

CITY OF NORTHAMPTON

**Community Development Block Grant Funding Application
For Construction, Public Infrastructure, Public Facilities and Demolition
Projects**

DATE: _____

I. APPLICANT Agency Name _____
Address _____
Contact Person _____
Phone Number _____
E-mail Address _____
Development Consultant _____

II. REQUEST FOR CDBG FUNDS

Type and Amount: _____

III. PROJECT

Address _____

Description (rehab vs. new construction, # of units, rental vs. ownership, unit sizes)

Describe site (relevant environmental concerns, proximity to public transportation, neighborhood amenities, etc.)

Describe nature and extent of rehab or new construction

IV. NEED

Describe public benefit to be derived from the project:

Intended Beneficiaries:

Describe how the project will impact the City's prioritized community development needs:

V. UNIT COMPOSITION AND RENTS

<u>Bedroom Mix</u>	<u># Units Market Rate</u>	<u>Below Market Rate</u>	<u>Proposed Rent with Subsidy</u>	<u>Without</u>
#1 bdrm.	_____	_____	_____	_____
#2 bdrm.	_____	_____	_____	_____
#3 bdrm.	_____	_____	_____	_____
#4 bdrm.	_____	_____	_____	_____

<u># of units available to:</u>	<u>% of total units</u>
Households with \leq 30% of median income: _____	_____
\leq 50% of median income: _____	_____
\leq 80% of median income: _____	_____

VI. FINANCIAL INFORMATION:

Total project costs _____

Total cost per unit _____

Project Cost Breakdown:

Pre-Development _____

Acquisition _____

Rehab/New Construction _____

Site Improvements _____

**ENCLOSE: Letters of commitment from secured funding sources.
Financial pro forma for a 10 year operating period.**

List Funding Sources Secured or Sought

<u>Source</u>	<u>Type</u>	<u>Amount</u>	<u>Use of Funds</u>	<u>Status</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

VII. USE OF CDBG FUNDS:

Describe the purpose of the CDBG funds: _____

What % of the total project cost will be covered by the CDBG funding?

Describe why this amount of CDBG funding and the terms outlined are necessary for the success of the project?

VII. AFFORDABILITY:

Describe the affordability mechanism to be used and duration:

Describe how the rents or sales prices will be restricted and for how long:

VIII. PROJECT IMPLEMENTATION:

YES

NO

Will lead paint abatement be occurring?

Will asbestos abatement be occurring?

Does the project involve changes in land use from non-residential to residential or from one type of residential zoning to another?

Does the project involve a zone change or other zoning permits?

Will the project involve any temporary or permanent relocation of residents?

If relocation will occur, please describe:

Describe time line proposed and project phases:

Describe State and/or local permits required:

Describe the contractor selection process and plans for construction supervision:

Describe the efforts to comply with Section 3 hiring practices:

IX. DEVELOPER QUALIFICATIONS:

List members of the development team and describe their qualifications:

Describe selection method if not yet selected:

Describe past experiences/projects:

Describe qualifications of property manager (if rental project)

ENCLOSE THE FOLLOWING: for the Project Owner and Project Sponsor

- Most recent 12 month financial statement, including at a minimum a balance sheet and revenue and expense statement; (audited if available)
- Interim financial statement (if more than 12 months has lapsed since date of annual financial statements), and;
- Current year's organizational budget

X. SUPPLEMENTAL INFORMATION: (Please include if the documents exist)

- _____ Evidence of Site Control (if not included, please explain status of site control)
- _____ Purchase and Sale Agreement
- _____ Property/Building Appraisal
- _____ 21 E Report
- _____ Site Plan
- _____ Rehab/Construction Specifications
- _____ Construction Cost Breakdown
- _____ Evidence that Rents/Sales Prices can be supported by the market
- _____ Sources and Uses of Funds Statement/ Spreadsheet
- _____ Rental Project/ provide 5 year operating budget
- _____ Ownership Project/ demonstrate sales price affordability to target population

Note: Any questions about this application and the submission materials required can be referred to the Housing Planner at 587-1288 Mon. - Friday 9:00 a.m. to 5:00 p.m. Office of the Mayor, City Hall, 210 Main Street, Northampton, MA, or at pkeller@northamptonma.gov

APPLICATION PREPARED BY:

Name _____

Title _____

Organization _____

e-mail Address _____

Date Received: _____

(For office use only)