



City of Hawthorne

HOME Investment Partnerships (HOME) Program
PY24-25 NOFA & Application

December 2023

City of Hawthorne
Housing Department
4455 W. 126th Street
Hawthorne, CA, 90250

OVERVIEW

The City of Hawthorne is pleased to announce the availability of approximately \$3,200,999 in HOME Investment Partnerships (HOME) funds for the 2024-2025 Program Year. This program is funded through the U.S. Department of Housing and Urban Development (HUD) and is administered locally by the City of Hawthorne (City). This Notice of Funding Availability (NOFA) covers a one-year period for HOME activities that will begin July 1, 2024, and end June 30, 2025.

HOME PROGRAM DESCRIPTION

The HOME program was created under Title II of the National Affordable Housing Act of 1990. The general purposes of HOME are to: (1) expand the supply of decent and affordable housing for low- and very low-income households; (2) promote partnerships among all levels of government and the private sector, including for-profit and nonprofit agencies, to provide adequate supply of decent affordable housing; and (3) strengthen nonprofit organizations' capacity to develop and manage affordable housing. To achieve these goals, no less than 15% of the HOME allocation is reserved for investment in housing to be developed, sponsored, or owned by Community Housing Development Organizations (CHDOs).

To address the needs within the community, the City will allocate an estimated \$3,200,999 in HOME funds for investment in the following activities:

Activity	Funding Amount	Statutory Minimum
CHDO Set Aside	\$472,407	15%
Affordable Housing Development	\$2,728,592	
Total	\$3,200,999	

Eligible Applicants

The City invites eligible applicants to submit applications for activities that meet the objectives and priorities of the City's Consolidated Plan as well as the requirements of the HOME program.

1. Applicants must be an incorporated public, nonprofit, or for-profit agency able to undertake the approved activity within the boundaries of the City of Hawthorne.
2. Applicants must demonstrate appropriate financial management and programmatic expertise to successfully develop, design, implement, and monitor the proposed activity. This capacity can be demonstrated through previous experience in successfully developing activities similar to the one proposed, either by key partners or key staff within the agency.
3. Applicants must be able to meet all federal, State of California, and City of Hawthorne requirements relative to the HOME program, specifically those concerning equal opportunity and fair housing, affirmative marketing, environmental review, displacement, relocation, acquisition, labor standards, lead-based paint, conflict of interest, debarment and suspension, and flood insurance. Pertinent federal requirements are noted in *General Requirements*. All applicants should be aware that if funded, additional requirements will apply.

4. Applicants seeking consideration for funds to be reserved for Community Housing Development Organizations (CHDOs) are advised that funds awarded under this category are contingent upon certification as a CHDO by the City. Applicants are advised that additional documentation to support the City's determination of your agency's CHDO status shall be requested by the City subsequent to submission of an application. Such additional documentation shall be provided to the City within 14 days of such request or your agency's application may not be considered for HOME funding. A CHDO has among its purposes the provision of decent housing that is affordable to low-income persons; has a demonstrated capacity to carry out activities assisted with HOME funds including paid employees with experience implementing the type of project proposed for HOME funding; has a history of serving the community within which the housing to be assisted with HOME funds is located; is organized under state laws; has standards of financial accountability; has tax exemption under section 501(c) of the Internal Revenue Code; and maintains at least one-third of its governing board's membership for residents of low-income neighborhoods, other low-income community residents, or elected representatives of low-income neighborhood organizations.

Eligible Activities

Eligible activities under this NOFA must increase the supply of housing affordable to low-income households. Funding is available for the following types of housing activities:

1. New construction of rental housing
2. Acquisition and/or rehabilitation of rental housing
3. Acquisition and/or rehabilitation of homebuyer properties
4. New construction of homebuyer properties
5. Direct financial assistance to buyers of housing developed by a CHDO with HOME funds

Please note that the assistance per property cannot exceed the HUD per unit subsidy limits. The established limits for 2023 are listed below. These limits are subject to change in 2024.

Max HOME Subsidy Limits				
Studio	1 Bedroom	2 Bedrooms	3 Bedrooms	4 Bedrooms
\$173,011	\$198,331	\$241,176	\$312,005	\$342,482

In addition, applicants are advised that HOME funded housing projects are subject to the following affordability period restrictions:

Minimum Affordability Periods for HOME Funded Housing	
Amount of Funding per Unit	Minimum Period of Affordability
Under \$15,000	5 years
\$15,000 - \$40,000	10 years
Over \$40,000 or rehabilitation involving refinancing	15 years
New construction or acquisition of newly constructed housing	20 years

Ineligible Activities

Any units previously subsidized with HOME funds are not eligible for additional financial assistance under the HOME program for the duration of all HOME affordable housing regulatory controls.

Eligible Beneficiaries

The purpose of the HOME program is to provide housing opportunities for low- and very low-income households. HUD establishes income limits annually based upon the Area Median Income (AMI) for eligibility under these programs. The 2023 income limits for Los Angeles County are provided below:

Income Guidelines for HOME Assisted Projects					
Percent of AMI	Household Size				
	1	2	3	4	5
60% of AMI	\$52,980	\$60,540	\$68,100	\$75,660	\$81,720
80% of AMI	\$70,650	\$80,750	\$90,850	\$100,900	\$109,000

APPLICATION AND SUBMISSION INFORMATION

Application Timeline

Date / Time	Event / Deadline
December 7, 2023	NOFA & Application materials published
December 18, 2023 at 1:00 p.m.	NOFA Workshop at Memorial Center – Polaris Room
January 26, 2024 at 5:00 p.m.	Applications due
January – March, 2024	City evaluation of applications
April 23, 2024 at 6:00 p.m.	City Council public hearing
July 1, 2024	Program year begins

Submission Guidelines & Deadline

Applications are due to the City of Hawthorne by **5:00 p.m. on Friday, January 26, 2024**. A completed application must be typed (not handwritten) and shall only be accepted via e-mail to rbridges@mdg-ldm.com. Please note that applications that are late, incomplete, and/or not submitted in the proper format will not be considered.

The City will conduct a NOFA Workshop on Monday, December 18, 2023 at 1:00 p.m. at the Memorial Center, Polaris Room, to provide information and guidance on the application process, eligibility criteria, evaluation factors, and reporting requirements. Attendance at the workshop is strongly encouraged, but not mandatory, for interested applicants. For those unable to attend, staff is available to answer questions and provide technical assistance to any agency wishing to apply until January 19, 2024. Please contact Kimberly Mack, Housing Director, via email at kmack@cityofhawthorne.org to request technical assistance.

The City, at its sole and absolute discretion, with or without cause, and without liability to any applicant, reserves the right to:

1. Accept or reject any and/or all applications either in whole or in part without prior notice.
2. Waive any irregularities or deficiencies in the NOFA process and to reject any and/or all applications not in the best interest of the City.
3. Request additional information or clarification from the applicants.
4. Retain all submitted applications. Selection or rejection of an application does not affect these rights.

Application Evaluation & Selection

Staff will conduct an initial review of the applications for completeness and eligibility under the HOME program regulations. Applicants will be notified immediately if they do not meet the initial review. Applications that are determined to comply with both the HOME program regulations and the terms of the NOFA will be evaluated according to the following factors:

1. Magnitude of need and compatibility with priorities identified in the City's Consolidated Plan
2. Feasibility of the program design and scope of work for the proposed qualifying populations
3. Financial feasibility of the proposed activity
4. Capacity and experience of the applicant

Staff recommendations for funding will be made to the City Council at a Public Hearing in April 2024. City Council funding decisions will be final. All applicants will be notified of the Council's funding decision.

GENERAL REQUIREMENTS

Contracting & Written Agreements

If selected and awarded funding, your agency will be required to execute a written agreement with the City of Hawthorne. The agreement must be executed and returned to the City within 60 days of the City's transmittal to your agency. Failure to do so may result in termination of the award and loss of funding. The agreement outlines the terms and conditions of funding for your agency and the City. The agreement is a legally binding contract and failure to adhere to its terms and conditions may result in the termination and required repayment of the funding award. Each agreement will contain, at a minimum, the following information derived from your agency's application:

1. **Description of Activity Services:** This provides an overview of the proposed activity as described in the application, goals and objectives, and specific services (e.g., working hours, location of services, number of clients to be served) achievable based on the funding level approved by the City Council. The description of the activity also describes in detail how the funds will be used to support the activity.
2. **Activity Budget:** The budget lists the specific uses of funds approved by the City (e.g., personnel, consultants, utilities, supplies, rental assistance payments). Please note that all HOME funding is disbursed on a reimbursement basis.
3. **Activity Performance Measurement Plan / Schedule of Performance:** This schedule outlines the major activities and expected outcomes for each quarter of the year based on HUD and/or City performance indicators and goals specified in your agency's application.
4. **Conditions to Disbursement:** This specifies that the disbursement of HOME funds to your agency is subject to the following conditions at the time each disbursement is to be made:
 - a. Your agency shall provide have provided to City a complete reimbursement request with documentation supporting the eligible HOME costs incurred;
 - b. Your agency shall have submitted to City a Quarterly Performance Report of progress toward achieving the Activity Performance Measurement Plan;

- c. If payment is for the professional services of a consultant or contractor, your agency will be required to provide the City with appropriate evidence that consultant or contractor is not federally debarred or suspended and shall have provided a copy of the executed contract between your agency and the consultant or contractor;
- d. The ratio of disbursement of HOME funds to your agency shall not exceed the ratio of progress towards achieving the Activity Performance Measurement Plan identified in the written agreement.

Leverage/Match Funds

Applicants must demonstrate that HOME funds will be leveraged or matched with resources from state, local, private or other non-federal sources by not less than 12.5%. Sources of match or leveraged funds include public and private grants, loans, equity investments, and in-kind contributions that are reasonably expected to be available for the project. For the HOME program, matching funds must be either committed or in-hand at the time of application and must be spent prior to reimbursement from HOME, unless otherwise approved by City staff.

Readiness

Applications must display evidence of readiness to proceed. Applicants must demonstrate that HOME funds will be fully spent within the twelve-month period.

Indemnification

Agencies approved for funding must agree to defend, indemnify, and hold harmless the City, its officers, agents and employees from and against all liability, claims, demand, losses, and expenses, including attorney's fees, original and on appeal, arising out of or related in any way to the performance of the agreement.

Insurance

Agencies approved for funding will be required to maintain the insurance coverages described below, each of which shall contain a provision that forbids any cancellation, changes, or material alterations without prior notice to the City at least 30 days in advance. The insurance coverage shall be evidenced by an original certificate of insurance provided prior to the execution of the written agreement. The required insurance (as of July, 2023, subject to change in the written agreement) is as follows:

1. Commercial General Liability Insurance – shall be written to cover liability arising from premises and operations, independent contractors, products and completed operations, personal and advertising injury, and contractual liability. The minimum bodily injury and property damage liability limit shall be \$1,000,000 per occurrence.
2. Workers' Compensation Insurance – shall cover all employees engaged in work for the agency in accordance with the laws of the State of California. The minimum employer's liability limit shall be \$1,000,000 per accident.
3. Auto Insurance – shall be required to cover all employees who may operate a vehicle as part of the proposed activity. The minimum employer's liability limit shall be \$500,000 per accident.

Licenses

Agencies approved for funding will be required to obtain a City of Hawthorne business license.

Monitoring

Agencies approved for funding will be required to maintain and submit adequate information necessary to monitor program accountability and progress in accordance with the terms and conditions of the written agreement.

Tenant Displacement Strongly Discouraged

Where possible, applicants are encouraged to propose projects that prevent or minimize displacement, such as acquisition of vacant properties, properties being voluntarily sold by an owner-occupant, rehabilitation projects that require only temporary relocation, or new construction projects. If funds will be used in a project that involves acquisition of a property with residential or commercial tenants, federal Uniform Relocation Act of Section 104(d) requirements must be met.

Fair Housing, Nondiscrimination, and Equal Opportunity

The City of Hawthorne, in accordance with federal and state law and City policy, prohibits discrimination on the basis of race, color, national origin, religion, sex, gender identity, pregnancy, physical or mental disability, medical condition, ancestry, marital status, age, sexual orientation, citizenship or service in the uniformed services. Agencies awarded funding will be required to comply with all applicable fair housing, nondiscrimination and equal opportunity requirements.

Compliance with Applicable Laws, Rules, and Regulations

Agencies that are awarded HOME funding must act in accordance with all applicable federal, State of California, and City of Hawthorne laws, rules, and regulations. Applicants are strongly encouraged to be familiar with these requirements prior to submitting a funding request. These include, but are not limited to, the following:

1. 24 CFR Part 92, as amended – The regulations governing the HOME program.
2. 24 CFR Part 1 and 6, Public Law 90-284, Fair Housing Act – The regulations issued following Title VI of the 1964 Civil Rights Act and Section 109 of the 1975 Housing and Community Development Act that prohibits discrimination in HUD programs based on sex, race, color, national origin, and religion and requires all programs and activities to be administered in a manner to affirmatively further the policies of the Fair Housing Act.
3. 24 CFR Part 107 and 108 – The regulations issued following Executive Order 11063 and Executive Order 12892 which prohibit discrimination and promote equal opportunity in housing.
4. Section 504 of the Rehabilitation Act of 1973, 24 CFR Part 40 and 41 – The regulations that set forth policies and procedures for the enforcement of standards and requirements for disabled accessibility. The Architectural Barriers Act of 1968 and the Americans with Disabilities Act provide additional laws on accessibility and civil rights of individuals with disabilities.
5. Age Discrimination Act of 1975 (42 U.S.C. 6101) – The regulations that prohibit discrimination on the basis of age.

6. 29 CFR Parts 3 and 5 – The regulations on labor standard provisions that include the payment of prevailing wages on federally assisted projects as mandated by the Davis-Bacon Act and Contract Work Hours and Safety Standards Act. 24 CFR Part 70 provides information on the use of volunteers.
7. Copeland “Anti-Kickback” Act (18 U.S.C. 874 and 40 U.S.C. 276c) – The regulations on contracts for construction or repair awarded by subrecipients shall include a provision for compliance.
8. 24 CFR Part 58 – The regulations prescribing the Environmental Review procedure under the National Environmental Policy Act of 1969.
9. National Flood Insurance Act of 1968, 24 CFR Part 55 under Executive Order 11988 – The regulations for proposed projects and properties located in a floodplain.
10. 36 CFR Part 800 – The regulations outlining the procedures for the protection of historic and cultural properties.
11. Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 – the policies for displacement, relocation assistance, and real property acquisition as defined by 42 U.S.C. 4601 (URA) and implementing regulations issued by the Department of Transportation at 49 CFR part 24 and section 104(d) of the Housing and Community Development Act of 1974 (42 U.S.C. 5304(d)).
12. 24 CFR Part 7 and 41 CFR Part 60 – The regulations outlining equal employment opportunity without regard to race, sex, color, religion, age, national origin, and disability in federally assisted construction contracts.
13. 24 CFR Part 75 – This part establishes the requirements to be followed to ensure the objectives of Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) are met. The purpose of Section 3 is to ensure that economic opportunities, most importantly employment, generated by certain HUD financial assistance shall be directed to low- and very low-income persons, particularly those who are recipients of government assistance for housing or residents of the community in which the Federal assistance is spent.
14. Residential Lead Based Paint Hazard Reduction Act of 1992 – The regulations implemented by 24 CFR Part 35, Subpart B imposes certain requirements on disclosure of lead based paint hazards.
15. 24 CFR Part 24 – The regulations that prohibit use of debarred or suspended contractors on federally assisted projects and Drug Free Workplace requirements, issued according to Executive Order 12459.
16. 2 CFR Part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards – These regulations include requirements for procurement, contracting, cost principles and audit requirements including the Single Audit required for organizations expending \$750,000 or more derived from federal awards during the organization’s fiscal year. This Part replaces former requirements found at 24 CFR Part 84, 24 CFR Part 85, OMB Circular A-87, OMB Circular A-122 and OMB Circular A-133.
17. 24 CFR Part 49 – The regulations on eligibility restrictions for resident aliens.
18. 24 CFR Part 87 and Byrd Anti-Lobbying Amendment (31 U.S.C. 1352) – The regulations for restrictions on lobbying and required certifications.
19. Executive Order 13170 – The regulations on increasing opportunities and access for Disadvantaged Businesses.

20. HUD Requirements – All other applicable required reports, OMB Circulars, and procedures.
21. Administrative Procedures – The rules issued by the City of Hawthorne in relation to contracts, process and procedures.
22. Clean Air Act (42 U.S.C. 7401) and the Federal Water Pollution Control Act (33 U.S.C. 1251 et seq.) – The regulations that require compliance with all applicable standards, orders or regulations issued following the rule.

The Code of Federal Regulations (CFR) and Executive Orders may be found at:

CFR: www.ecfr.gov

Executive Orders: www.archives.gov/federal-register/index.html

HOME APPLICATION

All agencies wishing to apply for HOME Investment Partnerships (HOME) funding must complete all sections of the enclosed HOME Application (“Application”) to be considered. Please read the instructions carefully.

HOME Application Instructions

1. Applications must be typed. Handwritten submissions will not be accepted and returned to agency.
2. Before submitting your application, use the “HOME Application Checklist” and check off each item that is being submitted. If an item is not checked off, your application is incomplete. Do not insert additional information not requested in the application.
3. Applications must include all applicable certifications with signatures.
4. If a section requires more than just checking a box, do not leave the question blank. If the question does not apply to your agency, indicate by responding with “N/A” or “Not Applicable”. Sections left blank may constitute an incomplete application

Applications that are incomplete, have content deficiencies, that are missing required documentation, or that are submitted after the deadline may be rejected.

HOME APPLICATION CHECKLIST

Tab Number	Contents
1	<p>Cover Letter</p> <ul style="list-style-type: none"> <input type="checkbox"/> On applicant letterhead, provide a brief description of the project, project location, the amount of funding and funding source being requested, the timeframe by which City approval is requested, and the signature of an official authorized to submit the Application <input type="checkbox"/> A completed copy of this “Application Checklist” form which specifies the documents and responses contained in your proposal submission
2	<p>Housing Development Application</p> <ul style="list-style-type: none"> <input type="checkbox"/> Application <input type="checkbox"/> Application Attachment “A” - Development Schedule <input type="checkbox"/> Application Attachment “B” - Construction Financing Summary <input type="checkbox"/> Application Attachment “C” - Developer Experience Information <input type="checkbox"/> Application Attachment “D” - Development Team Information <input type="checkbox"/> Application Attachment “E” - Development Team Resumes <input type="checkbox"/> Application Attachment “F” - Management Team Information <input type="checkbox"/> Provide a certificate from a third party certified public accountant which states that for the developer’s current housing projects in operation for over three years, that the projects have maintained a positive operating cash flow from operating income alone, for the year in which each development’s last financial statement has been prepared, and have funded reserves in accordance with the partnership agreements and any applicable loan documents. <input type="checkbox"/> Provide a copy of any Developer partnership, operating agreement, or Memorandum of Understanding with other not-for-profits, for-profits, or service providers in project development or specific service delivery related to scope of the Project.
3	<p>Multi-Family Underwriting Template</p> <ul style="list-style-type: none"> <input type="checkbox"/> Completed Excel Multi-Family Underwriting Template (<i>contact City for a digital version of the Excel document</i>) <input type="checkbox"/> Indicate total development value of proposed project: \$_____
4	<p>Site Documentation</p> <ul style="list-style-type: none"> <input type="checkbox"/> Evidence of Site Control <input type="checkbox"/> Parcel Map <input type="checkbox"/> FEMA Flood Insurance Rate Map with Project Site Identified

	<input type="checkbox"/> Appraisal or Statement of Value (Note that if a current appraisal is not available at the time of application, one will be required prior to preparation of a development agreement) <input type="checkbox"/> Evidence of zoning consistent with proposed use <input type="checkbox"/> Evidence of the availability of utilities <input type="checkbox"/> Submit a market study, dated no more than 6 months prior to application date. If a current market study is not available at the time of application, one will be required prior to preparation of a development agreement. <input type="checkbox"/> Documentation to support Utility Allowance Calculations
5	<p>Acquisition of Property with Existing Buildings</p> <p>If there are existing buildings on the property and if relocation is involved, please submit the following:</p> <input type="checkbox"/> The relocation plan and proposed relocation assistance, or provide a statement of non-displacement. Note that if the proposed project is to be federally funded it must comply with the displacement, relocation, and acquisition requirements implementing the Uniform Relocation Assistance and Real Property Acquisition Policies Act (42 U.S.C. 4201-4655) and implementing regulations at 49 CFR Part 24; and if funded with other than federal resources, it must comply with City of Hawthorne relocation requirements <input type="checkbox"/> Name of funding source for relocation assistance along with a commitment letter from the funding source <input type="checkbox"/> Copy of lead-based paint test survey and testing (pre-1978 – all painted surfaces). Please specify year constructed: _____ <input type="checkbox"/> Copy of any asbestos testing performed <input type="checkbox"/> Copy of Summary of Findings of Phase I Environmental Assessment
6	<p>CHDO Application (if applicable)</p> <input type="checkbox"/> Attach CHDO Certification Application (Attachment “I” – Application for CHDO Certification) <input type="checkbox"/> If no other governmental funds are being used for any portion of the project, then provide an affidavit that specifies the no other governmental funding other than the HOME funds are being used to fund the project.
7	<p>Certification Documents</p> <input type="checkbox"/> Submit Certification Documents identified as: <ol style="list-style-type: none"> 1. Application Attachment “G” - Debarment, Suspension, Ineligibility and Exclusion Certification 2. Application Attachment “H” - Disclosure of Lobbying Activity the Administrative Requirements and Forms can be accessed at: <p>NOTE: Proof of insurance is not a requirement for submission of a proposal, but applicants should be aware that no contract will be executed until the proper original certificates or policies are filed with the City.</p>

<p style="text-align: center;">8</p>	<p>Financial Requirements</p> <ul style="list-style-type: none"> <input type="checkbox"/> Provide documentation for all project financial commitments. If supporting documentation is not submitted, provide justification for any requested exemption
<p style="text-align: center;">9</p>	<p>Neighborhood Conditions</p> <p>Complete and provide:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Neighborhood Conditions Evaluation Form <p>Neighborhood Standards and Affirmative Fair Housing Marketing</p> <ul style="list-style-type: none"> <input type="checkbox"/> Site and Neighborhood Standards Analysis (compliant with the provisions of 24 CFR §983.57(e)) <input type="checkbox"/> Affirmative Fair Housing Market Plan (Form HUD-935.2A)
<p style="text-align: center;">10</p>	<p>Additional Evaluation Criteria</p> <p>“Green” Criteria – Submit the following documentation to receive consideration:</p> <p>LEED:</p> <ul style="list-style-type: none"> <input type="checkbox"/> LEED Compliance Narrative and Checklist <input type="checkbox"/> Name and contact information for LEED accredited professionals <p>NAHB:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Completed NAHB Model Green Home Building Guidelines Checklist <p>HERS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Home Energy Rating System (HERS) Index rating performed by a certified RESNET HERS Rater <p>Additional Green Criteria Information:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Costs attributable to green features <p>Design and Location Criteria:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Submit copy of Building Plan Elevations, Floor Plans, and Site Plans to scale, photographs of the neighborhood surrounding the proposed site, and a narrative describing how the project will fit into the context of the neighborhood, why the design is appropriate for that specific community and/or how the community involvement in the design process will assist in evaluation of building design. <input type="checkbox"/> Submit renderings of proposed buildings within the current environment.

HOUSING DEVELOPMENT APPLICATION

APPLICANT INFORMATION

Applicant Name: Click or tap here to enter text.	
Applicant Address: Click or tap here to enter text.	Applicant City, State, Zip: Click or tap here to enter text.
Applicant Phone Number: Click or tap here to enter text.	Application Date: Click or tap here to enter text.
Applicant Contact Person: Click or tap here to enter text.	Applicant Contact Person email address: Click or tap here to enter text.

SECTION 1 – PROJECT IDENTIFICATION

Project Name: Click or tap here to enter text.		
Project Address: Click or tap here to enter text.	Project City, State, Zip: Click or tap here to enter text.	
UPC Number: Click or tap here to enter text.	Census Tract(s): Click to enter text.	Census Block Group(s): Click to enter text.

NOTE: If a question does not apply, please mark “N/A” so it is clear the question was not overlooked. All Attachments and required submissions for this Housing Development Application are identified in the HOME Application Checklist. All Attachments must be clearly labeled and provided in the order requested.

SECTION 2 – FUNDING SOURCE REQUESTED

Please specify the source of funds and funding conditions which you are requesting. Please note that the funding source may be changed at the discretion of the City.

Funding Source	Amount Requested	Proposed Use of Funds	Funding Terms Being Requested
HOME Program (HOME Investment Partnerships Program)	Click to enter text.	Click to enter text.	Click to enter text.

SECTION 3 – TARGET POPULATION(S)

A. Target Populations

Please specify the target income populations to be served:

- 30% of AMI
 50% of AMI
 60% AMI
 80% AMI

SECTION 4 – PROJECT DESCRIPTION

A. Affordability Requirements - Use Restriction

NOTE: When the funds below are combined with other sources that require an affordability term, the period of affordability is the most restrictive term. By signing this Application, the owner irrevocably commits to the provision of affordable housing as required under an executed covenant agreement for the following affordability restriction periods:

Minimum Affordability Periods for HOME Funded Projects	
Amount of Funding per Unit	Minimum Period of Affordability
Under \$15,000	5 years
\$15,000 - \$40,000	10 years
Over \$40,000 or rehabilitation involving refinancing	15 years
New construction or acquisition of newly constructed housing	20 years

B. Occupancy

1. Does the project currently or expect to receive Project-Based Section 8 subsidies? Yes No
2. Will the project accept Section 8 vouchers? Yes No
3. Special Needs and Target Population

a. List those units restricted to occupancy by Special Needs Tenants or Target Populations:

Number of Units	Population Type
Enter #	Click to enter text.
Enter #	Click to enter text.
Enter #	Click to enter text.
Enter #	Click to enter text.
Enter #	Click to enter text.

- b. Are Supportive Services being provided to Special Needs tenants? Yes No

Please describe provided services: Click to enter text. _____

- c. Are Supportive Services specific to Target Population? Yes No

Please describe provided services: Click to enter text. _____

- d. Please specify who will be providing the Supportive Services: Click to enter text. _____

- e. Are costs of Supportive Services included in the rent? Yes No

C. Site Information

1. Site control is in the form of:

Deed Option to Purchase Purchase Contract Lease

If site control is in the form of a lease, please specify the lease term:

Enter # ___ years

Are there any Use or Deed Restrictions on the site? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please specify:
Click to enter text.

Please indicate the expiration date of the contract, option, or lease term:	Click to enter text.
Name of Seller or Lessor:	
Click to enter text.	
Seller or Lessor Address:	
Click to enter text.	
Telephone Number:	Email address:
Click to enter text.	Click to enter text.

Is there any direct or indirect financial or other interest between the buyer and seller?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If "yes", please explain how there is not a conflict of interest:
Click to enter text.

Please disclose any other site conditions, development/other limitations, or environmental concerns:
Click to enter text.

2. Planning

Please specify the zoning for the development site:	Click to enter text.
Is the zoning consistent with the development being proposed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No", please indicate the status and anticipated date of resolving all zoning inconsistencies: Click to enter text.	
Has the City approved the site plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has the City issued a building permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are all utilities available to the perimeter of the site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "No", please specify which utilities need to be brought to the site: Click to enter text.	
Please indicate who is responsible for bringing utilities to the site: Click to enter text.	
Specify the conditions that must be met to develop the site: Click to enter text.	

D. Proposed Improvements

Please check all that are applicable to the project:

- | | | |
|---|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Rehabilitation of Existing Building | <input type="checkbox"/> Property Acquisition |
| <input type="checkbox"/> Detached | <input type="checkbox"/> Manufactured/Modular/Mobile | <input type="checkbox"/> Townhome |
| <input type="checkbox"/> Semi-Detached Duplex | <input type="checkbox"/> High rise (4 stories or more) | <input type="checkbox"/> Midrise (2-3 stories) |
| <input type="checkbox"/> Special Needs | <input type="checkbox"/> Rental Housing | <input type="checkbox"/> Ownership Housing |

<input type="checkbox"/> Other (please describe): Click to enter text.
--

Is any portion of the building used for other than habitable residential purposes? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain: Click to enter text.

Please identify the following for the project:

Total Land Area: Click to enter text.	Building Square Footage: Click to enter text.	No. of Floors in Tallest Bldg.: Click to enter text.	No. of Elevators: Click to enter text.
Total No. of Units: Click to enter text.	# of Handicap Accessible Units: Click to enter text.	Structural System: Click to enter text.	Exterior Finish(es): Click to enter text.

E. Borrower and Project Ownership

Please provide the following information for the organization which will be borrowing entity:

Name of Entity: Click to enter text.
Address: Click to enter text.
Will the borrowing entity provide funds to a partnership? <input type="checkbox"/> Yes <input type="checkbox"/> No

If a partnership or LLC, name all partners and their respective percentage of ownership:

Name	% of Ownership
Click to enter text.	Enter %
Click to enter text.	Enter %
Click to enter text.	Enter %
Click to enter text.	Enter %
Click to enter text.	Enter %

Please describe who will hold title to the completed project and the manner in which it will be held: Click to enter text.

F. Appliances and Amenities Provided Without Additional Charge

Amenity/Appliance	Market Units		Affordable Units	
	Yes	No	Yes	No
Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas Range	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electric Range	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
W/D Hookups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A/C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evaporative Cooling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carpet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drapes/Shades	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhaust Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Range Hood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please list):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G. Monthly Utility Allowance Calculations

Utilities	Type of Utility (Gas, Electric, etc.)	Utilities Paid By:		Utility Allowance by Bedroom Size				
		Owner	Tenant	0 BR	1 BR	2 BR	3 BR	# ___ Br
Heating	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Evaporative or A/C	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Cooking	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
General electric	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Hot Water.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Water	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Sewer	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Trash	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter #	Enter #	Enter #
Total Utility Allowance for Units				Enter #	Enter #	Enter #	Enter #	Enter #
				Local PHA		Utility Co		Other
Source of Utility Allowance Calculation				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NOTE: Documentation to support Utility Allowance claims from the identified source must be submitted with this Application. Failure to do so will result in the Application being deemed incomplete.								

SECTION 4 - ACQUISITION OF PROPERTY WITH EXISTING BUILDINGS

1. Please designate project type:	<input type="checkbox"/> Acquisition/Rehab
	<input type="checkbox"/> Acquisition/Demolition/New Construction
2. Are buildings currently vacant?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Does this project involve relocation of current occupants?	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>If "Yes", does the project comply with the Uniform Relocation Assistance & Real Property Act of 1970?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Please describe the proposed relocation assistance and plan:</p> <p>Enter text.</p>	
<p>Name the funding source for relocation assistance:</p> <p>Enter text.</p>	
4. If vacant, indicate the last date of occupancy:	Enter text.
5. Year Construction was completed:	Enter text.
6. If building was constructed prior to 1978, please respond to the following:	
a. Has the property been tested for lead-based paint?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Has the building been tested for asbestos?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Has a Phase I Environmental Assessment been completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Property was acquired from:	<input type="checkbox"/> a related party <input type="checkbox"/> an unrelated party
9. Is the project a historic building?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Is the property located in a historic district?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11. Was the property previously subsidized with federal funds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes", please specify the source of funding:	Enter text.
Please specify the year funding was provided:	Enter text.

The City of Hawthorne reserves the right to request additional materials as needed or require changes in the information submitted herewith. The City of Hawthorne may adjust any or all figures provided herein for underwriting purposes.

Applicant Certification

The undersigned hereby applies for the item(s) as specified above and represents that the property described herein will not be used for any illegal or restricted purposes. The undersigned certifies that the statements made in this application and all attachments are true, correct and complete. Verification may be obtained from any source necessary.

Original Signature Required

Applicant Name: Enter text.	
Applicant Representative Signature: Enter text.	Title: Enter text.
Printed Name: Enter text.	Date: Enter text.

DEVELOPMENT SCHEDULE

Project Name: Enter text.	Date: Enter text.
------------------------------	----------------------

		Date	Comments
A.	Site Acquisition	Enter text.	Enter text.
B.	Financing		
1.	Construction Loan		Enter text.
	Closing Date:	Enter text.	
2.	Partnership Closing		Enter text.
	Closing Date:	Enter text.	
3.	Permanent Loan		Enter text.
	Commitment Date:	Enter text.	
	Closing Date:	Enter text.	
4.	Other		Enter text.
	Source of Funds:	Enter text.	
	Firm Commitment/Award Date:	Enter text.	
5.	Other		Enter text.
	Source of Funds:	Enter text.	
	Firm Commitment/Award Date:	Enter text.	
C.	Environmental Review Completed	Enter text.	Enter text.
D.	HUD Authority to Use Grant Funds Issued	Enter text.	Enter text.
E.	City Council funding appropriation approval	Enter text.	Enter text.
F.	Plans Submitted to the City	Enter text.	Enter text.
G.	Building Permits Issued	Enter text.	Enter text.
H.	Notice to Proceed Issued	Enter text.	Enter text.
I.	Start of Construction	Enter text.	Enter text.
J.	Completion of Construction	Enter text.	Enter text.
K.	Estimated Placed-in-Service Date	Enter text.	Enter text.
L.	Estimated Lease-Up Date	Enter text.	Enter text.

CONSTRUCTION FINANCING SUMMARY

Please specify the source(s) for all Construction Funds, inclusive of loan, grant, and other subsidy sources that are equal to 100% of the construction uses specified in the development proforma.

NOTE: If firm commitments are not available, identify the sources you plan to approach and describe your history of successfully obtaining funds from them in the past. If funding sources are identified to which you have not applied in the past, please describe your rationale for applying to them for this project.

Where funding commitments are in place, please provide documentation supporting the availability of construction funds for the project.

Uses of Funds / Total Development Cost	Amount	Source of Construction Funding
Site Work Costs	Enter #	Enter text.
Construction / Rehabilitation Costs	Enter #	Enter text.
Architectural / Engineering Costs	Enter #	Enter text.
Other Owner Construction Related Costs	Enter #	Enter text.
Construction Interest	Enter #	Enter text.
Other Interim Financing Costs	Enter #	Enter text.
Enter text.	Enter #	Enter text.
Enter text.	Enter #	Enter text.
Enter text.	Enter #	Enter text.
Enter text.	Enter #	Enter text.
Total Construction Costs	Enter #	

DEVELOPER PROJECTS UNDER DEVELOPMENT

Project Name: Enter text.	Date: Enter text.
Developer: Enter text.	

Please list all housing projects that are currently under development (attach additional pages as necessary):

	Project Name and Address	New Construction	Rehabilitation	Funding			Number of Total Units	Estimated % Completed	Estimated Completion Date	Multi-Family	Single Family
				HUD	LHFC	Other					
1	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
2	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
3	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
4	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
5	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
6	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
7	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
8	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
9	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
10	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
TOTALS							Enter #	Enter #			

DEVELOPER EXPERIENCE

Project Name: Enter text.	Date: Enter text.
Developer: Enter text.	

Please list the affordable housing developments that you have completed:

	Project Name and Address	New Construction	Rehabilitation	Funding			Number of Total Units	Number of Affordable Units	Date Placed in Service	Multi-Family	Single Family
				HUD	LIHTC	Other					
1	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
2	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
3	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
4	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
5	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
6	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
7	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
8	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
9	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
12	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
TOTALS							Enter #	Enter #			

<p>Development Experience:</p> <p>Where the development team experience reflected in the previous table is not consistent with the experience required for the project being proposed, please provide details regarding how you plan to gain expertise in the proposed program, in order to ensure that the team is competent in developing and managing the property in compliance with program requirements.</p>
<p>Describe proposed actions: Enter text.</p>
<p>Consolidated Plan Compliance:</p> <p>Please provide a description of how the proposed project is consistent with the City's Consolidated Plan Strategic Plan goals.</p>
<p>Enter text.</p>

<p>Prior Foreclosure:</p> <p>Developer/Co-Developer must list any projects they have owned or developed that has received a notice of default prior to foreclosure that has not been cured, is in the process of foreclosure, or has been fully foreclosed upon while the Applicant, Developer, general partner (or Person with a Controlling Interest in any of these entities) has/had an interest and/or involvement in the project and acknowledge the disclosures regarding the foreclosed property are accurate.</p>	
<p>Project Name: Enter text.</p>	<p>Project Address: Enter text.</p>
<p>Project Name: Enter text.</p>	<p>Project Address: Enter text.</p>

<p>Removal by Development Team Member:</p> <p>Developer/Co-Developer must list any projects previously awarded Federal, City, or Tax Credit funding within the last five (5) years in which they were terminated or removed by any other member of the Development Team.</p>	
<p>Project Name: Enter text.</p>	<p>Project Address: Enter text.</p>
<p>Project Name: Enter text.</p>	<p>Project Address: Enter text.</p>

<p>Fraud and Misrepresentation: Developer/Co-Developer must list any conviction, current indictment or complaint, or circumstances where it has been found liable, or is currently accused of fraud, in this State or any other State, or misrepresentation relating to: (a) issuance of securities; (b) the development, construction, operation or management of a Tax Credit or other government subsidized housing program; (c) the conduct of the business of the Developer, general partner or any Person with a Controlling Interest in either such party in any administrative or other proceeding; or (d) any filing with the Internal Revenue Service in any State.</p>
<p>1. Enter text.</p>
<p>2. Enter text.</p>

<p>Qualifying Non-Profit Organization: <input type="checkbox"/> The qualifying non-profit is the sole developer for this project If the qualifying non-profit is not the sole developer, please provide a description of the non-profit's participation in the development, operation, and management of the project:</p>
<p>Enter text.</p>
<p>If the qualifying non-profit is not the sole developer for this project, will the non-profit hold a 51% or greater interest in the General Partnership, or if a Partnership, or an LLC, will it be the Managing Member? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

The undersigned hereby certifies that the statements made in this attachment are true, correct and complete.

Developer Name: Enter text.	
Developer Signature:	Title: Enter text.
Printed Name: Enter text.	

Co-Developer Name: Enter text.	
Co-Developer Signature:	Title: Enter text.
Printed Name: Enter text.	

AUTHORIZATION FOR RELEASE OF DEVELOPER TEAM INFORMATION

The form is to be completed and submitted for each member of the development team as reflected in Attachment “D”.

To complete this form, please enter the required information and signature in the lower table. The upper table with be completed by the City.

Project Name: Enter text.
Developer Team Member Company: Enter text.

We hereby request and authorize you to release to the City of Hawthorne, California (City) any information regarding the Developer listed above, as it relates to their performance in the development and operation of housing under a federal, Low-Income Housing Tax Credit, State, local or other governmental agency assisted activity, inclusive of curing of or failure to cure any project non-compliance, and an formal/informal action by your agency as it relates to the aforementioned entities' assisted development. Any other development data that would be relevant to the City in its assessment of their development experience and compliance record would be appreciated.

Developer Team Member Company Name: Enter text.	
Developer Team Member Signature:	Date: Enter text.
Printed Name: Enter text.	Title: Enter text.

DEVELOPER REFERENCES

Please provide contact information for a minimum of three (3) references:

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Developer Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Developer Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Developer Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

DEVELOPER REFERENCES

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Developer Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.
Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Developer Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.
Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Developer Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

DEVELOPMENT TEAM

Project Name: Enter text.	Date: Enter text.
Developer: Enter text.	

APPLICANT	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

OWNER	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

GENERAL PARTNER or MANAGING MEMBER	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

DEVELOPER	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

CO-DEVELOPER	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

DEVELOPMENT CONSULTANT	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

GENERAL CONTRACTOR	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.
List all owners, officers, and affiliates of the General Contractor with controlling interest or that hold percentages of equity (indicate respective percentages): Enter text.	

ENERGY CONSULTANT	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.

ARCHITECT	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.

MANAGEMENT COMPANY	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.

SYNDICATOR	
Name: Enter text.	Phone: Enter text.
Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact person email address: Enter text.

Describe the process for assembling the Development Team: Enter text.
--

Describe any direct or indirect financial or other interest any member of the development team may have with another member of the development team or between any of the parties involved in the acquisition, construction, refinancing, rehabilitation, or management of this project:

Enter text.

Provide a narrative description of the Team's organizational capacity and the role to be play be each key member:

Enter text.

DEVELOPMENT TEAM RESUMES

Attach resumes behind this coversheet for each member of the Development Team.

MANAGEMENT TEAM INFORMATION

Project Name: Enter text.	Date: Enter text.
Management Company Name: Enter text.	

Please list the affordable housing developments that the management company is managing:

	Project Name and Address	New Construction	Rehabilitation	Funding			Number of Total Units	Number of Affordable Units	Date Placed in Service	Multi-Family	Single Family
				HUD	LIHTC	Other					
1	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
2	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
3	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
4	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
5	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
6	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
7	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
8	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
9	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
12	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter #	Enter #	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>
TOTALS							Enter #	Enter #			

AUTHORIZATION FOR RELEASE OF MANAGEMENT COMPANY INFORMATION

Project Name: Enter text.
Management Company Name: Enter text.

We hereby request and authorize you to release to the City of Hawthorne, California (City) any information regarding the Management Company listed above, as it relates to their performance in the development and operation of housing under a federal, Low-Income Housing Tax Credit, State, local or other governmental agency assisted activity, inclusive of curing of or failure to cure any project non-compliance, and an formal/informal action by your agency as it relates to the aforementioned entities' assisted development. Any other development data that would be relevant to the City in its assessment of their development experience and compliance record would be appreciated.

Management Company Name: Enter text.	
Management Company Signature:	Date: Enter text.
Printed Name: Enter text.	Title: Enter text.

MANAGEMENT COMPANY REFERENCES

Please provide contact information for a minimum of three (3) references:

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Management Company Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Management Company Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

Project Name: Enter text.	
Project Address: Enter text.	
Referral Firm: Enter text.	Management Company Relationship to Referral: Enter text.
Firm Address: Enter text.	
Contact Person: Enter text.	Contact Person Title: Enter text.
Contact Person Phone Number: Enter text.	Contact Person email: Enter text.

DEBARMENT, SUSPENSION, INELIGIBILITY AND EXCLUSION CERTIFICATION

I certify that the agency has not been debarred, suspended or otherwise found ineligible to receive funds by any agency of the executive branch of the federal government.

I further certify that should any notice of debarment, suspension, ineligibility or exclusion be received by the agency, the City of Hawthorne, Housing Department will be notified immediately.

Applicant: Enter text.	
Typed Name Authorized Board Official: Enter text.	Title: Enter text.
Signature of Authorized Board Official:	Date Signed: Enter text.

Approved by OMB
0348-0046

City of Hawthorne – Housing Department
Attachment "H" - Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure)

<p>1. Type of Federal Action: a. contract _# _ b. grant c. cooperative agreement d. loan e. loan guarantee f. loan insurance</p>	<p>2. Status of Federal Action: a.bid/offer/application ___# b. initial award c. post-award</p>	<p>3. Report Type: a. initial filing _# _ b. material change</p> <p>For material change only: Year ___# ___ quarter ___# ___ Date of last report ___# ___</p>
<p>4. Name and Address of Reporting Entity: ___# ___ Prime ___# ___ Subawardee Tier ___# ___, if Known:</p> <p>Enter text.</p> <p>Congressional District, if known:</p>	<p>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</p> <p>Enter text.</p> <p>Congressional District, if known:</p>	
<p>6. Federal Department/Agency:</p> <p>Enter text.</p>	<p>7. Federal Program Name/Description:</p> <p>Enter text.</p> <p>CFDA Number, if applicable: Enter text.</p>	
<p>8. Federal Action Number, if known:</p> <p>Enter text.</p>	<p>9. Award Amount, if known:</p> <p>\$ Enter text.</p>	
<p>10. a. Name and Address of Lobbying Registrant <i>(if individual, last name, first name, MI):</i></p> <p>Enter text.</p>	<p>b. Individuals Performing Services <i>(including address if different from No. 10a)</i> <i>(last name, first name, MI):</i></p> <p>Enter text.</p>	
<p>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 reported to the Congress semi-annually and 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.</p>	<p>Signature: _____</p> <p>Print Name: Enter text.</p> <p>Title: Enter text.</p> <p>Telephone No.: Enter text. Date: Enter text.</p>	
<p>Federal Use Only</p>	<p>Authorized for Local Reproduction Standard Form - LLL (Rev. 7-97)</p>	

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 follow-up 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; Invitations for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Included 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

CHDO CERTIFICATION APPLICATION

This portion of the HOME Application is for non-profit organizations in the Southern California area that wish to qualify as a City of Hawthorne Community Housing Development Organization (CHDO).

The City of Hawthorne invests in their CHDOs by providing funding opportunities through its HOME Investment Partnerships Program (HOME) allocation. A Hawthorne certified CHDO has the opportunity to apply for HOME funding assistance not available to other applicants.

A Community Housing Development Organization (CHDO) is a private nonprofit, community-based service organization that when undertaking development activities as a developer or sponsor has employees (paid staff) with the demonstrated capacity to develop or sponsor affordable housing for the community it serves. The definition of a CHDO, as well as other regulations regarding CHDOs, can be found in the Code of Federal Regulations Title 24, Part 92. To be certified as a CHDO, the non-profit organization must:

1. meet HUD's legal and regulatory requirements for designation as a CHDO; and
2. submit a completed CHDO application for consideration and be approved by the City of Hawthorne. Upon approval as a CHDO, additional criteria regarding proposing and providing affordable housing development project(s) in compliance with HOME requirements must be met. All existing Hawthorne approved CHDOs must be recertified whenever additional HOME CHDO funding is to be provided.

CHDO ELIGIBILITY CRITERIA

The CHDO eligibility criteria include legal status, organizational structure, capacity, experience, and financial standards as described below:

Legal Status:

A CHDO seeking certification or recertification must:

1. Be organized under state/local laws;
2. Have among its purposes, the provision of decent housing that is affordable to low-income and moderate-income persons, as evidenced in either its:
 - A. charter,
 - B. articles of incorporation,
 - C. by-laws, or
 - D. a resolution of the CHDO's Board of Directors.
3. Assure that no part of the CHDO's net earnings may benefit any members, founders, contributors or individuals.
4. Have a clearly defined geographic service area, and have a history of serving the community within which housing to be assisted with HOME funds is to be located. In general, an organization must be able to show one year of serving the community before HOME funds are reserved for the organization. However, a newly created organization formed by local churches, service organizations or neighborhood organizations may meet this requirement by demonstrating that its parent organization has at least a year of serving the community.
5. Have proof of nonprofit status: A CHDO must have received a tax exemption ruling from the Internal Revenue Service under section 501(c)(3) or 501(c)(4) of the Internal Revenue Code of 1986 (26 CFR 1.501(c)(3)-1 or 1.501(c)(4)-1)), is classified as a subordinate of a central organization non-profit under section 905 of the Internal Revenue Code of 1986, or if the private nonprofit organization is an wholly owned entity that is disregarded as an entity separate from its owner for tax purposes (e.g., a single

member limited liability company that is wholly owned by an organization that qualifies as tax-exempt), the owner organization has a tax exemption ruling from the Internal Revenue Service under section 501(c)(3) or (4) of the Internal Revenue Code of 1986 and meets the definition of "community housing development organization."

6. Not be a governmental entity (including the participating jurisdiction, other jurisdiction, Indian tribe, public housing authority, Indian housing authority, housing finance agency, or redevelopment authority) and is not controlled by a governmental entity. An organization that is created by a governmental entity may qualify as a community housing development organization; however, the governmental entity may not have the right to appoint more than one-third of the membership of the organization's governing body and no more than one-third of the board members may be public officials or employees of governmental entity.

Board members appointed by a governmental entity may not appoint the remaining two-thirds of the board members. The officers or employees of a governmental entity may not be officers or employees of a community housing development organization. Other restrictions on the participation of public officials on the boards of nonprofit organizations seeking public funds apply and CHDOs must observe conflict-of-interest policies. Low income residents/representatives who work for the awarding participating jurisdiction in any capacity must be considered public sector representatives.

7. Be neither controlled by, nor under the direction of, individuals or entities seeking to derive profit or gain from the organization. A community housing development organization may be sponsored or created by a for-profit entity, but:
 - A. The for-profit entity may not be an entity whose primary purpose is the development or management of housing, such as a builder, developer, or real estate management firm.
 - B. The for-profit entity may not have the right to appoint more than one-third of the membership of the organization's governing body. Board members appointed by the for-profit entity may not appoint the remaining two-thirds of the board members;
 - C. The community housing development organization must be free to contract for goods and services from vendors of its own choosing; and
 - D. The officers and employees of the for-profit entity may not be officers or employees of the community housing development organization.

Organizational Structure:

At the time of application, a CHDO seeking certification/recertification or as a CHDO must maintain accountability to low-income residents by:

1. Having a governing board wherein at least 1/3 of the governing board must be:
 - A. residents of low-income neighborhoods (neighborhoods where 51% or more of the residents are low-income); or
 - B. other low-income residents of the community (low income defined as having an annual income of less than 80% of the area median income). If the individual does not live in a low income neighborhood, the CHDO or the resident will need to certify that they qualify as low income; or
 - C. elected representatives of low-income neighborhood organizations whose primary purpose is to serve the interests of the neighborhood residents (i.e., block groups, town watch groups, civic associations, neighborhood church groups, etc.).
2. Provide a written process for low-income program beneficiaries to advise the CHDO:

Input from the low-income community is not accomplished only by having low-income representation on the board. The CHDO must also provide a formal, written process for low-income program beneficiaries to advise the CHDO on design, siting, development, and management of affordable housing. The process must be described clearly and it must be included in the organization's bylaws or through a board resolution. CHDOs must establish systems for community involvement in parts of their service areas where housing development is planned but which are not represented on their boards.

Applicants are required to provide a copy of their formal process for low-income, program beneficiaries to advise the organization in decisions regarding design, siting, development, and management of affordable housing projects. This description should include the role that the CHDO's low-income program beneficiaries and tenants have taken in the designing, location of sites, and development and management of its affordable housing project(s) and the process the CHDO has taken in securing input from the persons in its target area.

The applicant will be asked to detail the steps the CHDO will take or has taken to include residents in their service areas which do not have representatives on their board. Dates and locations of public meetings/forums held in their target area within the last twelve (12) months to receive input and evidence of community support (i.e., letter of support from businesses, neighborhood associations, neighborhood groups) will be requested.

Balance of the Board Members:

The HOME program does not set any other limits on the balance of the composition of a CHDO's governing board and the remaining seats may be filled by a wide variety of individuals.

Capacity and Experience:

A CHDO seeking certification/recertification as a CHDO must demonstrate capacity to carry out HOME-assisted activities with experienced staff that have successfully completed similar projects, which draws a distinction between development, management of rental housing and development, and/or sale of housing for first-time homebuyers.

Where the CHDO will serve as a developer or sponsor, consultants, volunteers, or donated services may not be substituted for CHDO employees in meeting this requirement. For its first year of funding as a CHDO, an organization may satisfy this requirement through a contract with a consultant who has housing development experience to train appropriate key staff of the organization.

Where a CHDO will own housing, it must demonstrate capacity to act as owner of a project and meet the requirements of 24 CFR 92.300(a)(2). A CHDO does not meet the test of demonstrated capacity based on any person who is a volunteer or whose services are donated by another organization.

The intent of the CHDO capacity building requirement is for the CHDO to develop its own professional staff. As a result, the consulting staff cannot be municipal, county or state employees or consultants (paid or volunteer) not planning to train the CHDO's key staff to do their own housing development. Should CHDOs wish to share staffs with other nonprofits, a written formal agreement outlining the work to be undertaken and the service period must be in place. Such agreements do not alleviate the need for the CHDO to have its own staff.

Financial Standards:

A CHDO seeking certification/recertification as a CHDO must have financial accountability standards that conform to the requirements of 2 CFR 200.302 and 24 CFR 200.303.

ADDITIONAL CHDO REQUIREMENTS

All CHDOs are responsible for compliance with all applicable provisions of the HOME regulations at 24 CFR Part 92, inclusive of all federal requirements provided therein.

All applicants requesting certification are required to complete the self-evaluation which is part of the criteria for funding.

If your organization meets the qualifying criteria and wants to apply for designation as a CHDO, the Hawthorne Application for HOME CHDO Certification must be submitted. All required application documents must be submitted each year, or at the time of requesting additional CHDO funding, even if the entity has previously been certified as a City of Hawthorne CHDO, has previously submitted copies of these documents, and/or the information in the documents has not changed.

For additional information regarding the role of CHDOs, eligibility requirements, and explanations of regulations, please contact Kimberly Mack at (310) 349-1603, or review the following:

<https://files.hudexchange.info/resources/documents/Building-HOME-Chapter-3-CHDO-Requirements-and-Activities.pdf>

<https://www.hudexchange.info/home/topics/chdo>

**CHDO CERTIFICATION
APPLICATION INSTRUCTIONS**

IMPORTANT INFORMATION:

Community Housing Development Organizations (CHDOs) must meet all qualifying criteria regarding legal status, organizational structure, financial requirements, and capacity and experience to be certified or recertified. Although an agency may meet all of the qualifying criteria, the status of CHDO is not guaranteed and is at the sole discretion of the City of Hawthorne.

Agencies that are currently receiving CDBG or HOME funds, who are also applying for additional HOME funds, must be in compliance with all terms of those current agreement(s) and must not have any outstanding audit findings, monitoring findings or concerns as determined by the City of Hawthorne.

Applicants that meet the criteria for designation as a CHDO are not guaranteed an award of CHDO funds.

Nonprofit agencies must have an active Board of Directors documented by submitting an attendance list of board meetings for the previous 12 months and must submit a board membership list with their application.

Non-profit applicants must submit an applicant certification form (included in the application) signed by the Chairperson or President of the Board of Directors with a copy of the minutes of the meeting authorizing the submittal of the application attachment.

The applicant may be ineligible to apply for current funds if, in City of Hawthorne's discretion, the applicant has demonstrated a documented untimely or poor use of previously awarded HOME funds.

The applicant shall not exclude any organization or individual from participation under any project/program funded in whole or in part by HOME funds on the grounds of age, disability, race, creed, color, national origin, familial status, religion or sex.

Applicants are required to possess and submit a Unique Entity Identifier (UEI) number as a part of their application, and to also have their UEI number currently registered with the U.S. General Services Administration (GSA) System for Award Management (SAM).

No applicant, clients or contractors that have been suspended or debarred under the HOME or any other federal program may receive HOME funds (please refer to the U.S. General Services Administration (GSA) System for Award Management (SAM) at: <https://sam.gov/SAM/>)

**APPLICANT CERTIFICATION INFORMATION
APPLICATION WILL NOT BE ACCEPTED WITHOUT THIS INFORMATION COMPLETED AND
SIGNED BY THE APPROPRIATE INDIVIDUALS**

1. Please attach to this certification a copy of the Minutes of the Board or a Board Resolution from the applicant's governing body authorizing the submission of this application and identifying the authorized signer for the organization.
2. For newly created organizations formed by local churches, service or community organizations, please attach a statement that documents that its parent organization has at least one year of experience in serving the community.

The applicant hereby certifies that to the best of his/her knowledge, all information submitted as part of this application is true and accurate. The applicant acknowledges that all documentation supporting the information in the application is on file in the applicant's offices and available for review by City of Hawthorne staff during normal business hours. The applicant understands that failure to provide any of the documentation necessary to support the information in this application may result in processing delays, or in denial of the application request.

If HOME project funding is subsequently approved, the information in this application may be incorporated as part of an agreement and may be used to monitor performance of the project/program. The applicant additionally agrees that if an agreement is executed, the applicant will comply with all contract and HOME funding requirements.

CHDO Name: Enter text.	
Federal Tax ID Number (must be provided): Enter text.	UEI Number (must be provided): Enter text.

Signature of Authorized Official:	Date: Enter text.
Type/Print Name of Authorized Official: Enter text.	Title: Enter text.
Phone Number: Enter text.	email address: Enter text.

Signature of Board Chairman/Executive Director of Applicant Organization:	Date: Enter text.
Type/Print Name of Chairperson/Executive Director Enter text.	Title: Enter text.
Phone Number: Enter text.	email address: Enter text.

CHDO SELF- EVALUATION OF CHDO CERTIFICATION CRITERIA

Applicants for CHDO certification must meet all minimum threshold criteria for certification required by the U.S. Department of Housing and Urban Development (HUD) for certification of all CHDOs. City of Hawthorne staff will review applications to determine if an applicant meets the minimum criteria for certification.

Listed below are the minimum criteria to be certified as a CHDO. Please review these carefully before completing and submitting the application and check those that apply. If an applicant does not meet the minimum requirements, the applicant cannot be certified, and the City of Hawthorne will not perform any further review of the application.

HUD CHDO CERTIFICATION CRITERIA

Check those areas that are applicable to the applying organization

I. LEGAL STATUS	
<input type="checkbox"/>	<p>The nonprofit organization is organized under State or local laws, as evidenced by:</p> <p style="text-align: right;"> <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____ </p>
<input type="checkbox"/>	<p>No part of its net earnings inure to the benefit of any member, founder, contributor, or individual, as evidenced by:</p> <p style="text-align: right;"> <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____ </p>
<input type="checkbox"/>	<p>Has a tax exemption ruling from the Internal Revenue Service under section 501(c)(3) or (4) of the Internal Revenue Code of 1986, is classified as a subordinate of a central organization non-profit under section 905 of the Internal Revenue Code of 1986, or if the private nonprofit organization is an wholly owned entity that is disregarded as an entity separate from its owner for tax purposes (e.g., a single member limited liability company that is wholly owned by an organization that qualifies as tax-exempt), the owner organization has a tax exemption ruling from the Internal Revenue Service under section 501(c)(3) or (4) of the Internal Revenue Code of 1986 and meets the definition of a CHDO, as evidenced by:</p> <p style="text-align: right;"> <input type="checkbox"/> 501(c)(3) or (4) Certificate from the IRS. <input type="checkbox"/> Is classified as a subordinate of a central organization non-profit under section 905 of the Internal Revenue code, as evidenced by a group exemption letter from the IRS that includes the CHDO. <input type="checkbox"/> a group 501(c)(3) Certificate from the IRS (for local organizations which are a subordinate of a central organization non-profit under Sect. 905 </p>
<input type="checkbox"/>	<p>Has among its purposes the provision of decent housing that is affordable to low- and moderate-income people, as evidenced by a statement in the organization's:</p> <p style="text-align: right;"> <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation <input type="checkbox"/> By-laws <input type="checkbox"/> Resolutions Indicate applicable Page or Section Number: ____ </p>

II. CAPACITY		
<input type="checkbox"/>	<p>Conforms to the financial accountability standards of 2 CFR Part 200, as evidenced by:</p>	<input type="checkbox"/> a notarized statement by the president or chief financial officer of the organization <input type="checkbox"/> a certification from a Certified Public Accountant <input type="checkbox"/> a HUD approved audit summary
<input type="checkbox"/>	<p>Has a demonstrated capacity for carrying out activities assisted with HOME funds, as evidenced by:</p>	<p>For a CHDO undertaking development activities as a developer or sponsor:</p> <input type="checkbox"/> resumes and/or statements that describe the experience of key paid employees who have successfully completed projects similar to those to be assisted with HOME funds (demonstrating capacity cannot be met based on any person who is a volunteer or whose services are donated by another organization), <p style="text-align: center;">OR</p> <input type="checkbox"/> contract(s) with consultant firms or individuals who have housing experience similar to projects to be assisted with HOME funds, to train appropriate key staff of the organization. Note that this option is only available to a CHDO for their first year of funding.
<input type="checkbox"/>	<p>Has a history of serving the community within which housing to be assisted with HOME funds is to be located, as evidenced by:</p>	<input type="checkbox"/> CHDO must provide evidence of sufficient financial strength to operate and maintain the housing for the duration of the affordability period, inclusive of addressing sustained vacancies and maintenance of replacement reserve funds. <input type="checkbox"/> CHDO must supply the resumes and/or statements that describe the experience of key paid employees in managing all aspects of HUD assisted rental properties, inclusive of applicant intake, eligibility determination, fair housing, affirmative fair housing marketing, dispute resolution, affordability monitoring and reporting, property condition assessment and monitoring, and other operation related functions.
<p>NOTE: The CHDO or its parent organization must be able to show one year of serving the community prior to the date the participating jurisdiction provides HOME funds to the organization. In the statement, the organization must describe its history (or its parent organization's history) of serving the community by describing activities which it provided (or its parent organization provided), such as, developing new housing, rehabilitating existing stock and managing housing stock, or delivering non-housing services that have had lasting benefits for the community, such as counseling, food relief, or childcare facilities. The statement must be signed by the president or other official of the organization.</p>		

III. ORGANIZATIONAL STRUCTURE		
<input type="checkbox"/>	Maintains at least one-third of its governing board's membership for residents of low-income neighborhoods, other low-income community residents, or elected representatives of low-income neighborhood organizations as evidenced by the organization's:	<input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____
<input type="checkbox"/>	Provides a formal process for low-income, program beneficiaries to advise the organization in all of its decisions regarding the design, siting, development, and management of affordable housing projects, as evidenced by:	<input type="checkbox"/> the organization's By-laws, <input type="checkbox"/> Resolutions <input type="checkbox"/> a written statement of operating procedures approved by the governing body Indicate applicable Page or Section Number: ____
<input type="checkbox"/>	<input type="checkbox"/> N/A – Not a governmental entity (including the participating jurisdiction, other jurisdiction, Indian tribe, public housing authority, Indian housing authority, housing finance agency, or redevelopment authority) and not controlled by a governmental entity. <input type="checkbox"/> A CHDO cannot be a governmental entity (including the participating jurisdiction, other jurisdiction, Indian tribe, public housing authority, Indian housing authority, housing finance agency, or redevelopment authority) and cannot be controlled by a governmental entity. A CHDO may be created by a governmental entity, but all of the following restrictions apply:	(1) the governmental entity may not appoint more than one-third of the membership of the organization's governing body as evidenced by the organization's: <input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____ (2) the board members appointed by the governmental entity may not, in turn, appoint the remaining two-thirds of the board members, as evidenced by the organization's: <input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____ (3) no more than one-third of the governing board members are public officials or employees of the governmental entity, as evidenced by the organization's: <input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____ (4) no officers or employees of a governmental entity may be officers or employees of the CHDO, as evidenced by the organization's: <input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation Indicate applicable Page or Section Number: ____

<input type="checkbox"/>	<p><input type="checkbox"/> N/A – Not created by a for-profit entity</p> <p>If the CHDO is sponsored or created by a for-profit entity, the for-profit entity may not appoint more than one-third of the membership of the CHDO's governing body, and the board members appointed by the for-profit entity may not, in turn, appoint the remaining two-thirds of the board members; and the officers and employees of the for-profit entity may not be officers or employees of the CHDO, as evidenced by the CHDO's:</p>	<p><input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation</p> <p>Indicate applicable Page or Section Number: _____</p>
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IV. RELATIONSHIP WITH FOR-PROFIT ENTITIES		
<input type="checkbox"/>	<p>The CHDO is not controlled, nor receives directions from individuals, or entities seeking profit from the organization, as evidenced by:</p>	<p><input type="checkbox"/> the organization's By-laws <input type="checkbox"/> a Memorandum of Understanding (MOU)</p> <p>Indicate applicable Page or Section Number: _____ or provide a copy of MOU</p>
<input type="checkbox"/>	<p>A Community Housing Development Organization may be sponsored or created by a for-profit entity, however:</p>	<p>(1) the for-profit entity may not be an entity whose primary purpose is the development or management of housing, such as a builder, developer, or real estate management firm, as evidenced in:</p> <p><input type="checkbox"/> the for-profit organization's By-laws</p> <p style="text-align: center;">AND;</p> <p>(2) the CHDO is free to contract for goods and services from vendor(s) of its own choosing, as evidenced in the CHDO's:</p> <p><input type="checkbox"/> By-Laws <input type="checkbox"/> Charter <input type="checkbox"/> Articles of Incorporation</p> <p>Indicate applicable Page or Section Number: _____</p>

Please attach copies of all of the following:

1. A copy of your Articles of Incorporation, Charter, and By-laws.
2. Any pertinent resolutions which may impact the review and consideration of your CHDO application.
3. A copy of your 501(c)(3) or (4) Certificate from the IRS, or if qualified under a central organization non-profit under IRS Section 905 – a group 501(c)(3) Certificate from the IRS.

APPLICANT INFORMATION

APPLICANT INFORMATION (CHDO)	
Applicant Organization Name: Enter text.	
Address: Enter text.	
Phone Number: Enter text.	email address: Enter text.

Please provide the following information for the person responsible for completing this application who will be available and responsible for answering questions relating to the information provided:

Name: Enter text.
Title: Enter text.
Submitting Agency/Organization, if other than Applicant organization: Enter text.
Mailing Address: Enter text.
Phone Number: Enter text.
e-Mail Address: Enter text.

<p>Please define your geographic service area:</p> <p>Enter text.</p>
<p>If certified as a CHDO by another entity, please indicate the entity(ies) and the geographical service area(s) served:</p> <p>Enter text.</p>

APPLICANT/ORGANIZATION DESCRIPTION

Please provide the information requested below. If a document is required, include the document under this tab.

<p>1. Provide an Organizational Chart for the CHDO</p> <p>Be sure to include all positions that provide housing development or housing operation related activities for the CHDO. If the organization has an agreement to use another agency's staff, indicate in the organization chart how this staff relates to the CHDO staff.</p>
<p>2. Provide a list of all CHDO staff members that will serve a role in a potential HOME funded project (paid or volunteer)</p> <p>Note the key staff members and provide resumes for each. Resumes should indicate the experience and activities of the key staff members that relate directly to successfully completing housing development projects similar to those anticipated to be assisted with HOME funds. If the staff member(s) has/have worked on previous HOME funded projects for the CHDO, please indicate the project, and the respective role(s) played and activities of that staff member in the project.</p>
<p>3. Provide the name, title and contact information for the staff person responsible for development projects and compliance with HOME and other federal regulation compliance</p> <p>Provide documentation of this person's experience or training directly related to the implementation of the HOME program.</p>
<p>4. Describe the make-up of your CHDO Board, indicating the specific types of experience and expertise in housing development that each member brings to the board that will assist the CHDO in meeting its housing goals.</p> <p>Include a Board Membership List, and a signed Member Designation Form (found at the end of this tab) for each member of the Board. If the member is representing a low income group, provide documentation (minutes of a meeting, resolution by the board of the group being represented) that the member is an "elected" representative of that board or group.</p>
<p>5. Provide a Copy of All Agendas and Minutes for Agency Board Meetings Over The Last 12 Months.</p>

6. Provide a copy of your formal process for low-income, program beneficiaries to advise the organization in decisions regarding design, siting, development, and management of affordable housing projects.

This description should include the role your low-income program beneficiaries and tenants have taken in the designing, location of sites, and development and management of your CHDOs affordable housing project(s) and the efforts the CHDO has undertaken for securing input from the persons in your target area.

In the process of developing a housing project/program, detail the steps the CHDO takes to include residents in their service areas which do not have representatives on their board. Provide the dates and location of public meetings/forums held in your target area within the last twelve (12) months to receive input and evidence of community support (i.e., letter of support from businesses, neighborhood associations, groups). If you are anticipating submitting a project during the next 12 month period, describe how surrounding property owners were or will be notified and what their role was/will be in the design, siting, development, and management of affordable housing projects.

7. Has the CHDO utilized financial and/or other partnerships to build development capacity over the last twelve months?

Please list these partnerships, LLCs, LLPs, and/or other legal entities and their members and provide a copy of the partnership agreement, memo of understanding, and/or documentation as to the role the CHDO plays in the partnership(s).

8. How has/will the CHDO work to expand its housing development capacity through attendance at workshops and trainings?

Enter text.

What trainings/workshops did staff and or the CHDO board members attend within the last year? Which staff/board members attended these trainings/workshops? Provide documentation (such as certificates, agendas, dates/training organization, etc.) of attendance.

Enter text.

What HUD sponsored HOME or other trainings/workshops has your staff attended within the past three years? Which staff/board members attended these trainings/workshops? Provide documentation (such as certificates, agendas, etc.) of attendance.

Enter text.

What future workshops or training opportunities would the CHDO like to have available to them? Have you allocated money in your budget for training (be sure to also include this under your budget)?

Enter text.

9. Is the CHDO sponsored by a non-profit/charity, by a religious organization, by a local/state government and public agency, or by a for-profit corporation? If so, describe the relationship of the CHDO to that sponsor.

Enter text.

BOARD MEMBERSHIP LIST

CHDO Name: Enter text.

	Board Member Name	Home Address (Principal Residence)	Employer (If unemployed, please specify)	Select the appropriate category (one only) for each Board Member (Remember to attach supporting documentation)					Term Expiration Date
				Low Income Household (at or below 80% of AMI)	Resident of Low Income Neighborhood	Elected Rep of Low Income Neighborhood Organization	Public Official, Employee, Appointee	Private Sector	
1	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
2	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
3	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
4	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
5	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
6	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
7	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
8	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
9	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.
10	Enter text.	Enter text.	Enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enter text.

By my signature below, I hereby certify that the above listing of current active board members is true and accurate:

Board President Signature: _____ Date: _Enter text.

MEMBER DESIGNATION FORM
(This form must be completed by each Member of the Board).

1. I am a low-income resident of the community. Low-income resident must have a household income at or below the 80% of the area median household income for the area in which he or she lives, according to HUD. (Community can mean neighborhood, the city, county, or metropolitan area)*

2. I am a resident of a low-income neighborhood. A low-income neighborhood is an area where 51% or more of the households in that Census tract have incomes at or below 80% of the area median household income, as defined by HUD. (This does not mean that you must be a low-income person only that your residence is in a low-income neighborhood.) The address of my principal residence is:

_____ Enter text. _____

3. I am an elected representative of a low-income neighborhood organization. (A low-income neighborhood organization is an organization composed primarily of residents of a low-income neighborhood. Examples of such organizations are: block groups, town watch organizations, civic associations, neighborhood church groups, etc.)

The Name of this organization is: Enter text. _____

Attached to this designation form is evidence of election (appointment) by the low income members of the organization.

4. I am a representative of the public sector. I am a/an:

- Elected public official
- Appointed public official
- A public/government employee of a public agency or department
- Appointed by a public official to serve on this CHDO

5. I am a representative appointed by the for-profit entity which created or sponsored this CHDO.

6. Other.

*** If you are designated as Low-Income member, please indicate how your eligibility was determined by the CHDO:**

Enter text. _____

I agree to notify the CHDO board if my representation status as a CHDO board member should change during my tenure on the board. I certify that the information provided above is correct as of the date indicated below:

_____ Enter text. _____
Board Member Signature

_____ Enter text. _____
Date

_____ Enter text. _____
Print Name

Please indicate what housing or development related expertise you bring to the CHDO as a member of the board: Enter text.

FINANCIAL INFORMATION

Please provide the following:

1. A notarized statement by the board chairman/president or chief financial officer of the organization, or a certification from a certified public account, or a HUD approved audit summary which states that the agency conforms or will conform as a CHDO to the financial accountability standards of the "standards for financial management systems" (2 CFR 200.302 and 2 CFR 200.303).

2. A copy of the most recent audit of the agency.

3. A copy of your most recent full fiscal year budget.

The following documents require signatures and are to be included under this tab:

1. Conflict of Interest Certification
2. Affirmative Fair Housing Marketing Plan Procedures Acknowledgement
3. Application Certifications and Assurances
4. Section 3 Commitment

CONFLICT OF INTEREST CERTIFICATION

I/We certify that I/WE understand and adhere to the conflict of interest provisions for HOME recipients as required by 2 CFR Part 200, and that no exceptions may be made to these provisions (CPD Notice 98-09 – July 14, 1998).

I/We further certify that in accordance with 24 CFR 92.356, that no employee, agent, consultant, officer, or elected official or appointed official of the participating jurisdiction, State recipient, or subrecipient which is receiving HOME funds who exercise or have exercised any functions or responsibilities with respect to activities assisted with HOME funds or who are in a position to participate in a decision-making process or gain inside information with regard to these activities may obtain a financial interest or financial benefit from a HOME-assisted activity, or have a financial interest in any contract, subcontract, or agreement with respect to the HOME-assisted activity, or the proceeds from such activity, either for themselves or those with whom they have business or immediate family ties, during their tenure or for one year thereafter. Immediate family ties include (whether by blood, marriage or adoption) the spouse, parent (including a stepparent), child (including a stepchild), brother, sister (including a stepbrother or stepsister), grandparent, grandchild, and in-laws of a covered person.

I/We additionally certify that no owner, developer, or sponsor of a project assisted with HOME funds (or officer, employee, agent, elected or appointed official, or consultant of the owner, developer, or sponsor or immediate family member or immediate family member of an officer, employee, agent, elected or appointed official, or consultant of the owner, developer, or sponsor) whether private, for-profit or nonprofit (including a community housing development organization (CHDO) when acting as an owner, developer, or sponsor) may occupy a HOME-assisted affordable housing unit in a project during the required period of affordability specified in § 92.252(e) or §92.254(a)(4). This provision does not apply to an individual who receives HOME funds to acquire or rehabilitate his or her principal residence or to an employee or agent of the owner or developer of a rental housing project who occupies a housing unit as the project manager or maintenance worker.

These conflict of interest prohibitions include but are not limited to any unit benefits or financial assistance associated with HOME projects or programs administered by the applicant, including:

1. Occupancy of a rental housing unit in a HOME-assisted rental project;
2. Receipt of HOME tenant-based rental assistance;
3. Purchase or occupancy of a homebuyer unit in a HOME-assisted project;
4. Receipt of HOME homebuyer acquisition assistance; or
5. Receipt of HOME owner-occupied rehabilitation assistance.

In addition, I/We certify that no member of Congress of the United States, official or employee of HUD, or official or employee of the City of Hawthorne shall be permitted to receive or share any financial or unit benefits arising from the HOME-assisted project or program.

I/We certify that prior to the implementation of the HOME-assisted activity exceptions to these provisions may be requested by the applicant in writing to the City of Hawthorne. If an exception is requested, the applicant certifies that it will demonstrate and certify that the policies and procedures adopted for the activity will ensure fair treatment of all parties, and that the covered persons referenced in this policy will have no inside information or undue influence regarding the award of contracts or benefits of the HOME assistance. The applicant understands that the City of Hawthorne may grant exceptions or forward the requests to HUD as permitted by 24 CFR 92.356, and 2 CFR Part 200, as they apply.

Enter text.

Chairman of the Board - Signature

Date

Enter text.

Print Name

**CITY OF HAWTHORNE
AFFIRMATIVE FAIR HOUSING MARKETING PLAN PROCEDURES ACKNOWLEDGEMENT**

STATEMENT OF POLICY

The City of Hawthorne, in accordance with the regulations of the HOME Investment Partnerships Program (HOME) (24 CFR 92.351), has established an "Affirmative Fair Housing Marketing Plan" to ensure that the City and all entities to whom they have allocated HOME or Low Income Housing Trust Funds employ a marketing plan that promotes fair housing and ensures outreach to all potentially eligible households, especially those least likely to apply for assistance.

The City's policy is to provide information and attract eligible persons to available housing without regard to race, color, national origin, sex, religion, familial status (persons with children under 18 years of age, including pregnant women), or disability. The procedures followed are intended to further the objectives of Title VIII of the Civil Rights Act of 1968 (Fair Housing Act), and Executive Order 11063, which prohibits discrimination in the sale, leasing, rent and other disposition of properties and facilities owned or operated by the federal government or provided with federal funds.

PROCEDURES

Although the HOME Final Rule regarding the development and adoption of affirmative marketing procedures and requirements apply to rental and homebuyer projects containing five or more HOME-assisted units, regardless of the specific activity the funds finance (e.g., acquisition, rehabilitation, and/or new construction), the City of Hawthorne will apply their affirmative marketing procedures to all programs funded by the City of Hawthorne, such as tenant-based rental assistance, owner-occupied rehabilitation, and down payment assistance only programs.

The City of Hawthorne is committed to the goals of affirmative marketing that will be implemented through the following procedures:

- A. Providing equal service without regard to race, color, religion, sex, handicap, familial status, or national origin of any client, customer, or resident of any community;
- B. Keeping informed about fair housing laws and practices;
- C. Informing clients and customers about their rights and responsibilities under the fair housing laws by providing verbal and written information;
- D. Evaluating the effectiveness and compliance of all marketing as it relates to fair housing;
- E. Including the Equal Opportunity logo or slogan, and where applicable the accessibility logotype, in all ads, brochures, and written communications to owners and potential tenants;



- F. Displaying the HUD's fair housing posters (at a minimum, English and Spanish versions) in rental offices or other appropriate locations;
- G. Maintaining a database of community contacts and media concerns that can facilitate affirmative marketing and outreach efforts.
- H. Soliciting applications for vacant units from persons in the housing market who are least likely to apply for assistance without the benefit of special out-reach efforts; working with the local public housing authority and other service and housing agencies to distribute information to a wide and diversified population;

- I. Maintaining documentation of all marketing efforts for targeted demographic groups (such as copies of newspaper ads, memos of phone calls, and copies of letters).
- J. Maintaining a record of applicants for vacant units with a general profile of the applicant, how the applicant learned of the vacancy, the outcome of the application, and if rejected, why; maintaining this record for two years or through one compliance audit, whichever is the shorter period of time.
- K. Where changing demographics present challenges when marketing to an eligible population that is of limited English proficiency (LEP), the City of Hawthorne and its funded entities, striving to:
 - 1. Translate its marketing and application materials to serve these populations
 - 2. Hire bi-lingual employees or have quick access to interpreters/translators
 - 3. Work with the language minority-owned print media, radio and television stations
 - 4. Partner with faith-based and community organizations that serve newly arrived immigrants, and
 - 5. Conduct marketing activities at adult-education training centers or during "English as a Second Language" classes.
- L. Requiring all applicants for Hawthorne HOME funds to sign, submit, and adhere to the policies included in the certifications relating to fair housing required in applications packets.

ASSESSMENT

In conjunction with annual on-site compliance reviews, the City of Hawthorne will:

- A. Review and evaluate records of affirmative marketing efforts (advertisements, flyers, and electronic media spots, etc.);
- B. Evaluate outcomes and effectiveness of marketing efforts and provide recommendations for changes as needed.
- C. Evaluate whether good faith efforts have attracted a diversified cross-section of the eligible population.

CORRECTIVE ACTIONS

Failure to meet affirmative marketing requirements will result in the following corrective actions:

- A. For failure to comply, the City of Hawthorne will set a probationary period for compliance, not to exceed six months, during which time the City of Hawthorne will provide more specific guidelines for compliance.
- B. Further failure to comply with the affirmative marketing requirements may result in the withdrawal of HOME support.
- C. Further failure to take appropriate actions to correct discrepancies in affirmative marketing programs may result in steps to recover all invested HOME funds.

We acknowledge and agree with the conditions and requirements of the City of Hawthorne Affirmative Marketing Procedures:

Enter text.

Chairman of the Board Signature

Date

Enter text.

Print Name

APPLICATION CERTIFICATIONS AND ASSURANCES

I/We declare under penalty of perjury that all of the application statements, attachments hereto, are true and correct.

Further, I/We agree that I/we shall meet, and continue to meet, all federal and local CHDO requirements outlined within the application and subsequent funding agreement during the funding timeframe, or the term of any related HOME agreement, whichever is longer, or the City of Hawthorne shall not be required to reimburse or disburse HOME funds.

Further, I/We agree that I/we shall hold the City of Hawthorne, its officers, employees, agents, and representatives harmless from any claims or lawsuits or from any damages that I/we may incur because of any action taken or not taken on this application, and I/we further agree that I/we shall defend and indemnify the City of Hawthorne, its officers, employees, agents, and representatives from and for any claims or lawsuits brought by, or damages paid to, any other persons, parties, or entities because of any action taken or not taken on this application. Such indemnification shall include payment of attorney's fees and costs incurred by the City of Hawthorne, its officers, employees, agents, and representatives for defending, negotiating, and settling such claims or lawsuits.

I/We have read and understand the above and it is complete and acceptable to me/us. I/We further agree to abide by the foregoing conditions and realize that the failure of any or all of these conditions may relieve the City of Hawthorne from any obligations to pay any funds pursuant to the application for assistance.

Enter text.

Chairman of the Board - Signature

Date

Enter text.

Print Name

CHDOs must certify that they will abide by Section 3 and include this clause in all development contracts:



**SECTION 3 CLAUSE
CERTIFICATIONS AND ASSURANCES FOR HOME FUNDING RECIPIENTS**

- A. The work to be performed under this contract is on a project assisted under a program providing direct Federal financial assistance from the Department of Housing and Urban Development and is subject to the requirements of 24 CFR Part 92 - HOME Investment Partnership Program and §92.508(7) referencing Section 3 of the Housing and Urban Development Act of 1968, as amended, 12 U.S.C. 1701u. Section 3 requires that to the greatest extent feasible, opportunities for training and employment be given to lower income residents of the area of the Section 3 covered project, and contracts for work in connection with the project be awarded to business concerns which are located in, or owned in substantial part by persons residing in the area of the Section 3 covered project.
- B. The parties to this contract will comply with the provisions of said Section 3 and the regulations issued pursuant thereto by the Secretary of Housing and Urban Development set forth in 24 CFR 135, and all applicable rules and orders of the Department issued there under prior to the execution of this contract. The parties to this contract certify and agree that they are under no contractual or other disability which would prevent them from complying with these requirements.
- C. The contractor will send to each labor organization or representative of workers with which he has a collective bargaining agreement or other contract or understanding, if any, a notice advising the said labor organization or worker's representative of his commitments under this Section 3 clause and shall post copies of the notice in conspicuous places available to employees and applicants for employment or training.
- D. The contractor will include this Section 3 clause in every subcontract for work in connection with the project and will, at the direction of the applicant for or recipient of Federal Financial assistance, take appropriate action pursuant to the subcontract upon a finding that the subcontractor is in violation of regulations issued by the Secretary of Housing and Urban Development, 24 CFR Part 135. The contractor will not subcontract with any subcontractor where it has notice or knowledge that the latter has been found in violation of regulations under 24 CFR Part 135 and will not let any subcontract unless the subcontractor has first provided it with a preliminary statement of ability to comply with the requirements of these regulations.
- E. Compliance with the provisions of Section 3, the regulations set forth in 24 CFR Part 135, and all applicable rules and orders of the Department issued there under prior to the execution of the contract, shall be a condition of the Federal financial assistance provided to the project, binding upon the applicant or recipient, its contractor and subcontractors, its successors, and assigns to those actions specified by the grant or loan agreement or contract through which Federal assistance is provided, and to such sanctions as are specified by 24 CFR Part 135.

I/we hereby certify that I/we will abide with the Section 3 Clause requirements, and include such in all development contracts:

Organization Name: Enter text.	Project Name: Enter text.
Signature of Executive Director/Authorized Official: 	
Type/Print Name and Title of Authorized Official: Enter text.	Title: Enter text.
Phone Number: Enter text.	Date: Enter text.



Additional CHDO Information

Please answer the following questions completely and provide any requested information.

1. Provide a brief description of your organization's role(s) in developing affordable housing opportunities in the City of Hawthorne or surrounding communities (developments, programs, etc.) during the last three years. Include the population(s) you serve and the percentage of the population(s) at or below 80% of Area Median Income. Indicate if you serve any special needs populations.

Enter text.

2. Provide a brief description of the specific role(s) and activities your organization anticipated having in developing affordable housing opportunities in the City of Hawthorne during the upcoming year.

Enter text.

3. In the last three years, has your organization done any analyses of the local housing market and the housing needs of low-income households in its service area? If yes, what were the outcomes of the analysis?

Enter text.

4. Describe how your organization will bring a particularly new or unusual approach to meeting the housing needs of low- and moderate-income households. Indicate how these are different or complement existing developments and/or programs.

Enter text.

5. Applicants that are currently receiving CDBG or HOME funds, who are also applying for HOME funds, must be in compliance with all terms of their current agreement(s) and must not have any outstanding audit findings, monitoring findings, Fair Housing issues or concerns, as determined by the City of Hawthorne. If there are current audit/monitoring findings, Fair Housing issues, and/or other concerns, please describe what they are in detail and how they are being addressed?

Enter text.