | Learning | | | | | | | | | | | | | | | | | | | | |
| D. Township | J. Private University | | | | | | | | | | | | | | | | | | | | |
| E. Interstate | K. Indian Tribe | | | | | | | | | | | | | | | | | | | | |
| F. Intermunicipal | L. Individual | | | | | | | | | | | | | | | | | | | | |
| G. Special District | M. Profit Organization | | | | | | | | | | | | | | | | | | | | |
| H. Independent School District | N. Other (Specify) | | | | | | | | | | | | | | | | | | | | |
| | O. Not for Profit Organization | | | | | | | | | | | | | | | | | | | | |
| 8. | Select the type from the following list: <ul style="list-style-type: none"> • "New" means a new assistance award. • "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. • "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision enter the appropriate letter: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">A. Increase Award</td> <td style="width: 50%;">B. Decrease Award</td> </tr> <tr> <td>C. Increase Duration</td> <td>D. Decrease Duration</td> </tr> </table> | A. Increase Award | B. Decrease Award | C. Increase Duration | D. Decrease Duration | 18. | To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.) | | | | | | | | | | | | | | |
| A. Increase Award | B. Decrease Award | | | | | | | | | | | | | | | | | | | | |
| C. Increase Duration | D. Decrease Duration | | | | | | | | | | | | | | | | | | | | |
| 9. | Name of Federal agency from which assistance is being requested with this application. | | | | | | | | | | | | | | | | | | | | |
| 10. | Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested. | | | | | | | | | | | | | | | | | | | | |

SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

OMB No. 1890-0014 Exp. 1/31/2006

Purpose: The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey: If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name: _____

Applicant's DUNS Number: _____

Grant Name: _____ **CFDA Number:** _____

1. Does the applicant have 501(c)(3) status?

Yes No

2. How many full-time equivalent employees does the applicant have? *(Check only one box).*

3 or Fewer 15-50
 4-5 51-100
 6-14 over 100

3. What is the size of the applicant's annual budget?

(Check only one box.)

Less Than \$150,000
 \$150,000 - \$299,999
 \$300,000 - \$499,999
 \$500,000 - \$999,999
 \$1,000,000 - \$4,999,999
 \$5,000,000 or more

4. Is the applicant a faith-based/religious organization?

Yes No

5. Is the applicant a non-religious community-based organization?

Yes No

6. Is the applicant an intermediary that will manage the grant on behalf of other organizations?

Yes No

7. Has the applicant ever received a government grant or contract (Federal, State, or local)?

Yes No

8. Is the applicant a local affiliate of a national organization?

Yes No

Survey Instructions on Ensuring Equal Opportunity for Applicants

Provide the applicant's (organization) name and DUNS number and the grant name and CFDA number.

1. 501(c)(3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.
2. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.
3. Annual budget means the amount of money your organization spends each year on all of its activities.
4. Self-identify.
5. An organization is considered a community-based organization if its headquarters/service location shares the same zip code as the clients you serve.
6. An "intermediary" is an organization that enables a group of small organizations to receive and manage government funds by administering the grant on their behalf.
7. Self-explanatory.
8. Self-explanatory.

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1890-0014. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Housing and Urban Development, Office of Departmental Grants Management and Oversight, Room 3156, Washington, D.C. 20410.

If you have comments or concerns regarding the status of your individual submission of this form, write directly to the address above.

OMB Approval No. 2501-0017
(expires 01/31/2008)

**U.S. Department of Housing
and Urban Development**

**Grant Applications
Detailed Budget**

| Name of Project/Activity: | Functional Categories | | | | | | | | | | | | Column 9 Total |
|---|-----------------------|-----------------------------|-----------------------------|-----------------------------|-------------------------|--------------------------------|-------------------|----------------------------|----------|----|----|----|-------------------|
| | Column 1 HUD Share | Column 2 Applicant Match | Column 3 Other HUD Funds | Column 4 Other Fed Share | Column 5 State Share | Column 6 Local/Tribal Share | Column 7 Other | Column 8 Program Income | Column 9 | | | | |
| a. Personnel (Direct Labor) | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | 0.00 |
| b. Fringe Benefits | | | | | | | | | | | | | 0.00 |
| c. Travel | | | | | | | | | | | | | 0.00 |
| d. Equipment (only items > \$5,000 depreciated value) | | | | | | | | | | | | | 0.00 |
| e. Supplies (only items < \$5,000 depreciated Value) | | | | | | | | | | | | | 0.00 |
| f. Contractual | | | | | | | | | | | | | 0.00 |
| g. Construction | | | | | | | | | | | | | 0.00 |
| 1. Administration and legal expenses | | | | | | | | | | | | | 0.00 |
| 2. Land, structures, rights-of way, appraisals, etc. | | | | | | | | | | | | | 0.00 |
| 3. Relocation expenses and payments | | | | | | | | | | | | | 0.00 |
| 4. Architectural and engineering fees | | | | | | | | | | | | | 0.00 |
| 5. Other architectural and engineering fees | | | | | | | | | | | | | 0.00 |
| 6. Project inspection fees | | | | | | | | | | | | | 0.00 |
| 7. Site work | | | | | | | | | | | | | 0.00 |
| 8. Demolition and removal | | | | | | | | | | | | | 0.00 |
| 9. Construction | | | | | | | | | | | | | 0.00 |
| 10. Equipment | | | | | | | | | | | | | 0.00 |
| 11. Contingencies | | | | | | | | | | | | | 0.00 |
| 12. Miscellaneous | | | | | | | | | | | | | 0.00 |
| h. Other (Direct Costs) | | | | | | | | | | | | | 0.00 |
| i. Subtotal of Direct Costs | | | | | | | | | | | | | 0.00 |
| j. Indirect Costs (% Approved Indirect Cost Rate: %) | | | | | | | | | | | | | |
| Grand Total (Year:): | | | | | | | | | | | | | 0.00 |
| Grand Total (All Years): | | | | | | | | | | | | | 0.00 |

Instructions for the HUD Grant Application Detailed Budget Form

U.S. Department of Housing and Urban Development

OMB Approval No. 2577-0208
(expires 01/31/2008)

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB Control Number.

General Instructions

This form is designed so that an application can be made for any of HUD's grant programs. Separate sheets must be used for each proposed program year and for a summary of all years.

Check applicable program year or all years box at top of page to indicate which applies.

On the final sheet enter the Grand Total for all years in the applicable box at the

bottom of the page. In preparing the budget, adhere to any existing HUD requirements which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, HUD may require budgets to be shown separately by function or activity. Your budget information should show the entire cost of your proposed program of activities per year. If you are not using funds in any of the line item categories, you should leave the item blank. Pages may be duplicated to show budget data for individual programs, projects or activities.

NOTE: Not all budget categories on this form are eligible for funding under all programs. Please see eligible activities under the specific program for which you are seeking funding.

Budget Categories

The budget categories identifies how your program funds will be allocated by type of use, e.g., funds going for salaries, travel, contracts, etc. Each of these line items should be broken out under each applicable column.

Lines a-f--Show the totals of Lines a to f in each column.

Lines g--Show construction related expenses in the appropriate categories below.

Line g.1--Enter estimated amounts needed to cover administrative expenses. Do not include costs which are related to the normal functions of government.

Line g.2--Enter estimated site and right(s)-of-way acquisition costs (this includes purchase, lease, and/or easements).

Line g.3--Enter estimated costs related to relocation advisory assistance,

replacement housing, relocation payments to displaced persons and businesses, etc.

Line g.4--Enter estimated basic engineering fees related to construction

(this includes start-up services and preparation of project performance work plan).

Line g.5--Enter estimated engineering costs, such as surveys, tests, soil borings, etc.

Line g.6--Enter estimated engineering inspection costs.

Line g.7--Enter the estimated site preparation and restoration which are not included in the basic construction contract.

Line g.8--Enter the estimated costs related to demolition activities.

Line g.9--Enter estimated costs of the construction contract.

Line g.10--Enter estimated cost of office, shop, laboratory, safety equipment,

etc. to be used at the facility, if such costs are not included in the construction contract.

Line g.11--Enter any estimated contingency costs.

Line g.12--Enter estimated miscellaneous costs.

Line h--Enter any other direct costs not already addressed above.

Line i--Calculate the totals of all applicable columns to determine the Subtotal of Direct Costs.

Line j--Indicate the approved Indirect Cost Rate (if any) and calculate the indirect cost in accordance with the terms of your approved indirect cost rate and enter the resulting amount.

Grand Total (Year:)--Enter the sum of lines i. and j. under column 9 for each year, and enter the applicable year, in the blank, for each sheet completed.

Grand Total (All Years)--Enter the sum of all the "Grand Total (Year:)" amounts from each sheet completed, under column 9, for all proposed years.

For each budget category (personnel, fringe benefits, travel, etc) you should identify the amount of funding you plan on using in your grant program. You should complete each column as follows:

Column 1 - Identify the amount of funds that you will need from the HUD grant program for which you are seeking funding.

Column 2 - Identify any matching funds that you are required to include in your proposed program in order to be eligible for assistance.

Column 3 - Identify any other HUD funds that you will be adding to this program either through your formula or competitive grant programs.

Column 4 - Identify any other Federal funds that you will be adding to this program either through your formula or competitive grant programs.

Column 5 - Identify any State funds that you will be adding to this program.

Column 6 - Identify any Local or Tribal Government funds that you will be adding to this program.

Column 7 - Identify any additional funds not previously identified in Columns 1 - 6, that you intend to use for your proposed program.

Column 8 - Identify any program income that you expect to generate under this program.

Column 9 - Add columns 1 - 8 across and place the total in Column 9.

Save Data

OMB Approval No. 2501-0017
(Exp. 01/31/2008)

Grant Application Detailed Budget Worksheet

Name and Address of Applicant: _____

| Category | Detailed Description of Budget (for full grant period) | | | | | | | | | | | |
|--|--|---------------|----------------|-----------|-----------------|-----------------|---------------------|-------------|--------------------|-------|----------------|------|
| | Estimated Hours | Rate per Hour | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income | |
| 1. Personnel (Direct Labor) Position or Individual | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Total Direct Labor Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 2. Fringe Benefits | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Total Fringe Benefits Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 3. Travel | | | | | | | | | | | | |
| 3a. Transportation - Local Private Vehicle | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Subtotal - Trans - Local Private Vehicle | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

form HUD-424-CBW (2/2003)

Grant Application Detailed Budget Worksheet

Detailed Description of Budget

| | Trips | Fare | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
|---|----------|--------------|----------------|-----------|-----------------|-----------------|---------------------|-------------|--------------------|-------|----------------|
| 3b. Transportation - Airfare (show destination) | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Transportation - Airfare | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 3c. Transportation - Other | Quantity | Unit Cost | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Transportation - Other | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 3d. Per Diem or Subsistence (Indicate location) | Days | Rate per Day | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Per Diem or Subsistence | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Total Travel Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 4. Equipment (Only items over \$5,000 Depreciated value) | Quantity | Unit Cost | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Total Equipment Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

Grant Application Detailed Budget Worksheet

| Detailed Description of Budget | | | | | | | | | | | |
|---|----------|-----------|----------------|-----------|-----------------|-----------------|---------------------|-------------|--------------------|-------|----------------|
| 5. Supplies and Materials (Items under \$5,000 Depreciated Value) | | | | | | | | | | | |
| | Quantity | Unit Cost | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
| 5a. Consumable Supplies | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Consumable Supplies | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 5b. Non-Consumable Materials | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Non-Consumable Materials | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Total Supplies and Materials Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 6. Consultants (Type) | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Total Consultants Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 7. Contracts and Sub-Grantees (List Individually) | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Total Subcontracts Cost | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

Grant Application Detailed Budget Worksheet

Detailed Description of Budget

| 8. Construction Costs | | | | | | | | | | | | |
|--|----------|-----------|----------------|-----------|-----------------|-----------------|---------------------|-------------|--------------------|-------|----------------|--|
| Description | Quantity | Unit Cost | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income | |
| 8a. Administrative and legal expenses | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Subtotal - Administrative and legal expenses | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| 8b. Land, structures, rights-of way, appraisal, etc | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Subtotal - Land, structures, rights-of way, ... | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| 8c. Relocation expenses and payments | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Subtotal - Relocation expenses and payments | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| 8d. Architectural and engineering fees | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Subtotal - Architectural and engineering fees | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |
| 8e. Other architectural and engineering fees | | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| | | | 0.00 | | | | | | | | | |
| Subtotal - Other architectural and engineering fees | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | |

Grant Application Detailed Budget Worksheet

| | Quantity | Unit Cost | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
|------------------------------------|----------|-----------|----------------|-----------|-----------------|-----------------|---------------------|-------------|--------------------|-------|----------------|
| 8f. Project Inspection fees | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Project Inspection fees | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 8g. Site work | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Site work | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 8h. Demolition and removal | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Demolition and removal | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 8i. Construction | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Construction | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 8j. Equipment | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Equipment | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 8k. Contingencies | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Contingencies | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 8l. Miscellaneous | | | | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| | | | 0.00 | | | | | | | | |
| Subtotal - Miscellaneous | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Total Construction Costs | | | 0.00 | 0.00 | 0.00 | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

Form HUD-424-CBW (2/2003)

| Grant Application Detailed Budget Worksheet | | | | | | | | | | | | |
|---|------|----------|-----------|----------------|-----------|-----------------|-----------------|---------------------|-------------|--------------------|-------|----------------|
| 9. Other Direct Costs | Item | Quantity | Unit Cost | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| Total Other Direct Costs | | | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Subtotal of Direct Costs | | | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| 10. Indirect Costs | Type | Rate | Base | Estimated Cost | HUD Share | Applicant Match | Other HUD Funds | Other Federal Share | State Share | Local/Tribal Share | Other | Program Income |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| | | | | 0.00 | | | | | | | | |
| Total Indirect Costs | | | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Total Estimated Costs | | | | | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

form HUD-424-CBW (2/2003)

OMB Approval No. 2501-0017
(Exp. 01/31/2008)

Grant Application Detailed Budget Worksheet

Detailed Description of Budget

| Analysis of Total Estimated Costs | | Estimated Cost | Percent of Total |
|--|--|-----------------------|-------------------------|
| 1 | Personnel (Direct Labor) | 0.00 | 0.00% |
| 2 | Fringe Benefits | 0.00 | 0.00% |
| 3 | Travel | 0.00 | 0.00% |
| 4 | Equipment | 0.00 | 0.00% |
| 5 | Supplies and Materials | 0.00 | 0.00% |
| 6 | Consultants | 0.00 | 0.00% |
| 7 | Contracts and Sub-Grantees | 0.00 | 0.00% |
| 8 | Construction | 0.00 | 0.00% |
| 9 | Other Direct Costs | 0.00 | 0.00% |
| 10 | Indirect Costs | 0.00 | 0.00% |
| | Total: | 0.00 | 100.00% |
| | HUD Share: | 0.00 | 100.00% |
| | Match (Expressed as a percentage of the Federal Share): | 0.00 | 0.00% |

Instructions for Completing the Grant Application Detailed Budget Worksheet

| Item | Discussion |
|--|---|
| <p>This form is to be used to provide detailed budget information regarding your proposed program. If your program requires you to provide program activity information you should use a separate HUD-424-CBW to provide information related to each program activity. The detailed information provided on this form can be summarized on the HUD-424-CB form by checking the "All Years" box at the top of the form and inputting the summary information.</p> | |
| 1 - Personnel (Direct Labor) | <p>This section should show the labor costs for all individuals supporting the grant program effort (regardless of the source of their salaries). The hours and costs are for the full life of the grant. If an individual is employed by a contractor or sub-grantee, their labor costs should not be shown here.</p> <p>Please include all labor costs that are associated with the proposed grant program, including those costs that will be paid for with in-kind or matching funds.</p> <p>Do not show fringe or other indirect costs in this section.</p> <p>Please use the hourly labor cost for salaried employees (use 2080 hours per year or the value your organization uses to perform this calculation). An employee working less than full time on the grant should show the numbers of hours they will work on the grant.</p> |
| 2 - Fringe Benefits | <p>Use the standard fringe rates used by your organization. You may use a single fringe rate (a percentage of the total direct labor) or list each of the individual fringe charges. The spreadsheet is set up to use the Total Direct Labor Cost as the base for the fringe calculation. If your organization calculates fringe benefits differently, please use a different base and discuss how you calculate fringe as a comment.</p> |
| 3 - Travel | |
| 3a - Transportation - Local Private Vehicle | <p>If you plan on reimbursing staff for the use of privately owned vehicles or if you are required to reimburse your organization for mileage charges, show your mileage and cost estimates in this section.</p> |
| 3b - Transportation - Airfare | <p>Show the estimated cost of airfare required to support the grant program effort. Show the destination and the purpose of the travel as well as the estimated cost of the tickets.</p> <p>Each program notice of funding availability (NOFA) discusses the travel requirements that should be listed here.</p> |
| 3c - Transportation - Other | <p>If you or are charged monthly by your organization for a vehicle for use by the grant program, indicate those costs in this section.</p> <p>Provide estimates for other transportation costs that may be incurred (taxi, etc.).</p> |

form HUD-424-CBW-I (1/2004)

| | |
|--------------------------------|---|
| 3d - Per Diem or Subsistence | <p>For travel which will require the payment of subsistence or per diem in accordance with your organization's policies. Indicate the location of the travel.</p> <p>Each program NOFA discusses the travel requirements that should be listed here.</p> |
| 4 - Equipment | <p>Equipment is defined by HUD regulations as tangible, nonexpendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.</p> <p>Each program NOFA describes what equipment may be purchased using grant funding.</p> |
| 5 - Supplies and Materials | <p>Supplies and materials are consumable and non-consumable items that have a depreciated unit value of less than \$5,000. Please list the proposed supplies and materials as either Consumable Supplies or as Non-Consumable Materials.</p> |
| 5a - Consumable Supplies | <p>List the consumable supplies you propose to purchase. General office or other common supplies may be estimated using an anticipated consumption rate.</p> |
| 5b - Non-consumable materials | <p>List furniture, computers, printers, and other items that will not be consumed in use. Please list the quantity and unit cost.</p> |
| 6 - Consultants | <p>Please indicate the consultants you will use. Indicate the type of consultant (skills), the number of days you expect to use them, and their daily rate.</p> |
| 7 - Contracts and Sub-Grantees | <p>List the contractors and sub-grantees that will help accomplish the grant effort. Examples of contracts that should be shown here include contracts with Community Based Organizations; liability insurance; and training and certification for contractors and workers.</p> <p>If any contractor, sub-contractor, or sub-grantee is expected to receive over 10% of the total Federal amount requested, a separate Grant Application Detailed Budget (Worksheet) should be developed for that contractor or sub-grantee and the total amount of their proposed effort should be shown as a single entry in this section.</p> <p>Unless your proposed program will perform the primary grant effort with in-house employees (which should be listed in section 1), the costs of performing the primary grant activities should be shown in this section.</p> <p>Types of activities which should be shown in this section:</p> <ul style="list-style-type: none"> • Contracts for all services • Training for individuals not on staff • Contracts with Community Based Organizations or Other Governmental Organizations (note the 10% requirement discussed above) • Insurance if your program will procure it separately <p>Please provide a short description of the activity the contractor or subgrantee will perform, if not evident.</p> |

form HUD-424-CBW-I (1/2004)

| | |
|---|---|
| 8 – Construction Costs | |
| 8a – Administrative and legal expenses | Enter estimated amounts needed to cover administrative expenses. Do not include costs that are related to the normal functions of government. |
| 8b – Land, structures, rights-of way, appraisal, etc. | Enter estimated site and right(s)-of-way acquisition costs (this includes purchase, lease, and/or easements). |
| 8c – Relocation expenses and payments | Enter estimated costs related to relocation advisory assistance, replacement housing, relocation payments to displaced persons and businesses, etc. |
| 8d – Architectural and engineering fees | Enter estimated basic engineering fees related to construction (this includes start-up services and preparation of project performance work plan). |
| 8e – Other architectural and engineering fees | Enter estimated engineering costs, such as surveys, tests, soil borings, etc. |
| 8f – Project inspection fees | Enter estimated engineering inspection costs. |
| 8g – Site work | Enter the estimated site preparation and restoration costs that are not included in the basic construction contract. |
| 8h – Demolition and removal | Enter the estimated costs related to demolition activities. |
| 8i – Construction | Enter estimated costs of the construction contract. |
| 8j - Equipment | Enter estimated cost of office, shop, laboratory, safety equipment, etc. to be used at the facility, if such costs are not included in the construction contract. |
| 8k – Contingencies | Enter any estimated contingency costs. |
| 8l – Miscellaneous | Enter estimated miscellaneous costs. |
| 9 - Other Direct Costs | <p>Other Direct Costs include a number of items that are not appropriate for other sections.</p> <p>Other Direct Costs may include:</p> <ul style="list-style-type: none"> • Staff training • Telecommunications • Printing and postage <p>Relocation, if costs are paid directly by your organization (if relocation costs are paid by a subgrantee, it should be reflected in Section 7)</p> |
| 10 - Indirect Costs | <p>Indirect costs (including Facilities and Administration costs) are those costs that have been incurred for common or joint purposes. These costs benefit more than one cost objective and cannot be readily identified with a particular final cost objective without effort disproportionate to the results achieved.</p> <p>Indicate your approved Indirect Cost Rate (if any) and calculate the indirect costs in accordance with the terms of your approved indirect cost rate and enter the resulting amount. Also show the applicable cost base amount and identify the proposed cost base type.</p> |
| Total Estimated Costs | Enter the grand total of all the applicable columns. |

The eight rightmost columns allow you to identify how the costs will be spread between the HUD Share and other contributors (including Match funds and Program Income). This information will help the reviewers better understand your program and priorities.

form HUD-424-CBW-I (1/2004)

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

| | | |
|--|---|--|
| 1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance | 2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | 3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____ |
| 4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: ^{4c} | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: | |
| 6. Federal Department/Agency: | 7. Federal Program Name/Description: CFDA Number, if applicable: _____ | |
| 8. Federal Action Number, if known: | 9. Award Amount, if known: \$ | |
| 10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i> | b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i> | |
| 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. | Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____ | |
| Federal Use Only: | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) |

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

**Applicant/Recipient
Disclosure/Update Report**

U.S. Department of Housing
and Urban Development

OMB Approval No. 2510-0011 (exp. 08/31/2006)

Instructions. (See Public Reporting Statement and Privacy Act Statement and detailed instructions on page 2.)

Applicant/Recipient Information

Indicate whether this is an Initial Report or an Update Report

| | |
|---|--|
| 1. Applicant/Recipient Name, Address, and Phone (include area code): | 2. Social Security Number or Employer ID Number: |
| 3. HUD Program Name | 4. Amount of HUD Assistance Requested/Received |
| 5. State the name and location (street address, City and State) of the project or activity: | |

Part I Threshold Determinations

| | |
|---|--|
| 1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or CDBG block grants. (For further information see 24 CFR Sec. 4.3). <input type="checkbox"/> Yes <input type="checkbox"/> No | 2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9 <input type="checkbox"/> Yes <input type="checkbox"/> No. |
|---|--|

If you answered "No" to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form. **However,** you must sign the certification at the end of the report.

Part II Other Government Assistance Provided or Requested / Expected Sources and Use of Funds.

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

| Department/State/Local Agency Name and Address | Type of Assistance | Amount Requested/Provided | Expected Uses of the Funds |
|--|--------------------|---------------------------|----------------------------|
| | | | |
| | | | |

(Note: Use Additional pages if necessary.)

Part III Interested Parties. You must disclose:

- All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
- any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

| Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first) | Social Security No. or Employee ID No. | Type of Participation in Project/Activity | Financial Interest in Project/Activity (\$ and %) |
|--|--|---|---|
| | | | |
| | | | |

(Note: Use Additional pages if necessary.)

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that this information is true and complete.

| | |
|------------|--------------------|
| Signature: | Date: (mm/dd/yyyy) |
| X | |

Public reporting burden for this collection of information is estimated to average 2.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection information unless that collection displays a valid OMB control number.

Privacy Act Statement. Except for Social Security Numbers (SSNs) and Employer Identification Numbers (EINs), the Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under section 102 of the Department of Housing and Urban Development Reform Act of 1989, 42 U.S.C. 3531. Disclosure of SSNs and EINs is optional. The SSN or EIN is used as a unique identifier. The information you provide will enable HUD to carry out its responsibilities under Sections 102(b), (c), and (d) of the Department of Housing and Urban Development Reform Act of 1989, Pub. L. 101-235, approved December 15, 1989. These provisions will help ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. They will also help ensure that HUD assistance for a specific housing project under Section 102(d) is not more than is necessary to make the project feasible after taking account of other government assistance. HUD will make available to the public all applicant disclosure reports for five years in the case of applications for competitive assistance, and for generally three years in the case of other applications. Update reports will be made available along with the disclosure reports, but in no case for a period generally less than three years. All reports, both initial reports and update reports, will be made available in accordance with the Freedom of Information Act (5 U.S.C. §552) and HUD's implementing regulations at 24 CFR Part 15. HUD will use the information in evaluating individual assistance applications and in performing internal administrative analyses to assist in the management of specific HUD programs. The information will also be used in making the determination under Section 102(d) whether HUD assistance for a specific housing project is more than is necessary to make the project feasible after taking account of other government assistance. You must provide all the required information. Failure to provide any required information may delay the processing of your application, and may result in sanctions and penalties, including imposition of the administrative and civil money penalties specified under 24 CFR §4.38.

Note: This form only covers assistance made available by the Department. States and units of general local government that carry out responsibilities under Sections 102(b) and (c) of the Reform Act must develop their own procedures for complying with the Act.

Instructions

Overview.

A. Coverage. You must complete this report if:

- (1) You are applying for assistance from HUD for a specific project or activity and you have received, or expect to receive, assistance from HUD in excess of \$200,000 during the fiscal year;
- (2) You are updating a prior report as discussed below; or
- (3) You are submitting an application for assistance to an entity other than HUD, a State or local government if the application is required by statute or regulation to be submitted to HUD for approval or for any other purpose.

B. Update reports (filed by "Recipients" of HUD Assistance):

General. All recipients of covered assistance must submit update reports to the Department to reflect substantial changes to the initial applicant disclosure reports.

Line-by-Line Instructions.

Applicant/Recipient Information.

All applicants for HUD competitive assistance, must complete the information required in blocks 1-5 of form HUD-2880:

1. Enter the full name, address, city, State, zip code, and telephone number (including area code) of the applicant/recipient. Where the applicant/recipient is an individual, the last name, first name, and middle initial must be entered.
2. Entry of the applicant/recipient's SSN or EIN, as appropriate, is optional.
3. Applicants enter the HUD program name under which the assistance is being requested.
4. Applicants enter the amount of HUD assistance that is being requested. Recipients enter the amount of HUD assistance that has been provided and to which the update report relates. The amounts are those stated in the application or award documentation. NOTE: In the case of assistance that is provided pursuant to contract over a period of time (such as project-based assistance under section 8 of the United States Housing Act of 1937), the amount of assistance to be reported includes all amounts that are to be provided over the term of the contract, irrespective of when they are to be received.
5. Applicants enter the name and full address of the project or activity for which the HUD assistance is sought. Recipients enter the name and full address of the HUD-assisted project or activity to which the update report relates. The most appropriate government identifying number must be used (e.g., RFP No.; IFB No.; grant announcement No.; or contract, grant, or loan No.) Include prefixes.

Part I. Threshold Determinations - Applicants Only

Part I contains information to help the applicant determine whether the remainder of the form must be completed. **Recipients filing Update Reports should not complete this Part.**

If the answer to *either* questions 1 or 2 is No, the applicant need not complete Parts II and III of the report, but must sign the certification at the end of the form.

Part II. Other Government Assistance and Expected Sources and Uses of Funds.

A. Other Government Assistance. This Part is to be completed by both applicants and recipients for assistance and recipients filing update reports. Applicants and recipients must report any other government assistance involved in the project or activity for which assistance is sought. Applicants and recipients must report any other government assistance involved in the project or activity. Other government assistance is defined in note 4 on the last page. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

The following information must be provided:

1. Enter the name and address, city, State, and zip code of the government agency making the assistance available.
2. State the type of other government assistance (e.g., loan, grant, loan insurance).
3. Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).
4. Uses of funds. Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "total structure" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.

B. Non-Government Assistance. Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds - both from HUD *and any other source* - that have been or are to be, made available for the project or activity. Non-government sources of

funds typically include (but are not limited to) foundations and private contributors.

Part III. Interested Parties.

This Part is to be completed by both applicants and recipients filing update reports. Applicants must provide information on:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Note: A financial interest means any financial involvement in the project or activity, including (but not limited to) situations in which an individual or entity has an equity interest in the project or activity, shares in any profit on resale or any distribution of surplus cash or other assets of the project or activity, or receives compensation for any goods or services provided in connection with the project or activity. Residency of an individual in housing for which assistance is being sought is not, by itself, considered a covered financial interest.

The information required below must be provided.

1. Enter the full names and addresses. If the person is an entity, the listing must include the full name and address of the entity as well as the CEO. Please list all names alphabetically.
2. Entry of the Social Security Number (SSN) or Employee Identification Number (EIN), as appropriate, for each person listed is optional.
3. Enter the type of participation in the project or activity for each person listed: i.e., the person's specific role in the project (e.g., contractor, consultant, planner, investor).
4. Enter the financial interest in the project or activity for each person listed. The interest must be expressed both as a dollar amount and as a percentage of the amount of the HUD assistance involved.

Note that if any of the source/use information required by this report has been provided elsewhere in this application package, the applicant need

not repeat the information, but need only refer to the form and location to incorporate it into this report. (It is likely that some of the information required by this report has been provided on SF 424A, and on various budget forms accompanying the application.) If this report requires information beyond that provided elsewhere in the application package, the applicant must include in this report all the additional information required.

Recipients must submit an update report for any change in previously disclosed sources and uses of funds as provided in Section I.D.5., above.

Notes:

1. All citations are to 24 CFR Part 4, which was published in the Federal Register. [April 1, 1996, at 63 Fed. Reg. 14448.]
2. Assistance means any contract, grant, loan, cooperative agreement, or other form of assistance, including the insurance or guarantee of a loan or mortgage, that is provided with respect to a specific project or activity under a program administered by the Department. The term does not include contracts, such as procurements contracts, that are subject to the Fed. Acquisition Regulation (FAR) (48 CFR Chapter 1).
3. See 24 CFR §4.9 for detailed guidance on how the threshold is calculated.
4. "Other government assistance" is defined to include any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or any other form of direct or indirect assistance from the Federal government (other than that requested from HUD in the application), a State, or a unit of general local government, or any agency or instrumentality thereof, that is, or is expected to be made, available with respect to the project or activities for which the assistance is sought.
5. For the purpose of this form and 24 CFR Part 4, "person" means an individual (including a consultant, lobbyist, or lawyer); corporation; company; association; authority; firm; partnership; society; State, unit of general local government, or other government entity, or agency thereof (including a public housing agency); Indian tribe; and any other organization or group of people.

Certification of Consistency with the RC/EZ/EC-IIs Strategic Plan

U.S. Department of Housing and Urban Development

I certify that the proposed activities/projects in this application are consistent with the strategic plan of a federally-designated empowerment zone (EZs), renewal community (RCs), or enterprise community (ECs); designated by the United States Department of Agriculture (USDA) in round II (EC-IIs).

(Type or clearly print the following information)

Applicant Name _____

Name of the Federal Program to which the applicant is applying _____

Name of RC/EZ/EC _____

I further certify that the proposed activities/projects will be located within the RC/EZ/EC-IIs or strategic planning communities that are intended to serve the RC/EZ/EC-IIs strategic planning community residents, or renewal community. (2 points)

Name of the Official Authorized to Certify the RC/EZ/EC _____

Title _____

Signature _____

Date (mm/dd/yyyy) _____

**Acknowledgment of
Application Receipt**

**U.S. Department of Housing
and Urban Development**

Type or clearly print the Applicant's name and full address in the space below.

(fold line)

Type or clearly print the following information:

Name of the Federal
Program to which the
applicant is applying: _____

To Be Completed by HUD

- HUD received your application by the deadline and will consider it for funding. In accordance with Section 103 of the Department of Housing and Urban Development Reform Act of 1989, no information will be released by HUD regarding the relative standing of any applicant until funding announcements are made. However, you may be contacted by HUD after initial screening to permit you to correct certain application deficiencies.
- HUD did not receive your application by the deadline; therefore, your application will not receive further consideration. Your application is:
 - Enclosed
 - Being sent under separate cover

Processor's Name _____

Date of Receipt _____

**Third Party Documentation
Facsimile Transmittal**

**U. S. Department of Housing
and Urban Development**
Office of Department Grants Management
and Oversight

OMB Approval No. 2535-0118 (exp. 04/30/2005)

Public reporting burden for this collection of information is estimated to average 6 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

This form is used for third party applicants as required for applications submissions and other materials that are not normally available as electronic files, e.g. leverage letters, documentation from books, reports or other such items. This information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Instructions

IMPORTANT NOTE: If you have completed the SF 424 Request for Federal Assistance form, data fields will be pre-populated within this form.

| Item | Entry |
|---|---|
| 1. a-d Applicant Information | a. Enter legal name of applicant, name of primary organization unit (including division, if applicable), which will undertake the assistance activity. b. Enter the complete address, Street, City, County, State and Zip Code. c. Enter the country, i.e. USA. d. Enter the DUNS number (received from DUN and Bradstreet). |
| 2. a-c. Catalog of Federal Domestic Assistance number and title of the program and program component. | a. Enter the Catalog of Federal Domestic Assistance number of the program you are apply for federal assistance. b. Enter the title of the program which assistance is requested. c. Enter program component under which assistance is requested. If there are no sub categories within a program you may leave "program component" blank. (For example: CFDA: 14.123) |
| 3. a-b. Facsimile Contact Information | a. Enter the name of the Department and/or b. Division in which this facsimile is being transmitted. |
| 4. Name and telephone number | Enter name, email and telephone number (<i>remember to include area code</i>) of person to be contacted on matters involving the transmitting fax. |
| 5. Email | Enter email address of person to contacted regarding facsimile. |
| 6. b-d What are you transmitting/number of pages? | a. What are you transmitting? Check the appropriate box indicating what type of document you are transmitting, b. certification, c. document, d. letter, or e. other. For example, if you are transmitting a Memorandum of Understanding (MOU) this would be considered a document so you would check <input type="checkbox"/> document. <i>Please note: for each document you are transmitting a separate cover page is needed.</i> |
| 7. How many pages are being faxed? | Indicate how many pages including the cover are being faxed. |

**Third Party Documentation
Facsimile Transmittal**

**U. S. Department of Housing
and Urban Development**
Office of Department Grants Management
and Oversight

OMB Approval No. 2535-0118 (exp. 04/30/2005)

| | | | | | |
|---|----------|---|---|--|--------------------------------------|
| 1. Applicant Information | | 3. Facsimile Contact Information | | | |
| a. Legal Name: | | a. Department: | | | |
| | | b. Division | | | |
| b. Address: | | 4. Name and telephone number of person to be contacted on matters involving this facsimile. | | | |
| Street: | | | | | |
| City: | County: | Prefix: | First Name: | | |
| State: | Zip Code | Middle Initial: | Last Name: | | |
| c. Country | | 5. Email: | | | |
| d. DUNS Number: | | | | | |
| 2. a. Catalog of Federal Domestic Assistance Number: CFDA No. _____. _____. _____. _____. _____. _____ | | Phone number (include area code) | | Fax number (include area code) | |
| b. Title (Name of Program) | | 6. What is your transmittal? (Check one box per fax) | | | |
| c. Program Component | | b. Certification <input type="checkbox"/> | c. Document <input type="checkbox"/> | d. Match/Leverage Letter <input type="checkbox"/> | e. Other <input type="checkbox"/> |
| | | 7. How many pages (including cover) are being faxed? | | | |

Client Comments and Suggestions

U.S. Department of Housing
and Urban Development

You are our Client! Your comments and suggestions, please!

The Department of Housing and Urban Development in preparing this Notice of Funding Availability and application forms, has tried to produce a more user friendly, customer driven funding process. Please let us have your comments and recommendations for improvements to this document. You may leave this form attached to your application, or feel free to detach the form and return it to:

The Department of Housing and Urban Development
Office of Departmental Grants Management and Oversight
Room 3156
451 7th Street, SW
Washington, DC 20410

Please Provide Comments on HUD's Efforts:

The NOFA (insert title) _____

is: (please check one)

- (a) is clear and easily understandable
- (b) better than before, but still needs improvement (please specify)
- (c) other (please specify)

The application form (insert title) _____

is: (please check one)

- (a) is acceptable given the volume of information required by statute and the volume of information required for accountability in selecting and funding projects.
- (b) is simpler and more user-friendly than before, but still needs work (please specify).

(c) other comments (please specify)

Name & Organization (Optional):

Are additional pages attached? Yes No

Logic Model

**U.S. Department of Housing
and Urban Development
Office of Departmental Grants Management and Oversight**

OMB Approval No. 2535-0114
(exp. 12/31/2006)

| Program Name: _____ Component Name: _____ | | | | | | | | | | | |
|--|------------------------|-------------------------------|--------------------------|-------------------|---------------|---------------------------|-------------|----------------------------------|-------------------------|----------------------------|--|
| 1 Strategic Goals | 2 Policy Priorities | 3 Problem, Need, Situation | 4 Service or Activity | 5 Benchmarks | | 6 Outcomes | | 7 Measurement Reporting Tools | 8 Evaluation Process | | |
| | | | | Output Goal | Output Result | Achievement Outcome Goals | End Results | | | Accountability | |
| | | Planning | | Intervention | | Impact | | | | | |
| | | | | Short Term | | | | | | a. b. c. d. e. | |
| | | | | Intermediate Term | | | | | | a. b. c. d. e. | |
| | | | | Long Term | | | | | | a. b. c. d. e. | |

Logic Model Instructions U.S. Department of Housing
And Urban Development
Office of Departmental Grants
Management and Oversight

OMB Approval No. 2535-0114
(exp. 12/31/2006)

The public reporting burden for this collection of information for the Logic Model is estimated to average 18 hours per response for applicants, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information and preparing the application package for submission to HUD. HUD may not conduct, and a person is not required to respond to, a collection of information unless the collection displays a valid control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reduce this burden, to the Reports Management Officer, Paperwork Reduction Project, in the Office of Information Technology, U.S. Department of Housing and Urban Development, Washington, DC 20410-3600. When providing comments, please refer to OMB Approval No. 2535-0114.

The information submitted in response to the Notice of Funding Availability for the Logic Model is subject to the disclosure requirements of the Department of Housing and Urban Development Reform Act of 1989 (Public Law 101-235, approved December 15, 1989, 42 U.S.C. 3545).

Instructions:

Responses to rating factor five should be in this format. Your response should be in bullet format rather than narrative. Please read each NOFA carefully to ensure the performance measures requested for this factor are reflected on the logic model form.

Program Name: The HUD funding program under which you are applying. If you are applying for a component of a program please include the Program Name as well as the Component Name.

Component Name: The HUD funding program under which you are applying.

Column 1: HUD's Strategic Goals: Indicate in this column **the number** of the goal(s) that your proposed service or activity is designed to achieve. HUD's strategic goals are:

1. Increase homeownership opportunities.
2. Promote decent affordable housing.
3. Strengthen communities.
4. Ensure equal opportunity in housing.
5. Embrace high standards of ethics, management, and accountability.
6. Promote participation of grass-roots faith-based and other community-based organizations.

Policy Priority: Indicate in this column **the number** of the HUD Policy Priority(ies), if any, your proposed service or activity promotes. Applicants are encouraged to undertake specific activities that will assist the Department in implementing its Policy Priorities. HUD's Policy Priorities are:

1. Provide Increased Homeownership and Rental Opportunities for Low- and Moderate-Income Persons, Persons with Disabilities, the Elderly, Minorities, and Families with Limited English Proficiency.
2. Improving our Nation's Communities.
3. Encouraging Accessible Design Features.
4. Providing Full and Equal Access to Grass-Roots Faith-Based and Other Community-Based Organization in HUD Program Implementation.
5. Participation of Minority-Serving Institutions in HUD Programs
6. Ending Chronic Homelessness.
7. Removal of Barriers to Affordable Housing.
8. Participation in Energy Star.

Column 2: Problem, Need, or Situation: Provide a general statement of need that provides the rationale for the proposed service or activity.

Column 3: Service or Activity: Identify the activities or services that you are undertaking in your work plan, which are crucial to the success of your program. Not every activity or service yields a direct outcome.

Column 4 and Column 5: Benchmarks: These columns ask you to identify benchmarks that will be used in measuring the progress of your services or activities. **Column 4** asks for specific interim or final products (called outputs) that you establish for your program's services or activities. **Column 5** should identify the results associated with the product or output. These may be numerical measures characterizing the results of a program activity, service or intervention and are used to measure performance. These outputs should lead to targets for achievement of outcomes. Results should be represented by both the actual # and % of the goal achieved.

Column 4: Benchmarks/Output Goal: Set quantifiable output goals, including timeframes. These should be products or interim products, which will allow you and HUD to monitor and assess your progress in achieving your program workplan.

Column 5: Benchmark/ Output Result: Report actual result of your benchmarks. The actual result could be number of housing units developed or rehabilitated, jobs created, or number of persons assisted. Outputs may be short, intermediate or long-term. *(Do not fill out this section with the application)*

Column 6 and Column 7: Outcomes: **Column 6 and Column 7** ask you to report on your expected and actual outcomes – the ultimate impact you hope to achieve. **Column 6** asks you to identify outcomes in terms of the impact on the community, people's lives, changes in economic or social status, etc. **Column 7** asks for the actual result of the outcome measure listed in Column 6, which should be updated as applicable.

Column 6: Outcomes/ Goals: Identify the outcomes that resulted in broader impacts for individuals, families/households, and/or the community. For example, the program may seek to improve the environmental conditions in a neighborhood, increase affordable housing, increase the assets of a low-income family, or improve self-sufficiency.

Proxy Outcome(s): Often direct measurement of the intended outcome is difficult or even impossible -- to measure. In these cases, applicants/grantees should use a proxy or surrogate measure that corresponds with the desired outcome. For example, improving quality of life in a neighborhood could be measured by a proxy indicator such as increases in home prices or decreases in crime. Training programs could be measured by the participant's increased wages or reading skills. The person receiving the service must meet eligibility requirements of the program.

Column 7: Outcomes/Actual Result: Identify specific achievements of outcomes listed in Column 6. *(Do not fill out this section with the application)*

Column 8: Measurement Reporting Tools: (a) List the tools used to track output or outcome information (e.g., survey instrument; attendance log; case report; pre-post test; waiting list; etc); (b) Identify the place where data is maintained, e.g. central database; individual case records; specialized access database, tax assessor database; local precinct; other; (c) Identify the location, e.g. on-site; subcontractor; other; (d) Indicate how often data is required to be collected, who will collect it and how often data is reported to HUD; and (e) Describe methods for retrieving data, e.g. data from case records is retrieved manually, data is maintained in an automated database. This tool will be available for HUD review and monitoring and should be used in submitting reporting information.

Column 9: Evaluation Process: Identify the methodology you will periodically use to assess your success in meeting your benchmark output goals and output results, outcomes associated to the achievement of the purposes of the program, as well as the impact that the work has made on the individuals assisted, the community, and the strategic goals of the Department. If you are not meeting the goals and results projected for your performance period, the evaluation process should be used as a tool to ensure that you can adjust schedules, timing, or business practices to ensure that goals are met within your performance period.

| | | |
|--|---|---|
| America's Affordable Communities Initiative | U.S. Department of Housing and Urban Development | OMB approval no. 2510-0013 (exp. 03/31/2007) |
|--|---|---|

Public reporting burden for this collection of information is estimated to average 3 hours. This includes the time for collecting, reviewing, and reporting the data. The information will be used to encourage applicants to pursue and promote efforts to remove regulatory barriers to affordable housing. Response to this request for information is required in order to receive the benefits to be derived. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Questionnaire for HUD's Initiative on Removal of Regulatory Barriers

Part A. Local Jurisdictions. Counties Exercising Land Use and Building Regulatory Authority and Other Applicants Applying for Projects Located in such Jurisdictions or Counties [Collectively, Jurisdiction]

| | 1 | 2 |
|--|------------------------------|------------------------------|
| <p>1. Does your jurisdiction's comprehensive plan (or in the case of a tribe or TDHE, a local Indian Housing Plan) include a "housing element? A local comprehensive plan means the adopted official statement of a legislative body of a local government that sets forth (in words, maps, illustrations, and/or tables) goals, policies, and guidelines intended to direct the present and future physical, social, and economic development that occurs within its planning jurisdiction and that includes a unified physical plan for the public development of land and water. If your jurisdiction does not have a local comprehensive plan with a "housing element," please enter no. If no, skip to question # 4.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>2. If your jurisdiction has a comprehensive plan with a housing element, does the plan provide estimates of current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate and middle income families, for at least the next five years?</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>3. Does your zoning ordinance and map, development and subdivision regulations or other land use controls conform to the jurisdiction's comprehensive plan regarding housing needs by providing: a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped "as of right" in these categories, that can permit the building of affordable housing addressing the needs identified in the plan? (For purposes of this notice, "as-of-right," as applied to zoning, means uses and development standards that are determined in advance and specifically authorized by the zoning ordinance. The ordinance is largely self-enforcing because little or no discretion occurs in its administration.). If the jurisdiction has chosen not to have either zoning, or other development controls that have varying standards based upon districts or zones, the applicant may also enter yes.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>4. Does your jurisdiction's zoning ordinance set minimum building size requirements that exceed the local housing or health code or is otherwise not based upon explicit health standards?</p> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

| | | |
|---|-----------------------------|------------------------------|
| <p>5. If your jurisdiction has development impact fees, are the fees specified and calculated under local or state statutory criteria? If no, skip to question #7. Alternatively, if your jurisdiction does not have impact fees, you may enter yes.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>6. If yes to question #5, does the statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (nexus), and a method for fee calculation?</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>7. If your jurisdiction has impact or other significant fees, does the jurisdiction provide waivers of these fees for affordable housing?</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>8. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through gradated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: "<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>" (www.huduser.org/publications/destech/smartcodes.html)</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>9. Does your jurisdiction use a recent version (i.e. published within the last 5 years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification. In the case of a tribe or TDHE, has a recent version of one of the model building codes as described above been adopted or, alternatively, has the tribe or TDHE adopted a building code that is substantially equivalent to one or more of the recognized model building codes?</p> <p>Alternatively, if a significant technical amendment has been made to the above model codes, can the jurisdiction supply supporting data that the amendments do not negatively impact affordability.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>10. Does your jurisdiction's zoning ordinance or land use regulations permit manufactured (HUD-Code) housing "as of right" in all residential districts and zoning classifications in which similar site-built housing is permitted, subject to design, density, building size, foundation requirements, and other similar requirements applicable to other housing that will be deemed realty, irrespective of the method of production?</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

| | | |
|--|------------------------------|------------------------------|
| 11. Within the past five years, has a jurisdiction official (i.e., chief executive, mayor, county chairman, city manager, administrator, or a tribally recognized official, etc.), the local legislative body, or planning commission, directly, or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or hearings, or has the jurisdiction established a formal ongoing process, to review the rules, regulations, development standards, and processes of the jurisdiction to assess their impact on the supply of affordable housing? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 12. Within the past five years, has the jurisdiction initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the jurisdiction's "HUD Consolidated Plan?" If yes, attach a brief list of these major regulatory reforms. | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 13. Within the past five years has your jurisdiction modified infrastructure standards and/or authorized the use of new infrastructure technologies (e.g. water, sewer, street width) to significantly reduce the cost of housing? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 14. Does your jurisdiction give "as-of-right" density bonuses sufficient to offset the cost of building below market units as an incentive for any market rate residential development that includes a portion of affordable housing? (As applied to density bonuses, "as of right" means a density bonus granted for a fixed percentage or number of additional market rate dwelling units in exchange for the provision of a fixed number or percentage of affordable dwelling units and without the use of discretion in determining the number of additional market rate units.) | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 15. Has your jurisdiction established a single, consolidated permit application process for housing development that includes building, zoning, engineering, environmental, and related permits? Alternatively, does your jurisdiction conduct concurrent, not sequential, reviews for all required permits and approvals? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 16. Does your jurisdiction provide for expedited or "fast track" permitting and approvals for all affordable housing projects in your community? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 17. Has your jurisdiction established time limits for government review and approval or disapproval of development permits in which failure to act, after the application is deemed complete, by the government within the designated time period, results in automatic approval? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 18. Does your jurisdiction allow "accessory apartments" either as: a) a special exception or conditional use in all single-family residential zones or, b) "as of right" in a majority of residential districts otherwise zoned for single-family housing? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 19. Does your jurisdiction have an explicit policy that adjusts or waives existing parking requirements for all affordable housing developments? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 20. Does your jurisdiction require affordable housing projects to undergo public review or special hearings when the project is otherwise in full compliance with the zoning ordinance and other development regulations? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Total Points: | | |

Part B. State Agencies and Departments or Other Applicants for Projects Located in Unincorporated Areas or Areas Otherwise Not Covered in Part A

| | 1 | 2 |
|--|-----------------------------|------------------------------|
| 1. Does your state, either in its planning and zoning enabling legislation or in any other legislation, require localities regulating development have a comprehensive plan with a "housing element?" If no, skip to question # 4 | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 2. Does you state require that a local jurisdiction's comprehensive plan estimate current and anticipated housing needs, taking into account the anticipated growth of the region, for existing and future residents, including low, moderate, and middle income families, for at least the next five years? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 3. Does your state's zoning enabling legislation require that a local jurisdiction's zoning ordinance have a) sufficient land use and density categories (multifamily housing, duplexes, small lot homes and other similar elements); and, b) sufficient land zoned or mapped in these categories, that can permit the building of affordable housing that addresses the needs identified in the comprehensive plan? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 4. Does your state have an agency or office that includes a specific mission to determine whether local governments have policies or procedures that are raising costs or otherwise discouraging affordable housing? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 5. Does your state have a legal or administrative requirement that local governments undertake periodic self-evaluation of regulations and processes to assess their impact upon housing affordability address these barriers to affordability? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 6. Does your state have a technical assistance or education program for local jurisdictions that includes assisting them in identifying regulatory barriers and in recommending strategies to local governments for their removal? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 7. Does your state have specific enabling legislation for local impact fees? If no skip to question #9. | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 8. If yes to the question #7, does the state statute provide criteria that sets standards for the allowable type of capital investments that have a direct relationship between the fee and the development (<i>nexus</i>) and a method for fee calculation? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| 9. Does your state provide significant financial assistance to local governments for housing, community development and/or transportation that includes funding prioritization or linking funding on the basis of local regulatory barrier removal activities? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

| | | |
|---|-----------------------------|------------------------------|
| <p>10. Does your state have a mandatory state-wide building code that a) does not permit local technical amendments and b) uses a recent version (i.e. published within the last five years or, if no recent version has been published, the last version published) of one of the nationally recognized model building codes (i.e. the International Code Council (ICC), the Building Officials and Code Administrators International (BOCA), the Southern Building Code Congress International (SBCI), the International Conference of Building Officials (ICBO), the National Fire Protection Association (NFPA)) without significant technical amendment or modification?</p> <p>Alternatively, if the state has made significant technical amendment to the model code, can the state supply supporting data that the amendments do not negatively impact affordability?</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>11. Has your jurisdiction adopted specific building code language regarding housing rehabilitation that encourages such rehabilitation through graduated regulatory requirements applicable as different levels of work are performed in existing buildings? Such code language increases regulatory requirements (the additional improvements required as a matter of regulatory policy) in proportion to the extent of rehabilitation that an owner/developer chooses to do on a voluntary basis. For further information see HUD publication: "<i>Smart Codes in Your Community: A Guide to Building Rehabilitation Codes</i>" (www.huduser.org/publications/destech/smartcodes.html)</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>12. Within the past five years has your state made any changes to its own processes or requirements to streamline or consolidate the state's own approval processes involving permits for water or wastewater, environmental review, or other State-administered permits or programs involving housing development. If yes, briefly list these changes.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>13. Within the past five years, has your state (i.e., Governor, legislature, planning department) directly or in partnership with major private or public stakeholders, convened or funded comprehensive studies, commissions, or panels to review state or local rules, regulations, development standards, and processes to assess their impact on the supply of affordable housing?</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>14. Within the past five years, has the state initiated major regulatory reforms either as a result of the above study or as a result of information identified in the barrier component of the states' "Consolidated Plan submitted to HUD?" If yes, briefly list these major regulatory reforms.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>15. Has the state undertaken any other actions regarding local jurisdiction's regulation of housing development including permitting, land use, building or subdivision regulations, or other related administrative procedures? If yes, briefly list these actions.</p> | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| <p>Total Points:</p> | | |